



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 1/30/26 2.a. Candidate or Committee Name: Samuel B Nelson
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____
 4. Campaign Address: 2390 Twain Ave
 City: Memphis State: TN Zip Code: 38114 Phone: (901) 314-0901
 5. Candidate Home Address: 2390 Twain Ave
 City: Memphis State: TN Zip Code: 38114 Phone: (901) 314-0901
 Candidate Email Address: nelson4district10@gmail.com
 6. Office Sought: (include district number, if applicable) Shelby County Commissioner District 10
 7. Name of Political Treasurer (may be candidate): _____
 Political Treasurer Email Address: _____

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: 8/18/2025 End Date: 1/15/2026

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.

| | | | |
|---|--------------------------|---|------------------------|
| <u>[Signature]</u> Candidate Signature | <u>1-30-2026</u> Date | <u>[Signature]</u> Political Treasurer Signature | <u>1/30/26</u> Date |
| <u>[Signature]</u> Witness Signature | <u>1/30/26</u> Date | <u>[Signature]</u> Witness Signature | <u>1/30/26</u> Date |

12. Summary:

| | |
|---|--|
| a. Balance On Hand Last Report | \$ <u>0</u> |
| b. Total Receipts This Period | \$ <u>12,014.30</u> |
| c. Total Disbursements This Period | \$ <u>6,230.81</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>2,480.00 5,783.49</u> |
| e. Total Loans Outstanding | \$ <u>3,302.60</u> |
| f. Total Obligations Outstanding | \$ _____ |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
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: Beverly Middle Name: _____ Last Name: Taylor
Address: 4457 Pepper Tree Rd. City: Memphis State: TN Zip Code: 38109
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 95.70 Date of Contribution: 9/9/2025 Aggregate This Election: \$ 95.70

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Goodman-Bryan
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112
Occupation: COO Employer: Challenger Corporation
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 9/10/2025 Aggregate This Election: \$ 47.70

Business or Organization Name: _____ OR
First Name: Chris Middle Name: _____ Last Name: Allen
Address: 1355 Far Dr. City: Cardora State: TN Zip Code: 38016
Occupation: HR Compliance Officer Employer: City of Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 239.70 Date of Contribution: 9/13/2025 Aggregate This Election: \$ 239.70

Business or Organization Name: _____ OR
First Name: Mitchell Middle Name: _____ Last Name: Brooks
Address: PSC 10 Box 1455 City: APO State: AE Zip Code: 09142
Occupation: Military Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 239.70 Date of Contribution: 9/16/2025 Aggregate This Election: \$ 239.70

Total Contributions: \$ 622.80

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 622.80

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Johnny Middle Name: _____ Last Name: Devould
Address: 1409 B City: Oak Park State: IL Zip Code: 60302
Occupation: Systems Engineer Employer: Northrop Grumman
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 9/17/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Preston Middle Name: _____ Last Name: Cox
Address: 8515 Buttonwood Cv. City: German town State: TN Zip Code: 38139
Occupation: Senior Acct. Exec. Employer: GMEBC
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 9/17/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Donald Middle Name: _____ Last Name: Brandon
Address: 13323 Esperanza Rd. #710 City: Dallas State: TX Zip Code: 75240
Occupation: Physical Therapist Assist Employer: Powerback
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 95.70 Date of Contribution: 9/18/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Charlie Middle Name: _____ Last Name: Smith
Address: 2990 Hickory Hill Rd. City: Memphis State: TN Zip Code: 38115
Occupation: Inventory Supervisor Employer: Medline
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 861.60

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 861.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Angela Middle Name: T. Last Name: Faulkner
Address: 1439 Mary Jane Ave. City: Memphis State: TN Zip Code: 38116
Occupation: Senior Human Resource Mgr. Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 9/21/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Deborah Middle Name: _____ Last Name: Goodwin
Address: 211 Brenrich Cove S. City: Memphis State: TN Zip Code: 38117
Occupation: Lawyer Employer: Goodwin Lawfirm
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: RJ Middle Name: _____ Last Name: Moskop
Address: 526 E Parkway S City: Memphis State: TN Zip Code: 38104
Occupation: _____ Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Mary Middle Name: R. Last Name: Lee
Address: 262 Beckham Dr. City: Collierville State: TN Zip Code: 38017
Occupation: _____ Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 1,711.00

