

ORIGINAL

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ACCEPTED TCA 2-5-102



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

FR 10 16:39:02

1. Date: 4/18/26 2.a. Candidate or Committee Name: MICHAEL D. POPE
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
 4. Campaign Address: 1468 ALBON DR.
 City: CORDOVA State: TN Zip Code: 38016 Phone: 901-305-3781
 5. Candidate Home Address: 1468 ALBON DR.
 City: CORDOVA State: TN Zip Code: 38016 Phone: 901-305-3781
 Candidate Email Address: MPOPE1964@GMAIL.COM
 6. Office Sought: (include district number, if applicable) SHERIFF
 7. Name of Political Treasurer (may be candidate): LEMON LOWERY, Jr.
 Political Treasurer Email Address: LEMON1949@COMCAST.NET

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: 01/16/2026 End Date: 03/31/2026

10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.

11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Michael D. Pope 4/9/2026
 Candidate Signature Date

Lemon Lowery Jr 4/9/2026
 Political Treasurer Signature Date

James Arradondo 4/9/2026
 Witness Signature Date

James Arradondo 4/9/2026
 Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>3,831.22</u>
b. Total Receipts This Period	\$ <u>24,331.50</u>
c. Total Disbursements This Period	\$ <u>7,542.26</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>50,620.46</u>
e. Total Loans Outstanding	\$ <u>0</u>
f. Total Obligations Outstanding	\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: MICHAEL D. POPE

14. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 1,231.50
(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) \$ 23,100.00
- c. Loans Received This Reporting Period \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 24,331.50

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 7,542.26
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 7,542.26

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0



ORIGINAL

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

- 1. Candidate or Committee Name: MICHAEL D. POPE
- 2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
- 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
 First Name: PAMELA Middle Name: _____ Last Name: BROOKS
 Address: 1630 SMOKEHOUSE 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: 1/16/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: TERRY Middle Name: _____ Last Name: COOPER
 Address: 7934 WINDENSGATE CIRCLE City: OLIVE BRANCH State: MS Zip Code: 38654
 Occupation: DEPUTY SHERIFF Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 100.00 Date of Contribution: 1/16/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
 First Name: TYRIOUS Middle Name: _____ Last Name: INGRAM
 Address: 6631 ORCHID LN City: DALLAS State: TX Zip Code: 75238
 Occupation: MCDONALDS OWNER Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 250.00 Date of Contribution: 1/17/26 Aggregate This Election: \$ _____

Business or Organization Name: 1 OR
 First Name: ROBERT Middle Name: _____ Last Name: BRADEN
 Address: 11196 WOLF WOODS DR City: ADLINGTON State: TN Zip Code: 38002
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ 150.00 Date of Contribution: 1/21/26 Aggregate This Election: \$ _____

Total Contributions: \$ 550.00

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 550.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: MIKE Middle Name: _____ Last Name: POPE
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,900.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: LISA Middle Name: _____ Last Name: POPE
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,900.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: GENE Middle Name: _____ Last Name: COMER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,900.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: CORINE Middle Name: _____ Last Name: COMER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,900.00 Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Total Contributions: \$ 8,150.00
(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 8,150.⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: REGGIE 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: \$ 1,900.⁰⁰ Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: BARRY Middle Name: _____ Last Name: HOWARD
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: LINDA Middle Name: _____ Last Name: HOWARD
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 2/6/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: MICHAEL Middle Name: _____ Last Name: POPE
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.⁰⁰ Date of Contribution: 2/10/26 Aggregate This Election: \$ _____

Total Contributions: \$ 10,700.⁰⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 10,700.⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: CLIFF Middle Name: _____ Last Name: MASSEN
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.⁰⁰ Date of Contribution: 2/18/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: JAMES Middle Name: _____ Last Name: ARRADONDO
Address: 3792 OAK LAKE LANE City: MEMPHIS State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 2/18/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: CHERYL Middle Name: _____ Last Name: HARRIS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.⁰⁰ Date of Contribution: 2/13/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: PATRICK Middle Name: _____ Last Name: HARRIS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.⁰⁰ Date of Contribution: 2/13/26 Aggregate This Election: \$ _____

