

Revised



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 01/23/20 2.a. Candidate or Committee Name: Friends of Amber Huett Garcia
 2.b. If Committee, Name of Candidate: Amber Huett Garcia 3. Election Date: Aug 2022
 4. Campaign Address: 4653 Chickasaw Rd
 City: Memphis State: TN Zip Code: 38117 Phone: 309-256-4115
 5. Candidate Home Address: 4653 Chickasaw Rd
 City: Memphis State: TN Zip Code: 38117 Phone: 309-256-4115
 Candidate Email Address: amberhuettgarcia@gmail.com
 6. Office Sought: (include district number, if applicable) School Board, MSCS District 8
 7. Name of Political Treasurer (may be candidate): Tate Wilson
 Political Treasurer Email Address: tateswilson@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: 7/01/25 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.

Amber Huett Garcia 1/10/26
 Candidate Signature Date

Tate Wilson 1/15/26
 Political Treasurer Signature Date

Austin J. Dora 1/15/26
 Witness Signature Date

Jeffery Dora 1/15/26
 Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>810.15</u>
b. Total Receipts This Period	\$ <u>6849.00</u>
c. Total Disbursements This Period	\$ <u>7659.15</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>0</u>
e. Total Loans Outstanding	\$ <u>0</u>
f. Total Obligations Outstanding	\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Friends of Amber Huett Garcia

14. Reporting Period: Start Date: 07/01/23 End Date: 01/15/24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 3424.00
(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) \$ 3425.00
- 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.) \$ 6849.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 7659.15
(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.)..... \$ 7659.15

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: Friends of Amber Huett-Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
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: Christopher Middle Name: _____ Last Name: Coleman
Address: 5136 Wemberly Dr City: Memphis State: TN Zip Code: 38125
Occupation: Educator Employer: Teach for America
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 10/28/25 Aggregate This Election: \$ 250.00

Business or Organization Name: LEE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 808 N King St City: Wilmington State: DE Zip Code: 19801
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000.00 Date of Contribution: 11/11/25 Aggregate This Election: \$ 1000.00

Business or Organization Name: _____ **OR**
First Name: Will Middle Name: _____ Last Name: Richardson
Address: 8316 Macon City: Cordova State: TN Zip Code: 38018
Occupation: _____ Employer: SELF
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/19/25 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ **OR**
First Name: Joseph Middle Name: _____ Last Name: Cooper
Address: 116 N Graham City: Memphis State: TN Zip Code: 38117
Occupation: NONE Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300.00 Date of Contribution: 11/19/25 Aggregate This Election: \$ 300.00

Total Contributions: \$ 1800.00

(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: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Ronald Middle Name: _____ Last Name: Schuyler
Address: 163 Harbor Village Dr City: Memphis State: TN Zip Code: 38103
Occupation: VP, Goodwill Excel Employer: Goodwill Excel Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/12/25 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: John Middle Name: _____ Last Name: Barker
Address: 66 Monroe Ave City: Memphis State: TN Zip Code: 38103
Occupation: Ed Admin Employer: TN Career Academy
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/17/25 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: Justin Middle Name: _____ Last Name: Bailey
Address: 213 S Barksdale St City: Memphis State: TN Zip Code: 38104
Occupation: Attorney Employer: FedEx
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: Jamilica Middle Name: _____ Last Name: Burke
Address: 1706 Belveder Ct City: Memphis State: TN Zip Code: 38104
Occupation: Nonprofit Employer: Seeding Success
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/19/25 Aggregate This Election: \$ 250.00

Total Contributions: \$ 2800.00

(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: Friends of Amber Huett-Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Dorsey Middle Name: _____ Last Name: Hopson
Address: 184 S Belvedere Blvd City: Memphis State: TN Zip Code: 38104
Occupation: Attorney Employer: self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/19/25 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: Suzanne Middle Name: _____ Last Name: Shovlin
Address: 5171 Woodlark Ave City: Memphis State: TN Zip Code: 38117
Occupation: Sr Mngmt Employer: TDIG
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 125.00 Date of Contribution: 11/20/25 Aggregate This Election: \$ 125.00

