

ORIGINAL DOCUMENT
PHOTOCOPIES CANNOT BE
ACCEPTED TCA 2-5-102



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 2/9/2026 2.a. Candidate or Committee Name: Stephanie Love
2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/4/2024
4. Campaign Address: 2253 Dells
City: Memphis State: TN Zip Code: 38127 Phone: (901) 588-9603
5. Candidate Home Address: 4405 Grand Cedar Lane
City: Memphis State: TN Zip Code: 38128 Phone: (901) 649-8044
Candidate Email Address: SplOvemycareer@yahoo.com
6. Office Sought: (include district number, if applicable) County School Board, District 3
7. Name of Political Treasurer (may be candidate): Tania Combs Starks
Political Treasurer Email Address: mcombs83@yahoo.com

8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 4/1/2024 End Date: 6/30/2024

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.

S. Love 2-10-26 Tania Combs Starks 2/9/26
Candidate Signature Date Political Treasurer Signature Date
[Signature] 2/9/2026 [Signature] 2/9/26
Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>505.00</u>
b. Total Receipts This Period	\$	<u>15,330.79</u>
c. Total Disbursements This Period	\$	<u>10,154.08</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>5,681.71</u>
e. Total Loans Outstanding	\$	<u>-0-</u>
f. Total Obligations Outstanding	\$	<u>-0-</u>

SUMMARY PAGE - CANDIDATE

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13. Name of Candidate or Committee: Stephanie Love

14. Reporting Period: Start Date: 4/1/2024 End Date: 4/30/2024

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ -0-
(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) \$ 15,330.79
- 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.) \$ 15,330.79

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 10,154.08
(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.)..... \$ 10,154.08

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-

2025 FEB 10 PM 8:24
RCMD 2025 FEB 10

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: 4/1/25 End Date: 6/30/24
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: _____ OR
First Name: Tamika Middle Name: etc Last Name: Morton
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Assistant
Amount of Expenditure: \$ ~~1010.00~~ 1010.00 Date of Expenditure: \$ 6/27/2024

Business or Organization Name: _____ OR
First Name: Alexis Middle Name: _____ Last Name: Blackmon
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Phone Bank
Amount of Expenditure: \$ ~~1000.00~~ 140.00 Date of Expenditure: \$ 6/25/2024

Business or Organization Name: _____ OR
First Name: Jason Middle Name: _____ Last Name: Starks
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Signs
Amount of Expenditure: \$ 135.00 Date of Expenditure: \$ 6/25/2024

Business or Organization Name: _____ OR
First Name: Tom Middle Name: _____ Last Name: Mason
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Signs
Amount of Expenditure: \$ 175.00 Date of Expenditure: \$ 6/25/2024

Business or Organization Name: _____ OR
First Name: James Middle Name: L Last Name: Johnson
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ 343.00 Date of Expenditure: \$ 6/25/2024

Total Expenditures: \$ ~~1000.00~~ 1723.00

(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: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: Lit Jr. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5085 Austin Peak City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ 41.56 Date of Expenditure: \$ 5/24/2024

Business or Organization Name: One touch Catering OR
First Name: Kenasha Middle Name: _____ Last Name: Rogers
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Fundraiser
Amount of Expenditure: \$ ~~200~~ ~~200~~ ~~200~~ Date of Expenditure: \$ 5/28/2024 \$250.00 (Am)

Business or Organization Name: Silverback Photography OR
First Name: Tarves Middle Name: _____ Last Name: Lee
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Fundraiser
Amount of Expenditure: \$ 225.00 Date of Expenditure: \$ 5/28/2024

Business or Organization Name: From You Flowers OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Condolence
Amount of Expenditure: \$ 600.34 Date of Expenditure: \$ 5/30/2024

Business or Organization Name: Black Market Strategies OR
First Name: Antonio Middle Name: _____ Last Name: Parkinson
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Mr Ballot
Amount of Expenditure: \$ 6010.00 Date of Expenditure: \$ 6/25/2024

Total Expenditures: \$ 6586.40

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

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Stone
2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 ^{6/30/2024}
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 750 Campaign Fundraiser

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: Elizabeth Middle Name: _____ Last Name: Marable

Address: 6067 Poplar Pike City: Memphis State: TN Zip Code: 38119

Occupation: Teacher Employer: MSCS

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

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Christine Middle Name: _____ Last Name: Boyd

Address: 4447 Sunnyslope Dr. City: Memphis State: TN Zip Code: 38141

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: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Shawn Middle Name: _____ Last Name: Joseph

Address: 331 Community Center City: Gaithersburg State: MD Zip Code: 20878

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: \$ 250⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Courtney Middle Name: _____ Last Name: Roberson

Address: 10025 Bloomsbury Ave City: Shelby County State: TN Zip Code: 38016

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: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 550⁰⁰

(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.)