Total Contributions: \$ 12,950.⁰⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 12,950.⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: ROBERT Middle Name: _____ Last Name: BARNES
Address: 871 OAK MEADOW DR #214 City: FRANKLIN State: TN Zip Code: 37064
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 2/16/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: ANTHONY Middle Name: _____ Last Name: WILLIAMS
Address: 6025 STAGE ROAD City: MEMPHIS State: TN Zip Code: 38134
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 2/18/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: JAMES Middle Name: _____ Last Name: ARRADONDO
Address: 3792 OAK LAKE LANE City: MEMPHIS State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 3/10/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: VENNES Middle Name: _____ Last Name: YOUNG
Address: 3868 BIRCHLEAF DRIVE City: MEMPHIS State: TN Zip Code: 38116
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200.⁰⁰ Date of Contribution: 3/12/26 Aggregate This Election: \$ _____

Total Contributions: \$ 13,600.⁰⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 13,600.⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: STEVEN Middle Name: C. Last Name: ETHRIDGE
Address: 113 WALNUT RIDGE LANE City: CORDOVA State: TN Zip Code: 38018
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 3/24/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: ANGELA Middle Name: _____ Last Name: GREEN
Address: 5050 Poplar Ave *2416 City: MEMPHIS State: TN Zip Code: 38157
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50.⁰⁰ Date of Contribution: 3/24/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: YOLANDA Middle Name: _____ Last Name: HUGHES
Address: 7754 DEERFIELD TRACE City: MEMPHIS State: TN Zip Code: 38133
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 3/24/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: JACOB Middle Name: _____ Last Name: MICKENS
Address: 1924 S. Parkway E. City: MEMPHIS State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 3/21/26 Aggregate This Election: \$ _____

Total Contributions: \$ 14,100.⁰⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 14,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: MARY Middle Name: _____ Last Name: ANDRUS
Address: 5036 LAUREL FOREST CV City: MEMPHIS State: TN Zip Code: 38125
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 3/21/26 Aggregate This Election: \$ _____

Business or Organization Name: SERVICES CHARGE WAIVED 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: \$ 2.50 Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: WILLIS Middle Name: _____ Last Name: PALMS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3/25/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: SUE Middle Name: _____ Last Name: PALMS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3/25/26 Aggregate This Election: \$ _____

Total Contributions: \$ 15,202.50

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 15,202.50

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: BORIS Middle Name: _____ Last Name: HURD
Address: 7263 Old Brownsville Rd City: ARLINGTON State: TN Zip Code: 38002
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50.00 Date of Contribution: 3/25/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: ROBERT Middle Name: _____ Last Name: VESTER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300.00 Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: CAROLYN Middle Name: _____ Last Name: VESTER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300.00 Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: INGRAM 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: \$ 250.00 Date of Contribution: 3/28/26 Aggregate This Election: \$ _____

Total Contributions: \$ 16,102.50

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 16,102.50

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: WILLIE Middle Name: _____ Last Name: PARKS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: GRAYLE Middle Name: _____ Last Name: DICKENS
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.⁰⁰ Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: EFFIE Middle Name: _____ Last Name: TUCKER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50.⁰⁰ Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: OREPHA Middle Name: _____ Last Name: ANDERSON
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25.⁰⁰ Date of Contribution: 3/23/26 Aggregate This Election: \$ _____

Total Contributions: \$ 16,377.⁵⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 16,377.50

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: LECHELIZ Middle Name: _____ Last Name: CLARK
Address: 3204 S. MENDENHALL RD #2B City: MEMPHIS State: TN Zip Code: 38115
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 3/27/26 Aggregate This Election: \$ _____

Business or Organization Name: SERVICE CHARGE WAIVED 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: \$ 4.00 Date of Contribution: 3/31/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: MR. JOHN Middle Name: _____ Last Name: HACKMEYER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 3,500.00 Date of Contribution: 3/31/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Mrs JOHN Middle Name: _____ Last Name: HACKMEYER
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 3,500.00 Date of Contribution: 3/31/26 Aggregate This Election: \$ _____

Total Contributions: \$ 23,481.50

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 23,481.50

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: RICKY Middle Name: _____ Last Name: McCoy
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 3/31/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: LEMON Middle Name: _____ Last Name: LOVERY, JR
Address: 100 OAKLAND WOODS CV City: OAKLAND State: TN Zip Code: 38060
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.⁰⁰ Date of Contribution: 3/31/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: TEDARRELL Middle Name: _____ Last Name: MUHAMMAD
Address: 1554 N. PISGAH RD City: _____ State: TN Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 350.⁰⁰ Date of Contribution: 3/31/26 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: \$ 24,331.50

(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.)