(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: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,711.60

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: Ollie Middle Name: _____ Last Name: Parker
 Address: 1392 Lehr Dr. #44 City: Memphis State: TN Zip Code: 38116
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 47.70 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: Sophie Middle Name: _____ Last Name: Moksop
 Address: 526 East Parkway South City: Memphis State: TN Zip Code: 38104
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 23.70 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: Valarie Middle Name: _____ Last Name: Cole
 Address: 6754 Quail Crest Ln. City: Memphis State: TN Zip Code: 38141
 Occupation: Physical Therapist Employer: Veterans Medical Center
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 23.70 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: Rochelle Middle Name: _____ Last Name: Beaver
 Address: 1962 Janis Dr. City: Memphis State: TN Zip Code: 38116
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 47.70 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 1,854.40

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,854.44

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Aida Middle Name: _____ Last Name: Talley

Address: 4172 Rosewind Cir. City: Memphis State: TN Zip Code: 38141

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 23.70 Date of Contribution: 9/24/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Miss Middle Name: _____ Last Name: Jones

Address: 1162 Brower St. City: Memphis State: TN Zip Code: 38111

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 47.70 Date of Contribution: 9/24/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Janet Middle Name: _____ Last Name: Lay

Address: 2121 Highway 12 S City: Ashland City State: TN Zip Code: 37015

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 23.70 Date of Contribution: 9/25/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Heather Middle Name: _____ Last Name: Stanfill

Address: 5910 Roxbury Dr. City: Memphis State: TN Zip Code: 38119

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 23.70 Date of Contribution: 9/27/25 Aggregate This Election: \$ _____

Total Contributions: \$ 1,973.20

(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: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,973.20

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: Belinda Middle Name: _____ Last Name: Tate
 Address: 12062 Monterey Rd. City: Kads State: TN Zip Code: 38028
 Occupation: _____ Employer: Ret Self Employed
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 500.00 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: Eddie Middle Name: _____ Last Name: Noely
 Address: 1959 Glen Turret Dr. City: Cordova State: TN Zip Code: 38016
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 50.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

Business or Organization Name: ~~_____~~ OR
 First Name: Sylvester Middle Name: _____ Last Name: Tate
 Address: 717 S Riverside Dr. #710 City: Memphis State: TN Zip Code: 38103
 Occupation: _____ Employer: Self employed Tate Computers
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 250.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ _____

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: \$ 2,773.20

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,773.20

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Aleshia Middle Name: _____ Last Name: Dennis-Smith
Address: 2337 Malone Ave. City: Memphis State: TN Zip Code: 38114
Occupation: Nurse Employer: One Tele Med
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 23.70 Date of Contribution: 10/3/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Justin Middle Name: _____ Last Name: Nelson
Address: 2390 Twain Ave. City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: Self employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 10/10/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Adolphus Middle Name: _____ Last Name: Lacey
Address: 97 Kings Ferry Rd. City: Monroese State: NY Zip Code: 10548
Occupation: Teacher Employer: Rippowam Cisca
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 95.70 Date of Contribution: 10/10/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Gary Middle Name: _____ Last Name: King
Address: 235 Adams St. #31 City: Brooklyn State: NY Zip Code: 11201
Occupation: Podcaster Employer: Self employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 23.70 Date of Contribution: 10/10/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 2,964.00

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,964.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Goodman-Bryan
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 10/11/2025 Aggregate This Election: \$ 95.40

