



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. Date: 1/27/2026 2.a. Candidate or Committee Name: Derek Mills

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 11/3/2025

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

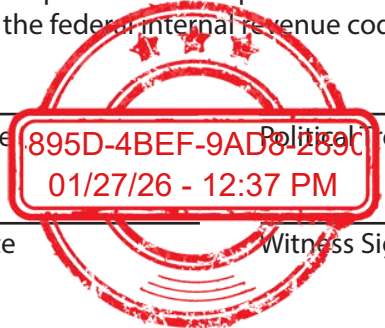
8. Category or Report: (check one)  
 First Quarter     Second Quarter     Third Quarter     Fourth Quarter     Pre-Primary     Pre-General  
 Mid-Year Supplemental     Year-End Supplemental     Runoff Election

9. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026

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>\$154,084.20</u>
b. Total Receipts This Period .....	\$ <u>\$29,100.00</u>
c. Total Disbursements This Period .....	\$ <u>\$35,745.92</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>\$147,438.28</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: Derek Mills

14. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026

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) ..... \$ \$29,100.00
- 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.) ..... \$ \$29,100.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$35,745.92  
(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.)..... \$ \$35,745.92

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: 7/1/2025 End Date: 1/16/2026
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: Kim Middle Name: \_\_\_\_\_ Last Name: Brown  
Address: 177 Crescent Dr City: Collierville State: TN Zip Code: 38017  
Occupation: Contractor Employer: Grant & Company  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 7/15/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Grant Middle Name: \_\_\_\_\_ Last Name: McLemore  
Address: 530 Quail Crest Dr City: Collierville State: TN Zip Code: 38017  
Occupation: Builder Employer: McLemore Home Builders  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 7/16/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kent Middle Name: \_\_\_\_\_ Last Name: Wunderlich  
Address: 4217 Gwynne Road City: Memphis State: TN Zip Code: 38117  
Occupation: CEO Employer: Financial Federal Bank  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$500.00 Date of Contribution: 7/21/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Levy Middle Name: \_\_\_\_\_ Last Name: Harris  
Address: PO Box 328 City: Hernando State: MS Zip Code: 38632  
Occupation: Owner Employer: L & T Services LLC  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 7/21/2025 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$3,900.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,900.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Levy Middle Name: \_\_\_\_\_ Last Name: Harris  
Address: PO Box 328 City: Hernando State: MS Zip Code: 38632  
Occupation: Owner Employer: L & T Services LLC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 7/21/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: JW Middle Name: \_\_\_\_\_ Last Name: Miller  
Address: PO Box 328 City: Hernando State: MS Zip Code: 38632  
Occupation: Manager Employer: L & T Services LLC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ \$1,200.00 Date of Contribution: 7/21/2025 Aggregate This Election: \$ \$1,200.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Joseph Middle Name: \_\_\_\_\_ Last Name: Murphy  
Address: 1963 Vinton Ave City: Memphis State: TN Zip Code: 38104  
Occupation: Attorney Employer: US Attorneys Office  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ \$100.00 Date of Contribution: 7/24/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: Shelby County Deputy Sheriff's Association **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 5120 Stage Rd City: Memphis State: TN Zip Code: 38134  
Occupation: N/A Employer: N/A  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ \$500.00 Date of Contribution: 8/12/2025 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$7,600.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Yale Middle Name: \_\_\_\_\_ Last Name: Margolis  
Address: 3341 N 37th St City: Hollywood State: FL Zip Code: 33021  
Occupation: Partner Employer: Smarter Degree  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 9/22/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: Friends of David Lenoir **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1661 Aaron Brenner Dr Ste 300 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: 9/29/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Joel Middle Name: R. Last Name: Kimbrough  
Address: 2324 Pinnacle Creek Dr City: Germantown State: TN Zip Code: 38138  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 10/8/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Joel Middle Name: R. Last Name: Kimbrough  
Address: 2324 Pinnacle Creek Dr City: Germantown State: TN Zip Code: 38138  
Occupation: Retired Employer: Retired  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$100.00 Date of Contribution: 10/8/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$11,100.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$11,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Melissa Middle Name: J. Last Name: Kimbrough  
Address: 2324 Pinnacle Creek Dr City: Germantown State: TN Zip Code: 38138  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 10/8/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Melissa Middle Name: J. Last Name: Kimbrough  
Address: 2324 Pinnacle Creek Dr City: Germantown State: TN Zip Code: 38138  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$100.00 Date of Contribution: 10/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: John Middle Name: \_\_\_\_\_ Last Name: Robilio  
Address: 18 South Yates City: Memphis State: TN Zip Code: 38120  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$50.00 Date of Contribution: 10/29/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: David Middle Name: \_\_\_\_\_ Last Name: Hamilton  
Address: 2435 Brents Walk Cove City: Eads State: TN Zip Code: 38028  
Occupation: CEO Employer: Impact Logistics  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,500.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$1,500.00