ORIGINAL

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

- 1. Candidate or Committee Name: MICHAEL D. POPE
- 2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
- 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: MARGARET'S OF COOPER OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: BUSINESS CARD
 Amount of Expenditure: \$ 99.02 Date of Expenditure: \$ _____ 1/20/26

Business or Organization Name: LOVE'S TRUCK STOP #0369 OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2971 HIGHWAY 48 City: DICKSON State: TN Zip Code: _____
 Purpose of Expenditure: GAS / FUEL
 Amount of Expenditure: \$ 45.00 Date of Expenditure: \$ _____ 1/22/26

Business or Organization Name: STARBUCKS STORE #08450 OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: CAMPAIGN MEETING
 Amount of Expenditure: \$ 31.62 Date of Expenditure: \$ _____ 1/23/26

Business or Organization Name: ROYAL COUNTRY CLUB BARBERSHIP OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: CAMPAIGN MEET & GREET w/ DRINKS and SNACKS
 Amount of Expenditure: \$ 61.80 Date of Expenditure: \$ _____ 2/2/26

Business or Organization Name: MEMPHIS SPEECH OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: SPEECH INSTRUCTOR / COACH
 Amount of Expenditure: \$ 258.75 Date of Expenditure: \$ _____ 2/2/26

Total Expenditures: \$ 496.19

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 496.19

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: ATM W/D CHASE OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1520 BONNIE LANE City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: FEEL FOR MEET & GREET & ADVERTISING
Amount of Expenditure: \$ 104.⁰⁰ Date of Expenditure: \$ _____ 2/2/26

Business or Organization Name: PERKINS 3829 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: GERMANTOWN State: TN Zip Code: _____
Purpose of Expenditure: CAMPAIGN MEETING
Amount of Expenditure: \$ 47.⁰⁰ Date of Expenditure: \$ _____ 2/20/26

Business or Organization Name: CIRCLE K #3654 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: INK PENS
Amount of Expenditure: \$ 4.81 Date of Expenditure: \$ _____ 2/23/26

Business or Organization Name: WAL-MART # 2322 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 577N. GERMANTOWN City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: NOTE PAD & STATIONARY CAMPAIGN MEETING
Amount of Expenditure: \$ 37.13 Date of Expenditure: \$ _____ 2/23/26

Business or Organization Name: FEDEX OFFICE MEMPHIS OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: PLANO State: TX Zip Code: _____
Purpose of Expenditure: PRINTING PUSH CARD ADVERTISING (500 QTY)
Amount of Expenditure: \$ 54.88 Date of Expenditure: \$ _____ 2/23/26

Total Expenditures: \$ 744.⁰⁰

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 744.00

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

Business or Organization Name: COUNTRY COOKING OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: CAMPAIGN LUNCH MEETING (WHITEHAVEN)
Amount of Expenditure: \$ 58.00 Date of Expenditure: \$ _____ 2/23/26

Business or Organization Name: RED FISH OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: ARLINGTON State: TN Zip Code: _____
Purpose of Expenditure: CAMPAIGN MEETING W/ NEIGHBORHOOD ASSOCIATION
Amount of Expenditure: \$ 23.19 Date of Expenditure: \$ _____

Business or Organization Name: FEDEX CORDOVA OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: TEST PRINT
Amount of Expenditure: \$ 1.00 Date of Expenditure: \$ _____ 3/2/26

Business or Organization Name: FEDEX CORDOVA OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: TEST PRINT CAMPAIGN NOTEBOOK
Amount of Expenditure: \$ 3.02 Date of Expenditure: \$ _____ 3/2/26

Business or Organization Name: FEDEX CORDOVA OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: REPRINT NOTEBOOK
Amount of Expenditure: \$ 10.96 Date of Expenditure: \$ _____ 3/2/26

Total Expenditures: \$ 840.17

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 840.17

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: SALT WATER CRAB OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: CAMPAIGN MEETING & GREETING W/ NEIGHBORHOOD
Amount of Expenditure: \$ 97.96 Date of Expenditure: \$ _____ 3/2/26

Business or Organization Name: WLOK RADIO OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: RADIO COMMERCIAL (23 SPOTS) START DATE: April 13, 26
Amount of Expenditure: \$ 920.00 Date of Expenditure: \$ _____ 3/9/26

Business or Organization Name: COSTCO WHSE #3 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: WATER FOR MEET & GREET
Amount of Expenditure: \$ 30.91 Date of Expenditure: \$ _____ 3/20/26