Business or Organization Name: _____ OR
First Name: April Middle Name: _____ Last Name: Potter
Address: 7686 Red Hill Dr. City: Memphis State: TN Zip Code: 38119
Occupation: Program Coordinator Employer: Memphis City Employees Credit Union
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 10/25/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Aida Middle Name: _____ Last Name: Talley
Address: 1549 Edmondshire Dr. #137 City: Memphis State: TN Zip Code: 38134
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 23.70 Date of Contribution: 10/25/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Margreen Middle Name: T. Last Name: Holland
Address: 5035 Barfield Rd. City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: Self employed Holland Assoc
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 479.70 Date of Contribution: 11/10/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 3,562.80

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3,562.80

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Goodman-Bryan
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 11/14/25 Aggregate This Election: \$ 143.01

Business or Organization Name: _____ OR
First Name: Jessica Middle Name: _____ Last Name: Lotz
Address: 549 S Cox St. City: Memphis State: TN Zip Code: 38104
Occupation: Executive Director Employer: Innovate Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 11/16/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Kylie Middle Name: _____ Last Name: Fruha
Address: 6794 Eastridge Cv. City: Memphis State: TN Zip Code: 38120
Occupation: Senior Manager Employer: CBRE
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 239.70 Date of Contribution: 11/19/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Johnny Middle Name: _____ Last Name: Faulkner
Address: 1439 Mary Jane Ave. City: Memphis State: TN Zip Code: 38116
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 23.70 Date of Contribution: 12/7/2025 Aggregate This Election: \$ _____

Total Contributions: \$ 3,921.60

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3,921.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Dorcas Middle Name: _____ Last Name: Johnson
Address: 6627 Nelson Way Dr. City: Memphis State: TN Zip Code: 38141
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 23.70 Date of Contribution: 12/7/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Goodman-Bryan
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 12/11/25 Aggregate This Election: \$ 190.80

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Goodman-Bryan
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 47.70 Date of Contribution: 1/11/2026 Aggregate This Election: \$ 238.50

~~Business or Organization Name: _____ OR
First Name: April Middle Name: _____ Last Name: Potter
Address: 7686 Red Hill Dr. City: Memphis State: TN Zip Code: 38119
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____~~

Total Contributions: \$ 4,040.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,040.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Samuel Middle Name: _____ Last Name: Nelson
Address: 2390 Twain Ave City: Memphis State: TN Zip Code: _____
Occupation: Self employed Employer: MOIG / MOIG wellbeing
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 700 Date of Contribution: 8/18 Aggregate This Election: \$ 700

Business or Organization Name: _____ **OR**
First Name: Laura Middle Name: _____ Last Name: Marsh
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Jerry Middle Name: _____ Last Name: Ford
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 30 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Marcus Middle Name: _____ Last Name: Wade
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Total Contributions: \$ 4,800.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,800.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Stephanie Middle Name: _____ Last Name: Hillard
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Tyrone Middle Name: _____ Last Name: Hillard
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Linda Middle Name: _____ Last Name: Aldridge
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Whitney Middle Name: _____ Last Name: Bowen
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Total Contributions: \$ 4,900.70

(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: Samuel B Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,900.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Krista Middle Name: _____ Last Name: Crawford
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Phyllis Middle Name: _____ Last Name: Abraham
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Edna Middle Name: _____ Last Name: Caston
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Laura Middle Name: _____ Last Name: Caston
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Total Contributions: \$ 5,030.70

(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: Samuel B Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5,030.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Jeremy Middle Name: _____ Last Name: Gualledge
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Fatima Middle Name: _____ Last Name: Allen
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Morris Middle Name: _____ Last Name: Allen
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Latrina Middle Name: _____ Last Name: Allen
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Total Contributions: \$ 5,180.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5,188.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Rosie Middle Name: _____ Last Name: Brown
Address: 861 Josephine City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Business or Organization Name: _____ OR
First Name: Doris Middle Name: _____ Last Name: Potter
Address: 3121 Waco St. City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 43 Date of Contribution: 9/22/25 Aggregate This Election: \$ 43

Business or Organization Name: _____ OR
First Name: Socrates Middle Name: _____ Last Name: Jones
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: Manager Employer: UPS
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250 Date of Contribution: 9/17/25 Aggregate This Election: \$ 250

