



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 1-23-26 2.a. Candidate or Committee Name: Sade Bradley
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5-5-26
 4. Campaign Address: 6039 Cottage Hill drive
 City: Millington State: TN Zip Code: 38053 Phone: 901-538-1264
 5. Candidate Home Address: _____
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Candidate Email Address: votesadel@gmail.com
 6. Office Sought: (include district number, if applicable) Shelby County Commission District 1
 7. Name of Political Treasurer (may be candidate): Shyhedia Wiggins
 Political Treasurer Email Address: wediashy20@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: 11-24-25 End Date: 1-15-26

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.

<u>Sade Bradley</u> Candidate Signature	<u>1-23-26</u> Date	<u>Shyhedia Wiggins</u> Political Treasurer Signature	<u>1-23-26</u> Date
<u>Sageal Thompson</u> Witness Signature	<u>1-23-2026</u> Date	<u>Tiana Diggz</u> Witness Signature	<u>1-23-26</u> Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>0</u>
b. Total Receipts This Period	\$ <u>1415</u>
c. Total Disbursements This Period	\$ <u>601.57</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>813.43</u>
e. Total Loans Outstanding	\$ <u>0</u>
f. Total Obligations Outstanding	\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Sadi Bradley

14. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 1415
(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) \$ 1415
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 1415

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 601.57
(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.)..... \$ 0

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Sadie Bradley Friends
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Debra Middle Name: _____ Last Name: Sigee
Address: 4181 Bennetwood Dr City: Millington State: TN Zip Code: 38053
Occupation: DDD Employer: Navy
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 1-7-26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Marjorie Middle Name: _____ Last Name: Brandon
Address: 4249 Marilyn dr. City: Millington State: TN Zip Code: 38053
Occupation: Teacher Employer: Millington High School
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 1-9-26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Frankie Middle Name: _____ Last Name: Dakin
Address: 5055 Howard place City: Millington State: TN Zip Code: 38053
Occupation: City Manager Employer: Millington
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1-9-26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Kristin Middle Name: _____ Last Name: Keller
Address: 3778 Russell Hurst DR W City: Bartlett State: TN Zip Code: 38135
Occupation: Respiratory Therapist Employer: Graceland
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 1-10-26 Aggregate This Election: \$ _____

Total Contributions: \$ 810

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Sade Bradley
2. Reporting Period: Start Date: 12-16-25 End Date: 1-15-26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 810

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Rasheena Middle Name: _____ Last Name: Martin
Address: 5974 Cuspidon Cove City: Millington State: TN Zip Code: 38053
Occupation: Customer Service Employer: MLGW
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 5 Date of Contribution: 12-16-25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Audrey Middle Name: _____ Last Name: Crawford
Address: 2486 Larose Ave City: Memphis State: TN Zip Code: 38114
Occupation: Tax preparer Employer: AD Tax
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 5 Date of Contribution: 12-16-26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Kyrie Middle Name: _____ Last Name: Boyd
Address: 469 Brockwood Cove City: Memphis State: TN Zip Code: 38189
Occupation: Esthetician Employer: YELU Beauty
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 5 Date of Contribution: 12-18-25 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Alicia Middle Name: _____ Last Name: Taylor
Address: 1136 Greer Drive City: Coxington State: TN Zip Code: 38019
Occupation: Realtor Employer: Legacy Partners
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 12-18-25 Aggregate This Election: \$ _____

Total Contributions: \$ 850

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Sade Bradley
 2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
 3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 050

