CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/9/26 2.a. Candidate or Committee Name: Committee to Elect Melvin Burgess
2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____
4. Campaign Address: 363 N. Avalon St
City: Memphis State: TN Zip Code: 38112 Phone: (901) 413-3487
5. Candidate Home Address: SAME
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: _____
6. Office Sought: (include district number, if applicable) SHE/by County Mayor
7. Name of Political Treasurer (may be candidate): Estella Greer
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: 4/26/26 End Date: 6/30/26
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.

Melvin Burgess — Candidate Signature — 7/9/26 Date
Political Treasurer Signature — 7/10/26 Date
Witness Signature — 7/9/26 Date
Witness Signature — 7/10/26 Date

12. Summary:

a.	Balance On Hand Last Report	$ 59,245 —
b.	Total Receipts This Period	$ 5,034 —
c.	Total Disbursements This Period	$ 57,592 —
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 6,687 —
e.	Total Loans Outstanding	$ —
f.	Total Obligations Outstanding	$ —

SS-1109 (Rev. 8/2023)

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Committee To Elect Melvin Berger

14. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26

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) ..... $ 5,034—

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.) ..... $ 5,034—

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 32,592
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ 25,000

c. Total Obligation Payments Made This Period ..... $ —

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ 57,592

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ —

b. Itemized In-Kind Contributions Received This Period ..... $ —

c. Total In-Kind Contributions Received This Period ..... $ —

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ —

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Committee To Elect Melvin Burgess County Mayor
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26
3. Total campaign contributions from preceding page (enter $0 if first page) $ See Attached

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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: $______

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: $______

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: $______

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: $______
(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: Committee To Elect Melvin Burgess County Mayor
2. Reporting Period: Start Date: 4/26/24 End Date: 6/30/24
3. Total in-kind contributions from preceding page (enter $0 if first page) $ —

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: ______ 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: ______

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: $ ______
(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: Committee To Elect Melvin Burgess County Mayor
2. Reporting Period: Start Date: 4/26/24 End Date: 6/30/26
3. Total campaign expenditures from preceding page (enter $0 if first page) $ see ATTached

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: ______ 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: $ ______

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: $ ______

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: $ ______
(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: Committee To Elect Melvin Burgess County Mayor
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26
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: Melvin Middle Name: THOMAS Last Name: Burgess

Address: 363 N Avalon ST City: Memphis State: TN Zip Code: 38112

Outstanding Loan Balance (Beginning) $ 25,000 –

Loans Received $ –

Loan Payments $ 25,000

Outstanding Loan (End) $ 0

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

Date of Loan: 6/30/25

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) $ ______

SS-1132 (Rev. 1/2023)

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Committee To Elect Melvin Burgess County Mayor
2. Reporting Period: Start Date: 4/26/24 End Date: 6/30/26
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: ____________________
First Name: __________ Middle Name: __________
Last Name: ____________________
Address: ____________________
City: ____________________
State: ______ Zip Code: __________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ____________________
First Name: __________ Middle Name: __________
Last Name: ____________________
Address: ____________________
City: ____________________
State: ______ Zip Code: __________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ____________________
First Name: __________ Middle Name: __________
Last Name: ____________________
Address: ____________________
City: ____________________
State: ______ Zip Code: __________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: ____________________
First Name: __________ Middle Name: __________
Last Name: ____________________
Address: ____________________
City: ____________________
State: ______ Zip Code: __________