~~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: \$ 5,523.70
(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: Samuel B Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5,523.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: David Middle Name: _____ Last Name: Jerdon
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Kristen Middle Name: _____ Last Name: Davis
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Mario Middle Name: _____ Last Name: Davis
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: Kenneth Middle Name: _____ Last Name: Douglas
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 9/22/25 Aggregate This Election: \$ _____

Total Contributions: \$ 5,633.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5,633.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Brandon Middle Name: _____ Last Name: James
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 10-29-2025 Aggregate This Election: \$ _____

Business or Organization Name: Cigna OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3340 Players Club Pkwy #140 City: Memphis State: TN Zip Code: 38125
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000 Date of Contribution: 1-7-2026 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Ida Middle Name: _____ Last Name: Ma Gracia McKinney
Address: 3065 Belgrave Dr City: Memphis State: TN Zip Code: 38119
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Bridgitte Middle Name: _____ Last Name: Handy
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 6,908.70
(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 6,908.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Robert Middle Name: _____ Last Name: Zuber
Address: 945 Aubra Rd. City: Memphis State: TN Zip Code: _____
Occupation: Painter Employer: Self-Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 9/22/2025 Aggregate This Election: \$ 50

Business or Organization Name: Frager Law Firm (OR
First Name: Barry Middle Name: _____ Last Name: Frager
Address: 80 Monroe Ave. #325 City: Memphis State: TN Zip Code: 38103
Occupation: Attorney Employer: Frager Law Firm
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11/12/2025 Aggregate This Election: \$ 500

Business or Organization Name: _____ OR
First Name: Alberya Middle Name: _____ Last Name: Echols
Address: 852 Carson St. City: Memphis State: TN Zip Code: 38111
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Business or Organization Name: _____ OR
First Name: Julius Middle Name: _____ Last Name: Echols
Address: 852 Carson St. City: Memphis State: TN Zip Code: 38111
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Total Contributions: \$ 7,558.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 7,758.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Guaranteed Bank & Trust OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2.00 Date of Contribution: 9/30/2025 Aggregate This Election: \$ 2.00

Business or Organization Name: Guaranteed Bank & Trust OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2.00 Date of Contribution: 10/31/2025 Aggregate This Election: \$ 2.00

Business or Organization Name: Guaranteed Bank & Trust OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2.00 Date of Contribution: 11/28/2025 Aggregate This Election: \$ 2.00

Business or Organization Name: Guaranteed Bank & Trust OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2.00 Date of Contribution: 12/31/25 Aggregate This Election: \$ 2.00

Total Contributions: \$ 7,766.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 7,558.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Tyria Perkins Middle Name: _____ Last Name: Perkins
Address: 2735 Supreme Ave. City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Business or Organization Name: _____ OR
First Name: Rosalind Middle Name: _____ Last Name: Carter
Address: 3672 Bishops Bridge Rd. City: Memphis State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Business or Organization Name: _____ OR
First Name: Eddie Middle Name: _____ Last Name: Tunstall
Address: 830 Laurel St. City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Business or Organization Name: _____ OR
First Name: Hazel Middle Name: _____ Last Name: Kendrix
Address: 731 Semmes St. City: Memphis State: TN Zip Code: 38111
Occupation: ~~Retired~~ Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 9/22/25 Aggregate This Election: \$ 50

Total Contributions: \$ 7,758.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 7,766.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: H2P2 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 38885 ~~Germanatown~~ City: Germanatown State: IN Zip Code: 38183
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 800 Date of Contribution: 10/4/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Lee Middle Name: _____ Last Name: Ward
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 10/8/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Shun Middle Name: _____ Last Name: Smith
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 45 Date of Contribution: 10/29/2025 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: James Middle Name: _____ Last Name: LEE
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 10-29-25 Aggregate This Election: \$ _____

Total Contributions: \$ 8,711.70
(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Slick Text.com (online) OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 301 E 2nd St #304 City: Jamestown State: NY Zip Code: 14701
Purpose of Expenditure: Mass Campaign Text Account
Amount of Expenditure: \$ 31.83 Date of Expenditure: 10/23/2025

