



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/3/2026 2.a. Candidate or Committee Name: Jeanice McCord
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 6001 Jackson Square Blvd Ste 400
City: Lavergne State: TN Zip Code: 37086 Phone: _____
5. Candidate Home Address: 139 Murray Lane
City: Lavergne State: TN Zip Code: 37086 Phone: _____
Candidate Email Address: jeanice4zone1@outlook.com
6. Office Sought: (include district number, if applicable) School Board, Zone 1
7. Name of Political Treasurer (may be candidate): Kelly Hill
Political Treasurer Email Address: kellydhill@GMAIL.COM
8. Category or Report: (check one)
☒ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ 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.
11. 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.

Candidate Signature _____ Date 477D-4263-9282-AVA1 Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$1,175.00</u>
c. Total Disbursements This Period	\$ <u>\$213.40</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$961.60</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jeanice McCord

14. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$1,175.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$1,175.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$213.40
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$213.40

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$250.00
- c. Total In-Kind Contributions Received This Period \$ \$250.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord
2. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jeremy Middle Name: _____ Last Name: Jones

Address: 1212 Laurel St Apt. 1203 City: Nashville State: TN Zip Code: 37203

Occupation: Founder / CEO Employer: Self Employed

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$300.00 Date of Contribution: 3/5/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Rodney Middle Name: _____ Last Name: Thompson

Address: 374 Uselton Road City: Shelbyville State: TN Zip Code: 37160

Occupation: NP Employer: Self Employed

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/10/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Ashley Middle Name: _____ Last Name: Benkarski

Address: 2322 Richmond Avenue City: Murfreesboro State: TN Zip Code: 37130

Occupation: Organizer Employer: CLASI

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$10.00 Date of Contribution: 3/11/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Janet Middle Name: _____ Last Name: Rachel

Address: 816 Fonnic Drive City: Nashville State: TN Zip Code: 37207

Occupation: Not Employed Employer: Not Employed

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/12/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$860.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord
2. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$860.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mack Middle Name: _____ Last Name: Moss

Address: 459 Tulane Ct City: Murfreesboro State: TN Zip Code: 37128

Occupation: IT Employer: UMG

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$25.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Audra Middle Name: _____ Last Name: Eickhoff

Address: 1307 Westlawn Blvd City: Nashville State: TN Zip Code: 37153

Occupation: Freelance Employer: Self

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$10.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Shannon Middle Name: _____ Last Name: Michel

Address: 2721 Westhaven Dr. City: Murfreesboro State: TN Zip Code: 37128

Occupation: Teacher Employer: RCS

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Keith

Address: 3 Liberty Rd Apt 1 City: Fayetteville State: TN Zip Code: 37334

Occupation: Specialist Employer: Parallon

Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$1,045.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord
2. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,045.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Barbara Middle Name: _____ Last Name: Fields
Address: 1029 Harmony Lane City: Hendersonville State: TN Zip Code: 37075
Occupation: Not Employed Employer: Not Employed
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$5.00 Date of Contribution: 3/18/2026 Aggregate This Election: \$ \$5.00

Business or Organization Name: _____ **OR**
First Name: Cortney Middle Name: _____ Last Name: Okolo
Address: 3230 Aspen Ryder Dr City: Rosenberg State: TX Zip Code: 77471
Occupation: IT Infrastructure Specialiat Employer: COH
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 3/21/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Brett Middle Name: _____ Last Name: Windrow
Address: 208 Land Breeze Dr. City: La Vergne State: TN Zip Code: 37086
Occupation: Attorney Employer: Progressive Insurance
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 3/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$1,175.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord
2. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

First Name: Kristen Middle Name: _____ Last Name: Randolph

Address: 1201 West Peachtree City: Atlanta State: Geo Zip Code: 30309

Occupation: web designer Employer: self employed

In-Kind Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ \$250.00 In-Kind Contribution Date: 3/9/2026 Aggregate This Election: \$ \$250.00

Description of In-Kind Contribution: website development

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ \$250.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord
2. Reporting Period: Start Date: 3/1/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: Karen (Kay) Middle Name: Williams Last Name: Williams Strategic R
Address: 1923 Morris Ave City: Columbia State: TN Zip Code: 38401
Purpose of Expenditure: Campaign Manager Payment
Amount of Expenditure: \$ \$50.25 Date of Expenditure: \$ 3/24/2026

Business or Organization Name: _____ **OR**
First Name: Jason Middle Name: _____ Last Name: Cole
Address: 5093 Murfreesboro Road City: Lavergne State: TN Zip Code: 37086
Purpose of Expenditure: Mavor Jason Cole's Spaghetti Dinner
Amount of Expenditure: \$ \$13.73 Date of Expenditure: \$ 3/22/2026

Business or Organization Name: Canva **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3212 E. Cesar Chavez Street Buil City: Austin State: TX Zip Code: 78702
Purpose of Expenditure: Canva payment for marketing materials
Amount of Expenditure: \$ \$108.66 Date of Expenditure: \$ 3/25/2026

Business or Organization Name: ActBlue **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144
Purpose of Expenditure: Fees
Amount of Expenditure: \$ \$12.38 Date of Expenditure: \$ 3/31/2025

Business or Organization Name: Stripe **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3180 18th St City: San Francisco State: CA Zip Code: 94110
Purpose of Expenditure: Fees
Amount of Expenditure: \$ \$28.38 Date of Expenditure: \$ 3/31/2025

Total Expenditures: \$ \$213.40

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)