\$ ~~1000~~

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Friends to Elect Stephanie Lovie
- Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 6/30/2024
- Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

AB
K

Business or Organization Name: _____ OR
 First Name: Shari Middle Name: _____ Last Name: Jones
 Address: 12629 Noble Oak City: Arlington State: TN Zip Code: 38002
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 200⁰⁰ ✓

AB
M

Business or Organization Name: _____ OR
 First Name: Kevin Middle Name: _____ Last Name: Woods
 Address: 7008 Forbury Cone 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: \$ 500⁰⁰ ✓

AB
C

Business or Organization Name: _____ OR
 First Name: Michael Middle Name: _____ Last Name: Hooks
 Address: 108 Harbor Town Blvd City: Memphis State: TN Zip Code: 38103
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500⁰⁰ ✓

AB
R

Business or Organization Name: _____ OR
 First Name: Joyce Cole Middle Name: _____ Last Name: Coleman
 Address: 2774 Barron Ave City: Memphis State: TN Zip Code: 38114
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100⁰⁰ ✓

Total Contributions: \$ 1300⁰⁰
 (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.)

~~1000~~

~~Stephanie Love~~

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

- 1. Candidate or Committee Name: Friends to Elect Stephanie Love
- 2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 10/30/2024
- 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: Rev. Althea Middle Name: _____ Last Name: Greene

Address: 2138 Albany St City: Memphis State: TN Zip Code: 38108

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: \$ 200.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Eleanor Middle Name: _____ Last Name: Thomas

Address: 446 Dirks Cairn Cove City: Shelby County State: TN Zip Code: 38018

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: \$ 100.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Janice Middle Name: _____ Last Name: Tankson

Address: 8062 Chrysalis Lane City: Condover State: TN Zip Code: 38016

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: \$ 100.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Michael Middle Name: _____ Last Name: Kernell

Address: 111 S Highland City: Memphis State: TN Zip Code: 38111

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: \$ 175.00 ✓

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 575.00

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

~~Stephanie Love~~

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Lane
2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Willie Middle Name: _____ Last Name: Brooks

Address: 5143 Autumn Evening Lane City: Memphis State: TN Zip Code: 38125

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

Business or Organization Name: _____ OR

First Name: Michael Middle Name: _____ Last Name: Harris

Address: 4314 E. Parsonia Square City: Memphis State: TN Zip Code: 38116

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

Business or Organization Name: _____ OR

First Name: Eric Middle Name: _____ Last Name: Brent

Address: 4329 Barry Meadows Ln City: Memphis State: TN Zip Code: 38125

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

Business or Organization Name: _____ OR

First Name: Tiffany Middle Name: _____ Last Name: Lowe

Address: 301 S. Perimeter Park Dr Ste 100 City: Nashville State: TN Zip Code: 37211

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 1800.00 ✓

Total Contributions: \$ 2100.00

(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.)

\$1,450

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Friends to Elect Stephanie Love
- Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 6/30/2024
- Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

check

Business or Organization Name: _____ OR

First Name: Willie Middle Name: _____ Last Name: Simon

Address: 6892 Fox Gap City: Memphis State: TN Zip Code: 38141

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 200.00 ✓

check

Business or Organization Name: _____ OR

First Name: Willie Middle Name: _____ Last Name: Boddie

Address: 5235 N Watkins St City: Memphis State: TN Zip Code: 38127

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

check

Business or Organization Name: _____ OR

First Name: Terrence Middle Name: _____ Last Name: Brittenum

Address: 5540 Ewe Turn Cove City: Arlington State: TN Zip Code: 38002

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

check

Business or Organization Name: _____ OR

First Name: Dionna Middle Name: _____ Last Name: Pruitt

Address: 7420 TDP93 CV City: Memphis State: TN Zip Code: 38125

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

Total Contributions: \$ 500.00

(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.)