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Amount	Paid At	Donor First Name	Donor Last Name	Donor Address Line 1	Donor City	Donor State	Donor ZIP	Donor Occupation	Donor Employer
250	4/26/2026 17:38	Gordon	Olswing	455 Saint Nick Dr	Memphis	TN	38117	Attorney	Self
100	4/27/2026 23:48	Gwendolyn	Willis-Lifton	8807 GlenXing	Olive Branch	MS	38654	Not Employed	Not Employed
1000	4/30/2026 12:04	Metro	Cardio	1975 Nonconnah Boulevard	Memphis	TN	38132	Cardiologist	Metropolitan Cardiovascular Institute
84	5/1/2026 4:22	Lance	Griffin	3340 Cumberland Blvd Se, 303	Atlanta	GA	30339	Not Employed	Not Employed
100	5/1/2026 7:29	Lorenzo	Brown	397 Falling Creek Ln	Eads	TN	38028	Not Employed	Not Employed
200	5/4/2026 22:13	V Lynn	Evans	588 Monteigne Blvd	Memphisi	TN	38103	CPA	V, Lynn Evans, CPA
250	5/5/2026 17:02	Van	Turner	7201 Nicholas Lane	Memphis	TN	38125	Healthcare Executive	Regional One Health
100	4/30/2026	J. Patrick	Moss	8674 Wine Leaf Cove	Germantown	TN	38139	Clerical	Shelby County Government
1000	4/30/2026	Jones & Moore for Rural Care		4835 Elkhorn Hill Drive	Suwanee	TN	30024		
1500	5/1/2026	95 South Main		95 South Main, Suite 1800	Memphis	TN	38157		
250	5/3/2026	Hariett	Miller Halmon	3673 Shady Hollow Lane	Memphis	TN	38116	Retired	Retired
200	5/3/2026	Faye	Williams	1705 Jennings Mill Lane West	Collierville	TN	38017	Legal	Private Practice

Total: 5034

Business or Organization Name	First Name	Middle Name	Last Name	Address	City	State	Zip Code	Purpose of Expenditure	Amount of Expenditure	Date of Expenditure
WREG								Media (Wire Transfer)	$ 8,003.00	04/27/2026
The Bold Lion Label				1355 Union Ave	Memphis	TN		T-shirts and labels	$ 1,102.00	4/272026
Facebook								Ads	$ 45.00	04/26/2026
iHeart Media Inc								Media	$ 1,083.00	04/26/2026
Google								Ads	$ 60.00	04/27/2026
Mediaco Operations								Media	$ 1,815.00	04/29/2026
	Antonio		Suggs					Sign Materials & Placement	$ 2,000.00	05/01/2026
	Inez		Todd					Poll Worker	$ 400.00	05/02/2026
	Chorcie		Jones					Reimbursement, Poll Worker Meals/ Fuel/ Supplies	$ 700.00	05/04/2026
	Debra		Goodman					HQ Staff	$ 400.00	05/04/2026
Grace Temple								Donation	$ 250.00	05/05/2026
Food								Food Election Day Expenses	$ 1,302.00	05/05/2026
U-HAUL								Transporting Headquarters Furniture/Equipment	$ 252.00	05/05/2026
	Antonio		Suggs					Sign Materials & Placement	$ 250.00	05/06/2026
	Jeneen		Robinson	174 Island Bluff Drive	Memphis	TN	38103	Campaign Management	$ 2,525.00	05/07/2026
	George		Boyington	1408 South Parkway East	Memphis	TN	38106	Miscellaneous Reimbursement	$ 7,800.00	05/07/2026
Bailey Assessor 2026	Javier		Bailey					Campaign Contribution	$ 250.00	05/08/2026
Friends of LaSonya Hall	LaSonya		Hall					Campaign Contribution	$ 250.00	05/07/2026
	Jonathan		Range					Poll Worker	$ 150.00	05/07/2026
	Jimmy		Birkholz					Social Media	$ 1,200.00	05/07/2026
Google Ad/Facebook								Ads	$ 87.00	06/01/2026
	Ashley		Porter					Poll Worker	$ 500.00	06/12/2026
	George		Boyington	1408 South Parkway East	Memphis	TN	38106	HQ Rent	$ 2,168.00	06/29/2026
	Melvin		Burgess	363 North Avalon Street	Memphis	TN	38112	Loan Repayment	$ 25,000.00	06/3032026
								TOTAL	$ 57,592.00