



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Jerri Green
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/7/2027
4. Campaign Address: 2277 Massey Rd
City: Memphis State: TN Zip Code: 38119 Phone: 9014937839
5. Candidate Home Address: 2277 Massey Rd
City: Memphis State: TN Zip Code: 38119 Phone: 9014937839
Candidate Email Address: jerri@jerrigreen.com
6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 2
7. Name of Political Treasurer (may be candidate): Diane Cambron
Political Treasurer Email Address: dicambron@live.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: 7/1/2025 End Date: 1/15/2026
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>\$8,254.13</u>
b. Total Receipts This Period	\$ <u>\$1,954.00</u>
c. Total Disbursements This Period	\$ <u>\$8,768.13</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,440.00</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jerri Green

14. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$454.00
(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) \$ \$1,500.00
- 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.) \$ \$1,954.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$8,768.13
(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.)..... \$ \$8,768.13

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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
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: AC Middle Name: _____ Last Name: Wharton
Address: 100 Peabody Pl City: Memphis State: TN Zip Code: 38103
Occupation: Principal Employer: AC Wharton Group
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 8/1/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: Mother Funders PAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2277 Massey City: Memphis State: TN Zip Code: 38117
Occupation: PAC Employer: PAC
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 8/12/2025 Aggregate This Election: \$ \$1,000.00

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

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

Total Contributions: \$ \$1,500.00

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
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: Democratic Women of Shelby County **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 772311 City: Memphis State: TN Zip Code: 38177
Purpose of Expenditure: Contribution
Amount of Expenditure: \$ \$26.05 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: Amazon.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109
Purpose of Expenditure: Office Supplies
Amount of Expenditure: \$ \$23.03 Date of Expenditure: \$ 1/7/2026

Business or Organization Name: Paragon Solutions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway Rd Ste 202 City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Merchant Service Fees
Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 1/2/2026

Business or Organization Name: L.A. Dowell Photography **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Best Effort City: unk State: unk Zip Code: 99999
Purpose of Expenditure: Photography Media Services
Amount of Expenditure: \$ \$353.10 Date of Expenditure: \$ 1/2/2026

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$10.00 Date of Expenditure: \$ 12/31/2025

Total Expenditures: \$ \$417.18

(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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$417.18

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: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 12/31/2025

Business or Organization Name: NGP VAN **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: NGP VAN 655 15th ST NW City: Wash State: DC Zip Code: 20005
Purpose of Expenditure: Database Services
Amount of Expenditure: \$ \$2,673.52 Date of Expenditure: \$ 12/29/2025

Business or Organization Name: Paragon Solutions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Merchant Service Fees
Amount of Expenditure: \$ \$5.00 Date of Expenditure: \$ 12/2/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$10.00 Date of Expenditure: \$ 11/30/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 11/30/2025

Total Expenditures: \$ \$3,111.70

(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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,111.70

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: Grassroots Analytics **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 806 7th St NW City: Washington State: DC Zip Code: 20001
Purpose of Expenditure: Data Analytics/Services
Amount of Expenditure: \$ \$639.18 Date of Expenditure: \$ 11/14/2025

Business or Organization Name: Paragon Solutions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Service Fee
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 11/3/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$10.00 Date of Expenditure: \$ 10/31/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 10/31/2025

Business or Organization Name: Paragon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Office Exp
Amount of Expenditure: \$ \$119.75 Date of Expenditure: \$ 10/2/2025

Total Expenditures: \$ \$3,908.63

(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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,908.63

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: NGP VAN **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: NGP VAN 655 15th ST NW City: Wash State: DC Zip Code: 20005
Purpose of Expenditure: Database Svcs
Amount of Expenditure: \$ \$1,336.76 Date of Expenditure: \$ 10/2/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 9/30/2025

Business or Organization Name: Friends for John Bradley **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3000 Elkins City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Campaign Contrib
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 9/8/2025

Business or Organization Name: NGP VAN **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: NGP VAN 655 15th ST NW City: Wash State: DC Zip Code: 20005
Purpose of Expenditure: Database Svcs
Amount of Expenditure: \$ \$1,336.76 Date of Expenditure: \$ 9/4/2025

Business or Organization Name: NGP VAN **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: NGP VAN 655 15th ST NW City: Wash State: DC Zip Code: 20005
Purpose of Expenditure: Database Svcs
Amount of Expenditure: \$ \$1,336.76 Date of Expenditure: \$ 9/2/2025

Total Expenditures: \$ \$8,021.91

(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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$8,021.91

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: Paragon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Service Fee
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 9/2/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 8/31/2025

Business or Organization Name: Amazon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109
Purpose of Expenditure: Office Exp
Amount of Expenditure: \$ \$48.50 Date of Expenditure: \$ 8/20/2025

Business or Organization Name: Amazon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109
Purpose of Expenditure: Office Exp
Amount of Expenditure: \$ \$117.61 Date of Expenditure: \$ 8/11/2025

Business or Organization Name: Paragon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Service Fee
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 8/4/2025

Total Expenditures: \$ \$8,241.02

(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: Jerri Green
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$8,241.02

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: NGP VAN **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: NGP VAN 655 15th ST NW City: Wash State: DC Zip Code: 20005
Purpose of Expenditure: Database Svcs
Amount of Expenditure: \$ \$368.76 Date of Expenditure: \$ 8/4/2025

Business or Organization Name: Comentum Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2004 Walker Ave City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Consulting Svcs
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 8/4/2025

Business or Organization Name: Renasant Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2046 Union City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 7/31/2025

Business or Organization Name: Paragon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2141 E Broadway City: Tempe State: AZ Zip Code: 85282
Purpose of Expenditure: Service Fee
Amount of Expenditure: \$ \$5.35 Date of Expenditure: \$ 7/31/2025

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: \$ \$8,768.13

(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.)