Business or Organization Name: Canva.com (online) OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2410 S Dupont Hwy City: Camden State: DE Zip Code: _____
Purpose of Expenditure: Campaign Flyers
Amount of Expenditure: \$ 57.50 Date of Expenditure: 10/23/2025

Business or Organization Name: Sam's Club OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7475 Winchester Rd. City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Food for Fundraiser
Amount of Expenditure: \$ 71.97 Date of Expenditure: 10/24/2025

Business or Organization Name: Soul 7 Band ACT Now Ventures OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Deposit for live band @ Fundraiser
Amount of Expenditure: \$ 200 Date of Expenditure: 10/24/2025

Business or Organization Name: Super Lo Foods OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3071 Perkins Rd City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Campaign Fundraiser
Amount of Expenditure: \$ 51.18 Date of Expenditure: 10/24/2025

Total Expenditures: \$ 413.11 412.48 ✓
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 412.48

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: Guaranteed Bank & Trust OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Bank Fee
 Amount of Expenditure: \$ 14.00 Date of Expenditure: 12/31/2025

Business or Organization Name: MidSouth Solutions Inc. OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2209 Whitten Rd. City: Memphis State: TN Zip Code: 38133
 Purpose of Expenditure: Yard Signs
 Amount of Expenditure: \$ 621.74 Date of Expenditure: 1/02/2026

Business or Organization Name: EZ Pay Parking OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Shelby County Gov. Meeting
 Amount of Expenditure: \$ 1.30 Date of Expenditure: 1/05/2026

Business or Organization Name: Universal Collections Systems OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Accidental payment, will pay campaign back
 Amount of Expenditure: \$ 40.00 Date of Expenditure: 1/05/2026

Business or Organization Name: Wix.com (online) OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1691 Michigan Ave City: Miami Beach State: FL Zip Code: 33139
 Purpose of Expenditure: Campaign website fee
 Amount of Expenditure: \$ 26.34 Date of Expenditure: 1/12/26

Total Expenditures: \$ ~~703.38~~ ~~1116.49~~ ~~703.38~~ ~~1115.34~~ 1115.86 (3)
 (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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1115⁸⁶

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: Gordon Foods OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1460 Union Ave City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Food for Fundraiser
Amount of Expenditure: \$ 36.05 Date of Expenditure: 10/24/2026

Business or Organization Name: Memphis Sports Masters OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7915 Winchester Rd City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Campaign Shirts
Amount of Expenditure: \$ 144.75 Date of Expenditure: 10/27/2025

Business or Organization Name: Soul 7 Band - ACT Now Ventures OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Remaining
Amount of Expenditure: \$ 600.00 Date of Expenditure: 10/25/2025

Business or Organization Name: Office Depot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5510 Poplar Ave City: Memphis State: TN Zip Code: 38119
Purpose of Expenditure: Campaign Supplies
Amount of Expenditure: \$ 20.84 Date of Expenditure: 10/25/2025

Business or Organization Name: Midsouth Solutions Inc. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2209 Whitten Rd. City: Memphis State: TN Zip Code: 38133
Purpose of Expenditure: Yard Signs
Amount of Expenditure: \$ 463.48 Date of Expenditure: 10/24/2025

Total Expenditures: \$ ~~2,381.61~~ ~~1,967.50~~ 2,380.98 (3)
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2380.98

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: Memphis Sports Masters OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7915 Winchester Rd City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Campaign Shirts
Amount of Expenditure: \$ 167.92 Date of Expenditure: 10/2/2025

Business or Organization Name: Sam's Club OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7475 Winchester City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Food for Campaign Movie Night Comm. Engagement
Amount of Expenditure: \$ 263.68 Date of Expenditure: 10/3/2025

Business or Organization Name: Lit OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1665 Winchester Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Supplies for Community Engagement
Amount of Expenditure: \$ 166.84 Date of Expenditure: 10/3/2025