Business or Organization Name: ATM W/D FTB OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 315 POPLAR AVE City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: PURCHASE T-SHIRTS CAMPAIGN
Amount of Expenditure: \$ 400.00 Date of Expenditure: \$ _____ 3/20/26

Business or Organization Name: STARBUCKS STORE #11555 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: CAMPAIGN MEETING W/ T-SHIRT DISTRIBUTION
Amount of Expenditure: \$ 12.74 Date of Expenditure: \$ _____ 3/23/26

Total Expenditures: \$ 2,301.78

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2,301.⁷⁸

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: FEDEX OFFICE OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: INK PUSH CARD
Amount of Expenditure: \$ 16.⁷⁸ Date of Expenditure: \$ _____ 3/23/26

Business or Organization Name: KROGER #457 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1230 HOUSTON LEVES City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: CHEESE & FRUIT TRAYS FUNDRAISE
Amount of Expenditure: \$ 38.58 Date of Expenditure: \$ _____ 3/23/26

Business or Organization Name: KROGER FUEL #5410 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 644 N. GERMANTOWN RD City: CORDOVA State: TN Zip Code: _____
Purpose of Expenditure: GAS/FUEL
Amount of Expenditure: \$ 45.⁰⁰ Date of Expenditure: \$ _____ 3/23/26

Business or Organization Name: FEDEX OFFICE MEMPHIS OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: PIANO State: TX Zip Code: _____
Purpose of Expenditure: PUSH CARD PRINTING
Amount of Expenditure: \$ 137.¹⁹ Date of Expenditure: \$ _____ 3/23/26

Business or Organization Name: TRACTOR SUPPLY #717 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6915 WINDCHASE DR City: HORN LAKE State: MS Zip Code: _____
Purpose of Expenditure: STAKES & ZIP TIES FOR CAMPAIGN SIGNS
Amount of Expenditure: \$ 240.⁴² Date of Expenditure: \$ _____ 3/23/26

Total Expenditures: \$ 2,779.⁷⁵

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2,779.75

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: ATM w/D REGIONS BULL FROG CORNER OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: HORN LAKE State: MS Zip Code: _____
Purpose of Expenditure: HIRE STAFF FOR CAMPAIGN SIGN PLACEMENT
Amount of Expenditure: \$ 142.50 Date of Expenditure: \$ _____ 3/23/26

Business or Organization Name: KROGER FUEL #5410 OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 644 N. GERMANTOWN RD City: CORNOVA State: TN Zip Code: _____
Purpose of Expenditure: GAS/FUEL
Amount of Expenditure: \$ 44.⁰⁰ Date of Expenditure: \$ _____ 3/30/26

Business or Organization Name: SMOOTH LIVING OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: FOOD MEET & GREET
Amount of Expenditure: \$ 62.⁰¹ Date of Expenditure: \$ _____ 3/30/26

Business or Organization Name: ATM w/D MEMPHIS CITY OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4135 ELVIS PRESLEY City: MEMPHIS State: TN Zip Code: _____
Purpose of Expenditure: FUNDRAISER AND DECORATIONS
Amount of Expenditure: \$ 104.⁰⁰ Date of Expenditure: \$ _____ 3/30/26

Business or Organization Name: ATM w/D OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: PURCHASE PHONE LIST FOR PHONE BANKING
Amount of Expenditure: \$ 60.⁰⁰ Date of Expenditure: \$ _____ 3/30/26

Total Expenditures: \$ 3,142.26

(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: MICHAEL D. POPE
2. Reporting Period: Start Date: 8/16/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3,192.26

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: A-1 PRINTING SIGN OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: CAMPAIGN SIGN
Amount of Expenditure: \$ 2000.⁰⁰ Date of Expenditure: \$ _____ 3/6/26

Business or Organization Name: MARGARET'S FAMILY RESTAURANT OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: FUNDRAISER HOSTED BY 6 LOCAL COMMUNITIES (FOOD & DECORATIONS)
Amount of Expenditure: \$ 2000.⁰⁰ Date of Expenditure: \$ _____ 3/24/26

Business or Organization Name: DAVIS PRIVATE PROTECTIVE AGENCY OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: SECURITY DETAIL
Amount of Expenditure: \$ 350.⁰⁰ Date of Expenditure: \$ _____ 3/27/26

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: \$ 7,542.26

(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.)