Contributions

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: _____ OR

First Name: Gerald Middle Name: _____ Last Name: Kiner
Address: 4400 Hickory Hill Rd City: Memphis State: TN Zip Code: 38141

Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$5000

Business or Organization Name: _____ OR

First Name: Sara Middle Name: _____ Last Name: Kyle
Address: 6421 Old Orchard Cr. City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$500

Business or Organization Name: _____ OR

First Name: Rhonda Middle Name: _____ Last Name: Logan
Address: 6025 Stage Rd. Suite 42 City: Bartlett State: TN Zip Code: 38134

Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$250

Business or Organization Name: _____ OR

First Name: John P. Middle Name: P. Last Name: Wright
Address: 5426 Eagle Bend Cr. City: Memphis State: TN Zip Code: 38128

Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$500

Business or Organization Name: _____ OR

First Name: Scott Middle Name: _____ Last Name: McCormick
Address: 1356 Rainsong Cr. South City: Orlando State: TN Zip Code: 38018

Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$250

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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: _____

2. Reporting Period: Start Date: _____ End Date: _____

3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Cedric Middle Name: _____ Last Name: Jefferson

Address: 4895 Sea Isle City: Memphis State: TN Zip Code: 38117

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 5/7/2024 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Eric Middle Name: _____ Last Name: Williamson

Address: 8070 Sag Harbor Cir City: Shelby County State: TN Zip Code: 38016

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 25⁰⁰ Date of Contribution: 4/20/24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Norma Middle Name: _____ Last Name: Lester

Address: 3865 S. Lakewood Dr City: Memphis State: TN Zip Code: 38128

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 6/20/2024 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

First Name: Jami Middle Name: _____ Last Name: White

Address: 1497 Rainey Cone City: Memphis State: TN Zip Code: 38127

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 6/20/2024 Aggregate This Election: \$ _____

Total Contributions: \$ 175⁰⁰

(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.)

\$ ~~100~~ ~~100~~ ~~100~~

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Friends to Elect Stephanie Lono
- Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 4/30/2024
- 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

AB First Name: Tanisha Middle Name: _____ Last Name: Heaston

Address: 1154 Woodland Manor City: Cordova State: _____ Zip Code: 38018

Occupation: 13100 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: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

AB First Name: Tracie Middle Name: _____ Last Name: Scott

Address: 6840 Mikoyla Ln City: Cordova State: TN Zip Code: 38018

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: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

AB First Name: Robert Middle Name: _____ Last Name: Davis II

Address: 9739 Woodland Vista City: Cordova State: TN Zip Code: 38016

Occupation: Dr. 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: \$ 100⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

AB First Name: Tarik Middle Name: _____ Last Name: Sugarman

Address: 208 Looney Ave City: Memphis State: TN Zip Code: 38107

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: \$ 150⁰⁰ ✓

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 450⁰⁰

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Love
2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 6/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Deartis Middle Name: _____ Last Name: Barber

Address: 1808 Fairmeade Ave City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100⁰⁰

Business or Organization Name: _____ OR

First Name: Octavius Middle Name: _____ Last Name: Nickson

Address: 4978 Newhaven City: Memphis State: TN Zip Code: 38117

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 250⁰⁰

Business or Organization Name: _____ OR

First Name: Ron Middle Name: _____ Last Name: Redwing

Address: 119 S. Main St City: Memphis State: TN Zip Code: 38103

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500⁰⁰

Business or Organization Name: _____ OR

First Name: Carlos Middle Name: _____ Last Name: Rifer

Address: 1441 S Perkins Rd City: Memphis State: TN Zip Code: 38117

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 250⁰⁰

Total Contributions: \$ 1100⁰⁰

(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.)

\$4000

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Love
 2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 ~~6/30/2024~~
 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Check

Business or Organization Name: _____ OR
 First Name: Johnny Middle Name: _____ Last Name: Fayne
 Address: 1585 Stable Run Dr City: Cordova State: TN Zip Code: 38016
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500⁰⁰ ✓

Check

Business or Organization Name: _____ OR
 First Name: Mary Middle Name: _____ Last Name: McDaniel
 Address: 1480 N. Winding Wood Circle City: Collierville State: TN Zip Code: 38017
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500⁰⁰ ✓

Check

Business or Organization Name: _____ OR
 First Name: Sylvester Middle Name: _____ Last Name: Tate
 Address: 717 Riverside Dr. # 710 City: Memphis State: TN Zip Code: 38103
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500⁰⁰ ✓

Check

Business or Organization Name: _____ OR
 First Name: Mary Middle Name: _____ Last Name: Lee
 Address: 262 Beckham Dr. City: Collierville State: TN Zip Code: 38017
 Occupation: _____ Employer: _____
 Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 300⁰⁰ ✓

Total Contributions: \$ 1800⁰⁰
 (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.)

