CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/9/2026 2.a. Candidate or Committee Name: Derek Mills

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: 1661 Aaron Brenner Dr Ste 300

City: Memphis State: TN Zip Code: 38120 Phone: 9017612720

5. Candidate Home Address: 673 Peterson Lake Rd

City: Collierville State: TN Zip Code: 38017 Phone: 9016107417

Candidate Email Address: derekmills.sr@gmail.com

6. Office Sought: (include district number, if applicable) Shelby County Commissioner, Dist. 2

7. Name of Political Treasurer (may be candidate): Dawn Kinard

Political Treasurer Email Address: dawn@welch.realty.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: 4/26/2026 End Date: 6/30/2026

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than $1,000 and/or expenditures total more than $1,000 for this reporting period.

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

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

-C5F5-431F-9F1A-30D7
07/09/26 - 10:52 AM

12. Summary:

a.	Balance On Hand Last Report	$ $126,556.16
b.	Total Receipts This Period	$ $1,200.00
c.	Total Disbursements This Period	$ $10,022.31
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $117,733.85
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Derek Mills

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $1,200.00

c. Loans Received This Reporting Period..... $ _____

d. Interest Received This Reporting Period ..... $ _____

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ $1,200.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $10,022.31
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ _____

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

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... $ $10,022.31

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: Derek Mills

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Hammers Jewelry **OR**

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

Address: 136 E Mulberry St City: Collierville State: TN Zip Code: 38017

Occupation: NA Employer: NA

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/27/2026 Aggregate This Election: $ $100.00

Business or Organization Name: Farris Bobango PLC PAC **OR**

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

Address: 999 S Shady Grove Rd Ste 500 City: Memphis State: TN Zip Code: 38120

Occupation: NA Employer: NA

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

Amount of Contribution: $ $500.00 Date of Contribution: 4/29/2026 Aggregate This Election: $ $500.00

Business or Organization Name: Retirement Companies of America LLC **OR**

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

Address: 6465 N Quail Hollow Rd #400 City: Memphis State: TN Zip Code: 38120

Occupation: NA Employer: NA

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

Amount of Contribution: $ $500.00 Date of Contribution: 4/29/2026 Aggregate This Election: $ $500.00

Business or Organization Name: Shelby County Republican Womens Club PAC **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Occupation: _____ Employer: _____

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/2/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $1,200.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Derek Mills

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $0.00

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

Business or Organization Name: Watkins Uiberall PLLC **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Accounting

Amount of Expenditure: $ $900.00 Date of Expenditure: $ 5/19/2026

Business or Organization Name: American Sign Company **OR**

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

Address: 7092 Poplar Ave City: Germantown State: TN Zip Code: 38138

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $716.53 Date of Expenditure: $ 5/19/2026

Business or Organization Name: Josh and Brittnye Robinson Leukemia Treatment **OR**

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

Address: 240 Snowbell Cove City: Oakland State: TN Zip Code: 38060

Purpose of Expenditure: Donation

Amount of Expenditure: $ $582.50 Date of Expenditure: $ 5/22/2026

Business or Organization Name: Leadership Collierville **OR**

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

Address: PO Box 604 City: Collierville State: TN Zip Code: 38027

Purpose of Expenditure: Sponsor

Amount of Expenditure: $ $500.00 Date of Expenditure: $ 5/4/2026

Business or Organization Name: Southern Reins Center for Equine Therapy **OR**

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

Address: 12405 Macon Rd City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Sponsor

Amount of Expenditure: $ $2,500.00 Date of Expenditure: $ 5/18/2026

Total Expenditures: $ $5,199.03

(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: Derek Mills

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $5,199.03

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

Business or Organization Name: Republican Party of Shelby County **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Donation

Amount of Expenditure: $ $36.00 Date of Expenditure: $ 5/28/2026

Business or Organization Name: Shelby County Republican Womens Club **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Donation

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 6/2/2026

Business or Organization Name: Republican Women of Purpose **OR**

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

Address: PO Box 381283 City: Germantown State: TN Zip Code: 38183

Purpose of Expenditure: Donation

Amount of Expenditure: $ $36.00 Date of Expenditure: $ 6/4/2026

Business or Organization Name: Collierville Chamber of Commerce **OR**

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

Address: 485 Halle Park Drive City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Sponsor

Amount of Expenditure: $ $2,000.00 Date of Expenditure: $ 6/10/2026

Business or Organization Name: Action Initiative Team **OR**

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

Address: 20235 N Cave Creek Rd Ste 104 City: Pheonix State: AZ Zip Code: 85024

Purpose of Expenditure: Donation

Amount of Expenditure: $ $250.00 Date of Expenditure: $ 5/5/2026

Total Expenditures: $ $7,571.03

(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: Derek Mills

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $7,571.03

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

Business or Organization Name: Bott Radio Network **OR**

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

Address: 10550 Barkley Ste 100 City: Overland Park State: KS Zip Code: 66212

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $601.28 Date of Expenditure: $ 6/29/2026

Business or Organization Name: KWAM Radio **OR**

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

Address: 5495 Murray Rd City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $600.00 Date of Expenditure: $ 6/30/2026

Business or Organization Name: Friends of Ed Apple **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Donation

Amount of Expenditure: $ $1,000.00 Date of Expenditure: $ 6/26/2026

Business or Organization Name: Greater Love Baptist Church **OR**

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

Address: 4439 Hacks Cross Rd City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Donation

Amount of Expenditure: $ $150.00 Date of Expenditure: $ 6/29/2026

Business or Organization Name: Action Initiative Team **OR**

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

Address: 20235 N Cave Creek Rd Ste 104 City: Pheonix State: AZ Zip Code: 85024

Purpose of Expenditure: Donation

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 6/25/2026

Total Expenditures: $ $10,022.31

(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.)