Total Contributions: \$ \$14,650.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$14,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: James Middle Name: \_\_\_\_\_ Last Name: Cross  
Address: 2652 Fox Hill Cir E 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: \$ \$1,000.00 Date of Contribution: 11/25/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: John Middle Name: \_\_\_\_\_ Last Name: Robilio  
Address: 18 S Yates Rd City: Memphis State: TN Zip Code: 38120  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$50.00 Date of Contribution: 11/25/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: Memphis Fire Fighters Assoc PAC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 5150 Stage Rd Ste 103 City: Memphis State: TN Zip Code: 38134  
Occupation: NA Employer: NA  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 11/25/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jennifer Middle Name: \_\_\_\_\_ Last Name: Farrell  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$18,600.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$18,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jennifer Middle Name: \_\_\_\_\_ Last Name: Farrell  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Terry Middle Name: \_\_\_\_\_ Last Name: Harris Jr  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Terry Middle Name: \_\_\_\_\_ Last Name: Harris Sr  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Terry Middle Name: \_\_\_\_\_ Last Name: Harris Sr  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$26,200.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$26,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Terry Middle Name: \_\_\_\_\_ Last Name: Harris Sr  
Address: 89 S Front St City: Memphis State: TN Zip Code: 38103  
Occupation: Retired Employer: Retired  
Contribution Received For: Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 12/31/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Cigna Group Employee PAC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1601 Chestnut Street TL16B City: Philadelphia State: PA Zip Code: 19192  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)   
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 12/31/2025 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: \$ \$29,100.00

(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: 7/1/2025 End Date: 1/16/2026
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: \$ \$1,300.00 Date of Expenditure: \$ 9/10/2025

Business or Organization Name: KWAM **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: \$ \$699.00 Date of Expenditure: \$ 12/2/2025

Business or Organization Name: Margin of Victory **OR**

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

Address: PO Box 196 City: Collierville State: TN Zip Code: 38027

Purpose of Expenditure: Campaign Consulting

Amount of Expenditure: \$ \$2,500.00 Date of Expenditure: \$ 9/2/2025

Business or Organization Name: Jack Johnson for State Senator **OR**

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

Address: 425 Rep John Lewis Way N Ste 7 City: Nashville State: TN Zip Code: 37243

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 7/16/2025

Business or Organization Name: Brent Taylor for Senate **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: \$ \$1,500.00 Date of Expenditure: \$ 8/12/2025

Total Expenditures: \$ \$6,999.00

(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: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,999.00

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: Ron Gant for Tennessee 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: \$ \$500.00 Date of Expenditure: \$ 10/10/2025

Business or Organization Name: Brent Taylor for Senate 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: \$ \$500.00 Date of Expenditure: \$ 10/22/2025

Business or Organization Name: Collierville Rotary Foundation OR

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

Address: 347 S Center St City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$295.28 Date of Expenditure: \$ 11/11/2025

Business or Organization Name: Paul Bailey for Senate OR

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

Address: 425 5th Ave N Ste 736 Cordell Hu City: Nashville State: TN Zip Code: 37243

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 11/18/2025

Business or Organization Name: Friends of Bo Watson OR

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

Address: 425 Rep John Lewis Way N Ste 7 City: Nashville State: TN Zip Code: 37243

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$260.73 Date of Expenditure: \$ 12/1/2025

Total Expenditures: \$ \$9,055.01

(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: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,055.01

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: Collierville Rotary Foundation **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 347 S Center St City: Collierville State: TN Zip Code: 38017  
Purpose of Expenditure: Dues  
Amount of Expenditure: \$ \$950.00 Date of Expenditure: \$ 8/19/2025

Business or Organization Name: Memphis Touchdown Club **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: PO Box 770771 City: Memphis State: TN Zip Code: 38177  
Purpose of Expenditure: Membership  
Amount of Expenditure: \$ \$375.00 Date of Expenditure: \$ 10/1/2025

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: \$ \$40.30 Date of Expenditure: \$ 7/15/2025

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: \$ \$20.30 Date of Expenditure: \$ 7/16/2025

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: \$ \$4.30 Date of Expenditure: \$ 7/24/2025

Total Expenditures: \$ \$10,444.91

(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: Derek Mills
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$10,444.91