~~4000~~

ITEMIZED STATEMENT OF ~~IN-KIND~~ CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Lono
2. Reporting Period: Start Date: 4/10/2024 End Date: 7/10/2024 6/30/2024
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: Phillip Middle Name: _____ Last Name: Northcross
Address: 1215 Poplar Ave City: Memphis State: TN Zip Code: 38104
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: \$ 250⁰⁰ ✓
Description of In-Kind Contribution: _____

Check ✓

Business or Organization Name: _____ OR
First Name: Korngouly Middle Name: _____ Last Name: S. Jones
Address: 283 S Reese St City: Memphis State: TN Zip Code: 38111
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: \$ 250⁰⁰ ✓
Description of In-Kind Contribution: _____

Check ✓

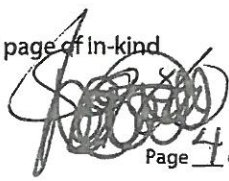
Business or Organization Name: _____ OR
First Name: David Middle Name: _____ Last Name: Lipton
Address: 2106 Lee Place City: Memphis State: TN Zip Code: 38104
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ 200⁰⁰ ✓
Description of In-Kind Contribution: _____

Check ✓

Business or Organization Name: _____ OR
First Name: Angela Middle Name: _____ Last Name: Burton
Address: 4868 Fernwood Dr City: Memphis State: TN Zip Code: 38114
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: \$ 200⁰⁰ ✓
Description of In-Kind Contribution: _____

Check ✓

Total In-Kind Contributions: \$ 900⁰⁰
(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.)


Page 4 of 7

\$ (circled scribble)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

- 1. Candidate or Committee Name: Stephanie Love
- 2. Reporting Period: Start Date: 4/1/2024 End Date: 4/30/2024
- 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.

AB

Business or Organization Name: _____ OR

First Name: Ronald Middle Name: _____ Last Name: Hooks

Address: 2317 Ardington Ave City: Memphis State: TN Zip Code: 38114

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: \$ 500.00 ✓

Description of In-Kind Contribution: _____

AB

Business or Organization Name: _____ OR

First Name: Mich Middle Name: _____ Last Name: Uli

Address: 501 S. Santa Fe Ave City: Memphis State: CA Zip Code: 90221

Occupation: _____ Employer: Compton

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

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ 200.00 ✓

Description of In-Kind Contribution: _____

AB

Business or Organization Name: _____ OR

First Name: Michalyn Middle Name: _____ Last Name: Easter-Thomas

Address: 1903 Edward Ave City: Memphis State: FL Zip Code: 38107

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: \$ 500.00 ✓

Description of In-Kind Contribution: _____

AB

Business or Organization Name: _____ OR

First Name: Anthony Middle Name: _____ Last Name: Buckner

Address: 9206 Fairmont Cir S City: Collierville State: TN Zip Code: 38017

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: \$ 100.00 ✓

Description of In-Kind Contribution: _____

AB

Total In-Kind Contributions: \$ 1300.00

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

\$ (circled scribble)

ITEMIZED STATEMENT OF ~~IN-KIND~~ CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: 4-1-24 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: Mark Middle Name: _____ Last Name: Culter

Address: 4266 Lucy Rd City: Millington State: TN Zip Code: 38053

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: \$ 1000⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: ASHAWN LLC OR

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

Address: 5100 Poplar Ave City: Memphis State: TN Zip Code: 38137
suite 726

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: \$ 250⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Anthony Middle Name: _____ Last Name: Tate

Address: 12062 Monterey Rd City: Eads State: TN Zip Code: 38028

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: \$ 250⁰⁰ ✓

Description of In-Kind Contribution: _____

Business or Organization Name: Drive Committee- FEC ID# C00032979 OR

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

Address: 25 Louisiana Ave NW City: Washington State: DC Zip Code: 20001

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: \$ 1000⁰⁰ ✓

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 2500⁰⁰

(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.)

\$2500.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Stephanie Lore
2. Reporting Period: Start Date: 4/1/2024 End Date: 4/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Michelle Middle Name: _____ Last Name: Burse
Address: 6300 Varied dr apt. 201 City: Woodland Hills State: CA Zip Code: 91367
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100⁰⁰ Date of Contribution: 4/22/2024 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Sandra Middle Name: _____ Last Name: Richards
Address: 1059 Averett Cr City: Cordova State: TN Zip Code: 38018
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 75⁰⁰ Date of Contribution: 4/19/24 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Melody Middle Name: _____ Last Name: Harrison
Address: 8734 Macon Rd City: Cordova State: TN Zip Code: 38018
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 6/21/2024 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: John Middle Name: _____ Last Name: Bush
Address: 2527 Old Duth Way City: Memphis State: TN Zip Code: 38133
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 6/20/2024 Aggregate This Election: \$ _____

Total Contributions: \$ 275⁰⁰

(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.)