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: Princeton Middle Name: _____ Last Name: McGee
 Address: 6680 Century Arbor place City: Bartlett State: IN Zip Code: 38134
 Occupation: Truck Driver Employer: Silver Fox LO
 In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 In-Kind Contribution Value: \$ 25 In-Kind Contribution Date: 12-19-25 Aggregate This Election: \$ _____
 Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
 First Name: Claressa Middle Name: _____ Last Name: Jordan
 Address: 6039 Cottage Hill Dr City: Millington State: TN Zip Code: 38053
 Occupation: Customer Service Employer: IRS
 In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 In-Kind Contribution Value: \$ 50 In-Kind Contribution Date: 12-19-25 Aggregate This Election: \$ _____
 Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
 First Name: Angelica Middle Name: _____ Last Name: Thomas
 Address: 7677 Deertail Lane City: Memphis State: TN Zip Code: 38133
 Occupation: Customer Support Employer: Brothers
 In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 In-Kind Contribution Value: \$ 25 In-Kind Contribution Date: 12-23-25 Aggregate This Election: \$ _____
 Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
 First Name: Rahedah Middle Name: _____ Last Name: Sones
 Address: 4963 E Lionsgate Dr City: Memphis State: TN Zip Code: 38116
 Occupation: Realtor Employer: Dream Reality
 In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
 In-Kind Contribution Value: \$ 250 In-Kind Contribution Date: 12-23-25 Aggregate This Election: \$ _____
 Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 1200
 (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: Sade Bradley
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 1200

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: Lajuana Middle Name: _____ Last Name: Miller
Address: 6035 Cottage Hill Dr City: Millington State: TN Zip Code: 38053
Occupation: Realtor Employer: Memphis Home Connection Realty
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 100 In-Kind Contribution Date: 1-10-26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
First Name: Stephanie Middle Name: _____ Last Name: Patino
Address: 670 McWhirter Ave City: Memphis State: TN Zip Code: 38127
Occupation: Stay at home Mom Employer: unemployed
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 10 In-Kind Contribution Date: 1-13-26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
First Name: Alyce Middle Name: _____ Last Name: Lovell
Address: 4246 PeachRun Lane City: Millington State: TN Zip Code: 38053
Occupation: Retired Employer: Navy
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 50 In-Kind Contribution Date: 1-15-26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR
First Name: Kimberly Middle Name: _____ Last Name: Knox
Address: 6672 CollinsWay Cove City: Memphis State: TN Zip Code: 38141
Occupation: Hair Stylist Employer: Sheek Styles
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 5 In-Kind Contribution Date: 12-10-25 Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 1365

(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: Sade Bradley
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1365

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Andrea Middle Name: _____ Last Name: Wilson
Address: 8440 Pinnacle Dr City: Southaven State: MS Zip Code: 38672
Occupation: Buyer Employer: TKL
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 12-28-25 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: \$ _____

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: \$ 1415
(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Sadie Bradley
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
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: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
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: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
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: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
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: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
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: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ _____
(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Gade Bradley
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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

Business or Organization Name: Canva OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 110 Gippax Street City: Surry Hills State: NSW Zip Code: 2010
Purpose of Expenditure: Marketing
Amount of Expenditure: \$ 390.58 Date of Expenditure: \$ 12-31-25

Business or Organization Name: Hobby Lobby OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8699 No Us. Highway 51 City: Millington State: TN Zip Code: 38053
Purpose of Expenditure: Shirts / Hats
Amount of Expenditure: \$ 103.29 Date of Expenditure: \$ 12-27-25 / 12-22-25

Business or Organization Name: Kroger OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1212 E. Shelby Drive City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Volunteer / Canvassing
Amount of Expenditure: \$ 20.00 Date of Expenditure: \$ 12-31-25

Business or Organization Name: Kroger OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8039 US. 51 Highway City: Millington State: TN Zip Code: 38053
Purpose of Expenditure: Canvassing
Amount of Expenditure: \$ 1000 Date of Expenditure: \$ 1-15-26

Business or Organization Name: Kroger OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8039 US. 51 Highway City: Millington State: TN Zip Code: 38053
Purpose of Expenditure: Canvassing
Amount of Expenditure: \$ 10.00 Date of Expenditure: \$ 1-9-26

Total Expenditures: \$ 539.87

(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: Sade Bradley
2. Reporting Period: Start Date: 11-24-25 End Date: 1-15-26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 539.87

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: Anedot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3723 Greenville Ave Ste 41002 City: Dallas State: TX Zip Code: 75206-5311
Purpose of Expenditure: _____
Amount of Expenditure: \$ 61.70 Date of Expenditure: \$ 12-10-25 - 1-15-26

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

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

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: \$ 601.57

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
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: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: ____ Zip Code: _____
Outstanding Loan Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End)..... \$ _____
Loan Received For: Primary Election General Election Runoff (Local Elections Only)
Date of Loan: _____

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)..... \$ _____