

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <b>11/7/2019</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>Michalyn Easter-Thomas</b>			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE <b>2019-10-03</b>		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route <b>PO 70677</b>	City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38107</b>	Phone	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)					
Street or Rural Route <b>1963 Edward Dr</b>	City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38107</b>	Phone	
5. OFFICE SOUGHT (include district number, if applicable) <b>Memphis City Council, Dist. 7</b>			6. NAME OF POLITICAL TREASURER (may be candidate) <b>Bianca Cooper</b>		
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 <b>2019-09-24</b>			8.b. ENDING DATE OF REPORTING PERIOD <b>2019-09-30</b>		
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.					
_____ signature of candidate		_____ date		_____ signature of political treasurer	
11. WITNESS SIGNATURE					
_____ signature of witness		_____ date		_____ signature of witness	
				_____ date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT .....				\$	<u>4,857.25</u>
b. TOTAL RECEIPTS THIS PERIOD .....				\$	<u>261.19</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....				\$	<u>1,034.44</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....				\$	<u>4,084.00</u>
e. TOTAL LOANS OUTSTANDING .....				\$	<u>10,131.96</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....				\$	<u>0.00</u>





# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Michalyn Easter-Thomas</b>			2. REPORT COVERING THE PERIOD FROM: 2019-09-24 TO: 2019-09-30		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0.00</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>Emma</b>		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>\$100.00</b>
Last Name/Organization Name <b>Mitchell</b>					
Address <b>5348 Sputnik Dr</b>					
City <b>Memphs</b>	State <b>TN</b>	Zip Code <b>38118</b>		Date of Contribution <b>2019-09-29</b>	Aggregate This Election  <b>\$100.00</b>
Occupation <b>Unemployed</b>					
Employer <b>N/A</b>					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code		Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code		Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code		Date of Contribution	Aggregate This Election
Occupation					
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.)					<b>\$100.00</b>



# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD				
Michalyn Easter-Thomas					FROM: 2019-09-24		TO: 2019-09-30		
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 <b>Michalyn</b>		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name <b>Easter-Thomas</b>				<b>\$10,131.96</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$10,131.96</b>	
Address <b>PO 70677</b>				Loan Received For:			Date of Loan		
City <b>Memphis</b>		State <b>TN</b>	Zip Code <b>38107</b>	<input type="checkbox"/> Primary Election	<input checked="" type="checkbox"/> General Election		<b>2019-07-30</b>		
<input type="checkbox"/> Runoff (Local Elections Only)									
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				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name		Middle Name		First Name		Middle Name			
Last Name/Organization Name				Last Name/Organization Name					
Address				Address					
City		State	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
<b>4. Totals for all Loans (complete on last page of itemized loans)</b> (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.)				<b>\$10,131.96</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$10,131.96</b>	