Business or Organization Name: Wix.com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1691 Michigan Ave City: Miami Beach State: FL Zip Code: 33139
Purpose of Expenditure: Monthly Website Fee
Amount of Expenditure: \$ 26.34 Date of Expenditure: 10/11/2025

Business or Organization Name: Whitman Bros. Hardware OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2909 Park Ave City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Zip Ties for sign placement
Amount of Expenditure: \$ 25.23 Date of Expenditure: 10/13/2025

Total Expenditures: \$ ~~3431.62~~ ~~21618.51~~ ~~21980.99~~ 3030.99 (8)
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3030⁹⁹

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: Melrose High School / Renaissance OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2870 Deadrick Ave City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Melrose Alumni Breakfast Campaign Marketing
Amount of Expenditure: \$ 65.00 Date of Expenditure: 9/26/2025

Business or Organization Name: Memphis Sports Masters OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7915 Winchester Acl City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Campaign Shirts
Amount of Expenditure: \$ 172.31 Date of Expenditure: 9/26/2025

Business or Organization Name: Lit OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1665 Winchester Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Candy Bags for Orange Mound Parade
Amount of Expenditure: \$ 74.93 Date of Expenditure: 9/29/2025

Business or Organization Name: McDonald's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1472 S Trezevant City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Breakfast for Campaign Volunteers
Amount of Expenditure: \$ 41.12 Date of Expenditure: 9/27/2025

Business or Organization Name: Party World OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7825 Winchester Rd City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Candy Bags for Orange Mound Parade
Amount of Expenditure: \$ 27.56 Date of Expenditure: 9/26/2025

Total Expenditures: \$ ~~3,112.54~~ ~~2,999.45~~ ~~3,361.91~~ 3,411.91 (S)
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026 \$ 3411⁹¹
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ _____

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: Little Caesars Pizza OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 5018 Park Ave. City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Community Forum for Melrose High
 Amount of Expenditure: \$ 30.00 Date of Expenditure: 9/24/2025

Business or Organization Name: Family Dollar OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2981 Park Ave. City: Memphis State: TN Zip Code: 38114
 Purpose of Expenditure: Cutlery
 Amount of Expenditure: \$ 5.80 Date of Expenditure: 9/24/2025

Business or Organization Name: Canva.com (online) OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2410 S Dupont Hwy City: Camden State: DE Zip Code: _____
 Purpose of Expenditure: Marketing Flyers
 Amount of Expenditure: \$ 57.50 Date of Expenditure: 9/25/2025

Business or Organization Name: Family Dollar OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2981 Park Ave. City: Memphis State: TN Zip Code: 38114
 Purpose of Expenditure: Supplies for Orange Mound Parade
 Amount of Expenditure: \$ 28.96 Date of Expenditure: 9/29/2025

Business or Organization Name: ~~Melrose~~ Renaissance Center / Melrose OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: ~~255 N Main St.~~ 255 N Main St. City: Memphis State: TN Zip Code: 38103
 Purpose of Expenditure: Melrose Alumni Breakfast Campaign Marketing
 Amount of Expenditure: \$ 65.00 Date of Expenditure: 9/29/2025

Total Expenditures: \$ ~~3,600.41~~ ~~3,187.36~~ ~~3,549.78~~ \$ 3599.78
 (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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3599⁷⁸

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: Little Caesar's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5018 Park Ave. City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: _____
Amount of Expenditure: \$ 46.03 Date of Expenditure: 11/10/2025

Business or Organization Name: Kroger #491 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3444 Plaza Ave. City: Memphis State: TN Zip Code: 38111
Purpose of Expenditure: Drinks for Youth Outreach Fair
Amount of Expenditure: \$ 50.60 Date of Expenditure: 11/10/2025

Business or Organization Name: Margaritas of Cooper Young OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 948 Cooper St. City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Food for Volunteers
Amount of Expenditure: \$ 237.95 Date of Expenditure: 11/10/2025

Business or Organization Name: Wix.com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1691 Michigan Ave City: Miami Beach State: FL Zip Code: 33139
Purpose of Expenditure: Campaign Flyers
Amount of Expenditure: \$ 26.34 Date of Expenditure: 11/10/2025