~~\$1000~~

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

- Candidate or Committee Name: Friends to Elect Stephanie Love
- Reporting Period: Start Date: 4/10/2024 End Date: 7/10/24 6/30/2024
- Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

cash

Business or Organization Name: _____ OR

First Name: Deidre Middle Name: _____ Last Name: Jones

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: \$ 100.00 ✓

payroll

Business or Organization Name: _____ OR

First Name: Michael Middle Name: _____ Last Name: Kernell

Address: 3583 Wilandale Ln City: Memphis State: TN Zip Code: 38111

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

payroll

Business or Organization Name: _____ OR

First Name: Michelle Middle Name: _____ Last Name: Robinson McK. Spack

Address: 171 Harbor Village Dr City: Memphis State: TN Zip Code: 38103

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100.00 ✓

payroll

Business or Organization Name: _____ OR

First Name: Bobby Middle Name: _____ Last Name: White

Address: 5339 Brookwater Court City: Memphis State: TN Zip Code: 38125

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 150.00 ✓

Total Contributions: \$ 450.00

(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.)

~~\$1000~~

ITEMIZED STATEMENT OF ~~IN-KIND~~ CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: Barry Middle Name: _____ Last Name: Myers

Address: 7520 Forrest Shadow Lane City: Bartlett State: TN Zip Code: 38002

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: \$ 500.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: Friends of Amber Huett Garcia OR

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

Address: 4653 Chickasaw Rd City: Memphis State: TN Zip Code: 38117

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: \$ 500.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: Political Action Committee Edu OR

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

Address: 6263 Poplar Avenue Ste 1001 City: Memphis State: TN Zip Code: 38119

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: \$ 1000.00 ✓

Description of In-Kind Contribution: _____

Business or Organization Name: Systems Technologies Inc OR

First Name: Jeremy Middle Name: _____ Last Name: Simpson

Address: 1779 Kirby Pkwy Bldg 1 Ste 205 City: Memphis State: TN Zip Code: 38138

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: \$ 500.00 ✓

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 2500.00

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends to Elect Stephanie Lorie
2. Reporting Period: Start Date: 4/10/2024 End Date: 9/10/2024 10/30/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Jerry Middle Name: _____ Last Name: Park

Address: 2535 Preakness Dr City: Eads State: TN Zip Code: 38028

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 1000

Business or Organization Name: _____ OR

First Name: Winston Middle Name: _____ Last Name: Gipson

Address: 3844 Planters View Dr City: Memphis State: TN Zip Code: 38133

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 500

Business or Organization Name: _____ OR

First Name: DeWayne / Sr Middle Name: _____ Last Name: Smith

Address: 1044 E. Indian Wells Dr City: Collierville State: TN Zip Code: 38017

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 100

Business or Organization Name: Sammons Holding Company LLC OR

First Name: Jack Middle Name: _____ Last Name: Sammons

Address: 208 St. Albans Fairway City: Memphis State: TN Zip Code: 38111

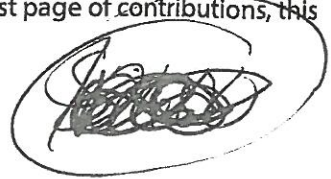
Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ 1000

Total Contributions: \$ 2400

(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.)



Contributions

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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.

Green

Business or Organization Name: _____ OR
 First Name: Mam Middle Name: _____ Last Name: Lee
 Address: 202 Beckham Dr. City: Collierville State: TN Zip Code: 38017
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$3000

Jack

Business or Organization Name: _____ OR
 First Name: Jerry Middle Name: _____ Last Name: Reiland
 Address: 1762 Locke-Cuba Rd. City: Millington State: TN Zip Code: 38053
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$500

Bob

Business or Organization Name: _____ OR
 First Name: Deidre Middle Name: _____ Last Name: Malone
 Address: 333 N Avalon St. City: Memphis State: TN Zip Code: 38112
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$250

Johnny

Business or Organization Name: _____ OR
 First Name: Bami Middle Name: _____ Last Name: Myers
 Address: 1500 Forest Shadow Lane City: Millington State: TN Zip Code: 38002
 Purpose of Expenditure: _____
 Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____ \$250

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.)