CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 6/25/26 2.a. Candidate or Committee Name: Aaliyah Hakeem

2.b. If Committee, Name of Candidate: Aaliyah Hakeem 3. Election Date: May 2026

4. Campaign Address: 504 Kilmer St.

City: Chattanooga State: TN Zip Code: 37404 Phone: 423-933-8679

5. Candidate Home Address: SAME

City: _____ State: _____ Zip Code: _____ Phone: _____

Candidate Email Address: aaliyahkhakeem@gmail.com

6. Office Sought: (include district number, if applicable) Criminal Court Clerk

7. Name of Political Treasurer (may be candidate): Aaliyah Hakeem

Political Treasurer Email Address: aaliyahkhakeem@gmail.com

8. Category or Report: (check one)

☒ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General

☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election

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

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☐ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than $1,000 and/or expenditures total more than $1,000 for this reporting period.

11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Aaliyah K. Hakeem 6/25/26 Aaliyah K. Hakeem 6/25/26

Candidate Signature Date Political Treasurer Signature Date

[signature] 6/25/26 [signature] 6/25/26

Witness Signature Date Witness Signature Date

HAMILTON CO. ELECTION 25 JUN '26 PM3:50

12. Summary:

a.	Balance On Hand Last Report	$ 0
b.	Total Receipts This Period	$ 62.00
c.	Total Disbursements This Period	$ 22.01
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 39.99
e.	Total Loans Outstanding	$
f.	Total Obligations Outstanding	$ 437.66

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: _____

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

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 62.00
(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) ..... $ 0

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.) ..... $ 62.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 22.01
(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.) ..... $ 22.01

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.) ..... $ 437.00

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: __________

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

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 0

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: Smart Bank FDIC
First Name: __________ Middle Name: __________ Last Name: __________
Address: P.O Box 650707 City: Dallas State: TX Zip Code: 5205-0707
Purpose of Expenditure: Campaign account Checks
Amount of Expenditure: $ 22.01 Date of Expenditure: $ 1/21/26

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: $ 22.01
(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 OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name:
2. Reporting Period: Start Date: 1/16/26 End Date: 3/31/26
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: Image Works
First Name: Middle Name:
Last Name:
Address: 3530 S. Broad St
City: Chattanooga
State: TN Zip Code: 37409

Description of Obligation:	LFP Media Political Signs		
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$ 0	$ 437.00	$ -0-	$ 437.00

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	Payments This Period	Outstanding Balance (Period End)
$ -0-	$ 437.00	$ -0-	$ 437.00