Business or Organization Name: Gordon Foods OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1460 Union Ave. City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Food for Campaign Fundraiser
Amount of Expenditure: \$ 93.79 Date of Expenditure: 11/13/2025

Total Expenditures: \$ ~~4055.12~~ ~~37642.04~~ ~~4,00.49~~ 4054⁴⁹ (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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4054⁴⁹

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: Memphis Sports Masters OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 7915 Winchester Rd. City: Memphis State: TN Zip Code: 38125
 Purpose of Expenditure: Campaign Shirts
 Amount of Expenditure: \$ 92.19 Date of Expenditure: 11/17

Business or Organization Name: UPS OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 111 S Highland St. City: Memphis State: TN Zip Code: 38111
 Purpose of Expenditure: Campaign Shirt Shipment
 Amount of Expenditure: \$ 13.05 Date of Expenditure: 11/24/2025

Business or Organization Name: Guaranteed Bank & Trust OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Bank Fees
 Amount of Expenditure: \$ 17.00 Date of Expenditure: 11/28/2025

Business or Organization Name: EZ-Pay Parking OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Shelby County Commissioner Hearing
 Amount of Expenditure: \$ 1.30 Date of Expenditure: 12/03/2025

Business or Organization Name: Universal Collections System OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Accidental Payment, will pay back.
 Amount of Expenditure: \$ 40.00 Date of Expenditure: 12/05/25

Total Expenditures: \$ 37802.55 4,745.03 4215.03 (3)
 (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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B Nelson
 2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/2026
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4215 03

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: Mid South Solutions Inc. OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2209 Whitney Rd. City: Memphis State: TN Zip Code: 38133
 Purpose of Expenditure: Yard Signs
 Amount of Expenditure: \$ 158.26 Date of Expenditure: 12/08/2025

Business or Organization Name: Home Depot OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 800 Truse Rd. City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Fence Post
 Amount of Expenditure: \$ 84.63 Date of Expenditure: 12/8/2025

Business or Organization Name: Wix.com OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1691 Michigan Ave City: Miami Beach State: FL Zip Code: 33139
 Purpose of Expenditure: ~~Domain~~ Website Fee
 Amount of Expenditure: \$ 26.34 Date of Expenditure: 12/10/2025

Business or Organization Name: Fed Ex Office Knickerbocker Plaza OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 4691 Poplar Ave City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Flyer Print Outs
 Amount of Expenditure: \$ 7.79 Date of Expenditure: 12/16/2025

Business or Organization Name: Target OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 601 Colonial Rd City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Supplies for Youth Book Donation (Marketing)
 Amount of Expenditure: \$ 47.68 Date of Expenditure: 12/17/2025

Total Expenditures: \$ 4127.25 4489.73 4539.73 (C)
 (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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4539⁷³

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: Canva.com (online) OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2410 S Dupont Hwy City: Camden State: DE Zip Code: _____
Purpose of Expenditure: Campaign Flyers
Amount of Expenditure: \$ 175.60 Date of Expenditure: 12/19/2025

Business or Organization Name: Textedly.com (online) OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1901 Ave of the Stars #2 City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Marketing Text for
Amount of Expenditure: \$ 95.48 Date of Expenditure: 12/19/2025

Business or Organization Name: Gibson's Donut OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 760 Mt Moriah City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Marketing
Amount of Expenditure: \$ 13.50 Date of Expenditure: 12/19/2025

Business or Organization Name: Sticktext.com (online) OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 301 E 2nd St #304 City: Jamestown State: NY Zip Code: 14701
Purpose of Expenditure: _____
Amount of Expenditure: \$ 31.83 Date of Expenditure: 12/23/2025

Business or Organization Name: Gibson's Donut OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 760 Mt Moriah City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Marketing
Amount of Expenditure: \$ 13.50 Date of Expenditure: 12/22/2025