Business or Organization Name: _____ OR
First Name: Kevin Middle Name: _____ Last Name: Leslie
Address: 874 S Cox City: Memphis State: TN Zip Code: 38104
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 11/20/25 Aggregate This Election: \$ 250.00

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: \$ _____

Total Contributions: \$ 3425.00
(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

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: \$ 0

(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: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 01/01/25 End Date: 01/15/26
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: Friends of Amber Huett Garcia OR
First Name: Amber Middle Name: _____ Last Name: Huett Garcia
Address: 4653 Chickasaw Rd City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Funds from SB transfer
Amount of Expenditure: \$ 4109.32 Date of Expenditure: \$ 11/30/25

Business or Organization Name: Regions Bank OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4790 Poplar Ave City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ 7.00 Date of Expenditure: \$ 8/29/25

Business or Organization Name: Regions Bank OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4790 Poplar Ave City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ 7.00 Date of Expenditure: \$ 7/31/25

Business or Organization Name: Godaddy.com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 S Mill Ave Suite 1600 City: Tempe State: AZ Zip Code: 85281
Purpose of Expenditure: Website domain
Amount of Expenditure: \$ 84.60 Date of Expenditure: \$ 10/08/25

Business or Organization Name: Regions Bank OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4790 Poplar Ave City: memphis State: TN Zip Code: 38117
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ 7.00 Date of Expenditure: \$ 9/30/25

Total Expenditures: \$ 4214.92
(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 1/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4214.92

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: Friends of Amber Huett Garcia OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4653 Chickasaw Rd City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Self donation
Amount of Expenditure: \$ ~~50.00~~ 50.00 Date of Expenditure: 10/27/25

Business or Organization Name: Wix OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Gavenroot City: New York State: NY Zip Code: 10014
Purpose of Expenditure: website
Amount of Expenditure: \$ 64.75 Date of Expenditure: 10/28/25

Business or Organization Name: Regions Bank OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4790 Poplar Ave City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: Bank fee
Amount of Expenditure: \$ 7.00 Date of Expenditure: 10/31/25

Business or Organization Name: LEE PAC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 800 N King St City: Wilmington State: DE Zip Code: 19801
Purpose of Expenditure: donation
Amount of Expenditure: \$ 1500.00 Date of Expenditure: 11/18/25

Business or Organization Name: Wix OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 N Gavenroot City: New York State: NY Zip Code: 10014
Purpose of Expenditure: website
Amount of Expenditure: \$ 223.89 Date of Expenditure: 11/20/25

Total Expenditures: \$ 5560.56

(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: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 5560.50

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: _____ OR
First Name: Demarcus Middle Name: _____ Last Name: Bowser
Address: _____ City: Memphis State: TN Zip Code: _____
Purpose of Expenditure: Headshots
Amount of Expenditure: \$ 250.00 Date of Expenditure: 11/20/25

Business or Organization Name: _____ OR
First Name: Tiffany Middle Name: _____ Last Name: Dixon
Address: 2851 Aspen Glade Cv City: Cordova State: TN Zip Code: 38016
Purpose of Expenditure: Research
Amount of Expenditure: \$ 53.69 Date of Expenditure: 11/21/25

Business or Organization Name: Wix OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Gavenroot City: New York State: NY Zip Code: 10014
Purpose of Expenditure: _____
Amount of Expenditure: \$ 104.75 Date of Expenditure: 11/28/25

Business or Organization Name: Cooper's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 959 Cooper St City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Campaign event venue +
Amount of Expenditure: \$ 1580.00 Date of Expenditure: 11/24/25

Business or Organization Name: East Mem Dem Club OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: Barfield Rd City: Memphis State: TN Zip Code: 38117
Purpose of Expenditure: donation
Amount of Expenditure: \$ 150.00 Date of Expenditure: 8/8/25

Total Expenditures: \$ 71059.15
(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: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 07/15/26
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) \$ 0

Loans Received \$ 0

Loan Payments \$ 0

Outstanding Loan (End)..... \$ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Amber Huett Garcia
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 0	\$ 0	\$ 0