

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>9-30-2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Norma Lester</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>8-4-22</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>3865 S. Lakewood Dr</u> City <u>Memphis, TN</u> State <u>38128</u> Zip Code <u>(901) 484-1767</u> Phone <u></u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route _____ City _____ State _____ Zip Code _____ Phone _____	
5. OFFICE SOUGHT (include district number, if applicable) <u>District 30 State Dem Party</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Norma Lester</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD <u>7-26-2022</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-2022</u>
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.	
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <u>Norma Lester</u> <u>9-30-22</u> <u>Norma Lester</u> <u>9-30-22</u> signature of candidate      date      signature of political treasurer      date	
11. WITNESS SIGNATURE <u>William T. Pruitt</u> <u>9-30-22</u> <u>William T. Pruitt</u> <u>9-30-22</u> signature of witness      date      signature of witness      date	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT .....	\$ <u>4416<sup>33</sup></u>
b. TOTAL RECEIPTS THIS PERIOD .....	\$ <u>446<sup>81</sup></u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....	\$ <u>2109<sup>48</sup></u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....	\$ <u>2752<sup>66</sup></u>
e. TOTAL LOANS OUTSTANDING .....	\$ <u>-0-</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....	\$ <u>-0-</u>



**SUMMARY PAGE - CANDIDATE**

RECEIVED OCT 10 2022

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Norma Lester</u>	14. REPORT COVERING THE PERIOD FROM <u>2-22</u> TO <u>1-30-22</u>
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**RECEIPTS**

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ -0-

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 446<sup>84</sup>

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 446<sup>84</sup>

16. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ -0-

17. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ -0-

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) ..... \$ 446<sup>84</sup>

**DISBURSEMENTS**

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

<u>Act Blue</u>	\$	<u>948</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) ..... \$ 948

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 500<sup>00</sup>

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 509<sup>48</sup>

20. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ 1600<sup>00</sup>

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ 2109<sup>48</sup>

**22. IN-KIND CONTRIBUTIONS**

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ -0-

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ -0-

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ -0-

**23. OBLIGATIONS**

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ -0-

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ -0-

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) ..... \$ -0-



**ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE <i>Norma Lester</i>		2. REPORT COVERING THE PERIOD FROM: <i>7-26-22</i> TO: <i>9-30-22</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Jim Strickland</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <i>267 Ridgefield Rd</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Memphis</i>	State <i>TN</i>	Zip Code <i>38111</i>	Amount of Contribution <i>\$250.00</i>
Occupation <i>Mayor</i>	Date of Contribution <i>7-28-22</i>		Aggregate This Election
Employer <i>City of Memphis</i>			
First Name	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Norma Lester</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <i>3865 S Lakewood Dr</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Memphis</i>	State <i>TN</i>	Zip Code <i>38128</i>	Amount of Contribution <i>\$196.84</i>
Occupation <i>Retired</i>	Date of Contribution <i>Bank Statement Adjustment</i>		Aggregate This Election
Employer			
First Name	Middle Name	Contribution Received For:	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation	Date of Contribution		Aggregate This Election
Employer			
First Name	Middle Name	Contribution Received For:	
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Amount of Contribution
Occupation	Date of Contribution		Aggregate This Election
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)			<i>\$446.84</i>

**ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE <i>Norma Lester</i>			2. REPORT COVERING THE PERIOD	
			FROM: <i>8-16-22</i>	TO: <i>9-30-22</i>
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Norma Lester</i>		<i>Repay loan</i> <i>8-16-22</i>		<i>\$1600.00</i>
Address <i>3865 S. Lakewood Dr</i>				
City	State   Zip Code <i>Memphis TN   38128</i>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <i>Chism Strategies</i>		<i>Mass Texting</i> <i>8-08-22</i>		<i>500.00</i>
Address <i>305 Greenoak Lane</i>				
City	State   Zip Code <i>Madison MS   39110</i>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State   Zip Code			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State   Zip Code			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State   Zip Code			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State   Zip Code			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				<i>\$1600.00</i> <i>2100.00</i>

**ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE <i>Norma Lester</i>				2. REPORT COVERING THE PERIOD FROM: <i>7-26-22</i> TO: <i>9-30-22</i>					
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									
Complete the Following for the Source of the Loan									
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
<i>Norma Lester</i>		<i>Norma Lester</i>		<i>\$ 1600<sup>00</sup></i>		<i>- 0 -</i>	<i>\$ 1600<sup>00</sup></i>	<i>- 0 -</i>	
Last Name/Organization Name				Address			City		State
<i>Norma Lester</i>				<i>3865 S. Lakewood Dr</i>			<i>Memphis</i>		<i>TN</i>
Zip Code				Loan Received For:			Date of Loan		
<i>38128</i>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			<i>4-29-22</i>		
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
Last Name/Organization Name		Address		City		State	Zip Code		Amount Guaranteed Outstanding
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
Last Name/Organization Name		Address		City		State	Zip Code		Amount Guaranteed Outstanding
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
Last Name/Organization Name		Address		City		State	Zip Code		Amount Guaranteed Outstanding
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
Last Name/Organization Name		Address		City		State	Zip Code		Amount Guaranteed Outstanding
First Name		Middle Name		First Name		Middle Name		Last Name/Organization Name	
Last Name/Organization Name		Address		City		State	Zip Code		Amount Guaranteed Outstanding
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
				<i>\$ 1600</i>		<i>-</i>	<i>1600</i>	<i>- 0 -</i>	