Total Expenditures: \$ 4,457.16 ~~4,819.67~~ 4869⁶⁴
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4869⁶⁴

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: Guaranteed Bank & Trust OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4894 Poplar Ave. City: Memphis State: _____ Zip Code: 38117
Purpose of Expenditure: Guaranteed Bank & Trust Bank Fee
Amount of Expenditure: \$ 14.00 Date of Expenditure: 10/31/2025

Business or Organization Name: EZ-Pay OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Parking to speak @ Shelby County Candidate Debate
Amount of Expenditure: \$ 11.44 Date of Expenditure: 11/3/2025

Business or Organization Name: EZ-Pay OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Parking to speak @ Candidate Debate
Amount of Expenditure: \$ 4.87 Date of Expenditure: 11/5/2025

Business or Organization Name: Universal Collection Systems OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Accidental payment, will payback to campaign
Amount of Expenditure: \$ 150.00 Date of Expenditure: 11/5/2025

Business or Organization Name: Game Stop OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5043 Park Ave. City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Youth Outreach Fair
Amount of Expenditure: \$ 116.45 Date of Expenditure: 11/10/2025

Total Expenditures: \$ ~~4753.92~~ ~~5116.40~~ \$ 5166³⁷
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ ~~0.00~~ 5166³⁷

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: Kre8ions OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4650 Merchants Park Cir. City: Memphis State: TN Zip Code: 38017
Purpose of Expenditure: Video Campaign Kick off
Amount of Expenditure: \$ 566.50 Date of Expenditure: \$ 9/19/2025

Business or Organization Name: Canva.com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Marketing Flyers
Amount of Expenditure: \$ 52.00 Date of Expenditure: \$ 9/19/2025

Business or Organization Name: Fed Ex Knickerbocker Plaza OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4691 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Campaign Signs
Amount of Expenditure: \$ 3.34 Date of Expenditure: \$ 9/22/2025

Business or Organization Name: Fed Ex Knickerbocker Plaza OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4691 Poplar Ave. City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Campaign Signs
Amount of Expenditure: \$ 18.72 Date of Expenditure: \$ 9/22/2025

Business or Organization Name: The Rocking Chair OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1542 Elvis Presley Blvd. City: Memphis State: TN Zip Code: 38106
Purpose of Expenditure: Food For Fundraiser
Amount of Expenditure: \$ 320.43 Date of Expenditure: \$ 9/23/25

Total Expenditures: \$ ~~5714.91~~ ~~6477.34~~ 6127³⁶ 3

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
 2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/2026
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 6,273⁶

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: Canva.com (online) OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2410 S Dupont Hwy City: Camden State: DE Zip Code: _____
 Purpose of Expenditure: Campaign Flyers
 Amount of Expenditure: \$ ~~57.62~~ 57.62 Date of Expenditure: 12/12/2025

Business or Organization Name: Slicktext (online) OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 301 E 2nd St #304 City: JamesTown State: MI Zip Code: 14701
 Purpose of Expenditure: Mass text subscription
 Amount of Expenditure: \$ 31.83 Date of Expenditure: 11/24/2025

Business or Organization Name: Guaranteed Bank & Trust OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 4894 Poplar Ave City: Memphis State: TN Zip Code: 38117
 Purpose of Expenditure: Bank Fee
 Amount of Expenditure: \$ 14.00 Date of Expenditure: 09/30/2025

Business or Organization Name: _____ OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: _____

Business or Organization Name: _____ OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: _____

Total Expenditures: \$ ~~85,818.36~~ 6,230.81 (e)
 (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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 8/18/25 End Date: 1/15/26
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**
First Name: Samuel Middle Name: _____ Last Name: Nelson
Address: 2390 Twain Ave City: Memphis State: TN Zip Code: 38114
Outstanding Loan Balance (Beginning) \$ 3,302.60
Loans Received \$ _____
Loan Payments \$ 3,302.60
Outstanding Loan (End) \$ _____
Loan Received For: Primary Election General Election Runoff (Local Elections Only)
Date of Loan: 8/18/2025

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End) \$ _____