



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. Date: 4/10/2026 2.a. Candidate or Committee Name: Brad Less

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 8/5/2026

4. Campaign Address: 1661 Aaron Brenner Dr Ste 300  
 City: Memphis State: TN Zip Code: 38120 Phone: 9017612720

5. Candidate Home Address: 6599 Ricks Rd  
 City: Arlington State: TN Zip Code: 38002 Phone: 9012707249  
 Candidate Email Address: brad.less@icloud.com

6. Office Sought: (include district number, if applicable) Sheriff

7. Name of Political Treasurer (may be candidate): Tammy Laub  
 Political Treasurer Email Address: tthornhill222@gmail.com

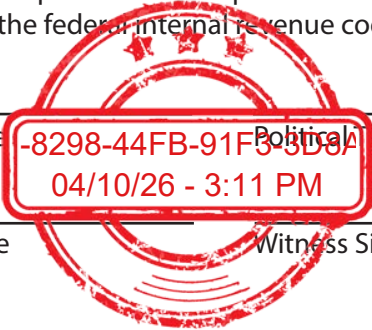
8. Category or Report: (check one)  
 First Quarter     Second Quarter     Third Quarter     Fourth Quarter     Pre-Primary     Pre-General  
 Mid-Year Supplemental     Year-End Supplemental     Runoff Election

9. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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.

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



12. Summary:

a. Balance On Hand Last Report .....	\$ <u>\$1,244.60</u>
b. Total Receipts This Period .....	\$ <u>\$36,711.89</u>
c. Total Disbursements This Period .....	\$ <u>\$36,272.49</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>\$1,684.00</u>
e. Total Loans Outstanding .....	\$ <u>\$53,215.35</u>
f. Total Obligations Outstanding .....	\$ <u>\$0.00</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Brad Less

14. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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) ..... \$ \$900.00
- c. Loans Received This Reporting Period..... \$ \$35,811.89
- 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.) ..... \$ \$36,711.89

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$36,272.49  
(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.)..... \$ \$36,272.49

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: Brad Less
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) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Frank Middle Name: \_\_\_\_\_ Last Name: Frisch  
Address: 9178 Sycamore Creek Cove City: Germantown State: TN Zip Code: 38139  
Occupation: Retired Employer: Retired  
Contribution Received For:  Primary Election General Election Runoff (Local Elections Only)  
Amount of Contribution: \$ \$500.00 Date of Contribution: 2/5/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sheila Middle Name: \_\_\_\_\_ Last Name: Edwards  
Address: 191 Nancye Reeder Dr City: Munford State: TN Zip Code: 38058  
Occupation: CNA Employer: Signature Healthcare  
Contribution Received For:  Primary Election General Election Runoff (Local Elections Only)  
Amount of Contribution: \$ \$50.00 Date of Contribution: 2/24/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Mick Middle Name: \_\_\_\_\_ Last Name: Wright  
Address: 5730 Bartlett Woods Dr City: Bartlett State: TX Zip Code: 38134  
Occupation: Government Relations Employer: Shelby County  
Contribution Received For:  Primary Election General Election Runoff (Local Elections Only)  
Amount of Contribution: \$ \$200.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Yvonne Middle Name: K. Last Name: Chapman  
Address: 1313 Pebble Creek Lane City: Memphis State: TN Zip Code: 38120  
Occupation: Attorney Employer: Martindale-Hubbell  
Contribution Received For:  Primary Election General Election Runoff (Local Elections Only)  
Amount of Contribution: \$ \$150.00 Date of Contribution: 3/30/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$900.00

(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: Brad Less
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) \$ \$0.00

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: \$ \$450.00 Date of Expenditure: \$ 2/12/2026

Business or Organization Name: Anedot **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$8.30 Date of Expenditure: \$ 3/23/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$2,000.00 Date of Expenditure: \$ 3/14/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$6,250.00 Date of Expenditure: \$ 1/16/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$4,856.00 Date of Expenditure: \$ 1/16/2026

Total Expenditures: \$ \$13,564.30

(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: Brad Less
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) \$ \$13,564.30

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: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$297.46 Date of Expenditure: \$ 1/30/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$4,000.00 Date of Expenditure: \$ 1/30/2026

Business or Organization Name: Anedot **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112

Purpose of Expenditure: Service Fee

Amount of Expenditure: \$ \$2.30 Date of Expenditure: \$ 2/24/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$297.46 Date of Expenditure: \$ 1/16/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Push Cards

Amount of Expenditure: \$ \$1,086.05 Date of Expenditure: \$ 1/31/2026

Total Expenditures: \$ \$19,247.57

(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: Brad Less
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) \$ \$19,247.57

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: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$4,000.00 Date of Expenditure: \$ 1/30/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 1/29/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$3,150.00 Date of Expenditure: \$ 1/16/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$297.46 Date of Expenditure: \$ 2/11/2026

Business or Organization Name: Griffin Strategies LLC **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$297.46 Date of Expenditure: \$ 3/11/2026

Total Expenditures: \$ \$31,992.49

(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: Brad Less
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) \$ \$31,992.49

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: Griffin Strategies LLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 12001 N Central Expy #1120 City: Dallas State: TX Zip Code: 75243  
Purpose of Expenditure: Advertising  
Amount of Expenditure: \$ \$4,280.00 Date of Expenditure: \$ 3/1/2026

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

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

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

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

Total Expenditures: \$ \$36,272.49

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

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Brad Less
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

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

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Brad Middle Name: \_\_\_\_\_ Last Name: Less

Address: 6599 Ricks Rd City: Arlington State: TN Zip Code: 38002

Outstanding Loan Balance (Beginning) ..... \$ \$0.00

Loans Received ..... \$ \$17,403.46

Loan Payments..... \$ \$0.00

Outstanding Loan (End)..... \$ \$17,403.46

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

Date of Loan: 1/16/2026

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

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

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

Balance (Beginning) ..... \$ \_\_\_\_\_

Loans Received ..... \$ \_\_\_\_\_

Loan Payments..... \$ \_\_\_\_\_

Outstanding Loan (End)..... \$ \_\_\_\_\_

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Brad Less
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

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

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Brad Middle Name: \_\_\_\_\_ Last Name: Less

Address: 6599 Ricks Rd City: Arlington State: TN Zip Code: 38002

Outstanding Loan Balance (Beginning) ..... \$ \$17,403.46

Loans Received ..... \$ \$18,408.43

Loan Payments ..... \$ \$0.00

Outstanding Loan (End) ..... \$ \$35,811.89

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

Date of Loan: 1/31/2026

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

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

**Totals for all loans** (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... \$ \$17,403.46

Loans Received ..... \$ \$35,811.89

Loan Payments ..... \$ \$0.00

Outstanding Loan (End) ..... \$ \$53,215.35