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: 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: \$ \$40.30 Date of Expenditure: \$ 9/22/2025

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: \$ \$2.30 Date of Expenditure: \$ 10/29/2025

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: \$ \$60.30 Date of Expenditure: \$ 11/13/2025

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

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

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

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$900.00 Date of Expenditure: \$ 7/16/2025

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

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

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

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$275.00 Date of Expenditure: \$ 7/16/2025

Total Expenditures: \$ \$11,722.81

(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: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$11,722.81

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: Collierville Chamber of Commerce **OR**

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

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

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$485.00 Date of Expenditure: \$ 7/16/2025

Business or Organization Name: Germantwon Area Chamber of Commerce **OR**

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

Address: 2195 S Germantown Rd City: Germantown State: TN Zip Code: 38138

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$800.00 Date of Expenditure: \$ 7/16/2025

Business or Organization Name: Memphis Spirit Squads **OR**

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

Address: 3720 Alumni Ave City: Memphis State: TN Zip Code: 38152

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$1,100.00 Date of Expenditure: \$ 8/6/2025

Business or Organization Name: Collierville Rotary Club **OR**

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

Address: 347 S Center St City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$1,700.00 Date of Expenditure: \$ 8/19/2025

Business or Organization Name: Couture Cares **OR**

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

Address: PO Box 770644 City: Memphis State: TN Zip Code: 38177

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$125.00 Date of Expenditure: \$ 8/26/2025

Total Expenditures: \$ \$15,932.81

(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: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$15,932.81

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: Collierville Citizens Police Association **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: PO Box 866 City: Collierville State: TN Zip Code: 38027  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$5,000.00 Date of Expenditure: \$ 8/29/2025

Business or Organization Name: PMW Foundation **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 9920 Humphrey Rd City: Cordova State: TN Zip Code: 38018  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$1,500.00 Date of Expenditure: \$ 9/10/2025

Business or Organization Name: Briarcrest Christian School **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 76 S Houston Levee Rd City: Eads State: TN Zip Code: 38028  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$1,350.00 Date of Expenditure: \$ 9/17/2025

Business or Organization Name: Page Robbins Adult Day Center **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1961 South Houston Levee Rd City: Collierville State: TN Zip Code: 38017  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$1,050.00 Date of Expenditure: \$ 9/17/2025

Business or Organization Name: Shelby County Sheriff's Office Charity Golf **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 930 E Mallory Avenue City: Memphis State: TN Zip Code: 38106  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 9/29/2025

Total Expenditures: \$ \$25,582.81

(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: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$25,582.81

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: 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: \$ \$2,000.00 Date of Expenditure: \$ 10/13/2025

Business or Organization Name: East Shelby Republican Club **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 1900 Germantown Rd City: Germantown State: TN Zip Code: 38138  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$700.00 Date of Expenditure: \$ 10/27/2025

Business or Organization Name: Margin of Victory **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: PO Box 196 City: Collierville State: TN Zip Code: 38027  
Purpose of Expenditure: Campaign Consulting  
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 12/12/2025

Business or Organization Name: The Salvation Army - KY/TN **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2110 High Wickham Place City: Louisville State: KY Zip Code: 40242  
Purpose of Expenditure: Donation  
Amount of Expenditure: \$ \$1,040.88 Date of Expenditure: \$ 12/12/2025

Business or Organization Name: Shelby County Young Republicans **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2365 Kirby Rd City: Memphis State: TN Zip Code: 38119  
Purpose of Expenditure: Sponsor  
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 12/19/2025

Total Expenditures: \$ \$30,623.69

(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: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$30,623.69

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: Margin of Victory **OR**

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

Address: PO Box 196 City: Collierville State: TN Zip Code: 38027

Purpose of Expenditure: Campaign Consulting

Amount of Expenditure: \$ \$2,000.00 Date of Expenditure: \$ 1/5/2026

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: Dues

Amount of Expenditure: \$ \$36.00 Date of Expenditure: \$ 1/8/2026

Business or Organization Name: Collierville Education Foundation **OR**

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

Address: 215 W Poplar Ave City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$3,000.00 Date of Expenditure: \$ 1/12/2026

Business or Organization Name: Tennessee Republican Party **OR**

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

Address: 95 White Bridge Rd Ste 414 City: Nashville State: TN Zip Code: 37205

Purpose of Expenditure: Republican Party Registration

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 12/22/2025

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: Donation

Amount of Expenditure: \$ \$36.23 Date of Expenditure: \$ 1/8/2026

Total Expenditures: \$ \$35,745.92

(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.)