



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 1/30/26 2.a. Candidate or Committee Name: Lashanta Rudd for County Commission
 2.b. If Committee, Name of Candidate: Lashanta Rudd 3. Election Date: May 5, 2026
 4. Campaign Address: 1200 David St.
 City: Memphis State: TN Zip Code: 38114 Phone: 901-849-7739
 5. Candidate Home Address: 1200 David St
 City: Memphis State: TN Zip Code: 38114 Phone: 901-849-7739
 Candidate Email Address: vote.lashanta.rudd10@gmail.com
 6. Office Sought: (include district number, if applicable) Shelby County Commission District 10
 7. Name of Political Treasurer (may be candidate): Lashanta Rudd
 Political Treasurer Email Address: vote.lashantarudd10@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: 7/1/2025 End Date: 1/15/2026

10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.

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

<u>Lashanta Rudd</u> Candidate Signature	<u>1/30/26</u> Date	<u>Lashanta Rudd</u> Political Treasurer Signature	<u>1/30/26</u> Date
<u>[Signature]</u> Witness Signature	<u>1/30/26</u> Date	<u>[Signature]</u> Witness Signature	<u>1/30/26</u> Date

12. Summary:

a. Balance On Hand Last Report.....	\$ <u>0</u>
b. Total Receipts This Period.....	\$ <u>1225.79</u>
c. Total Disbursements This Period.....	\$ <u>1101.56</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.).....	\$ <u>124.23</u>
e. Total Loans Outstanding.....	\$ <u>0</u>
f. Total Obligations Outstanding.....	\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Lashanta Budd for County Commissioner

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

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 1025.79
(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) \$ 200.00
- 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.) \$ 1225.79

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 1101.56
(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.)..... \$ 1101.56

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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
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: Lashanta Middle Name: _____ Last Name: Rudd

Address: 1200 David St City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 60 Date of Contribution: 8/13/2023 Aggregate This Election: \$ 60.00

Open bank account

Business or Organization Name: _____ **OR**

First Name: Jamyra Middle Name: _____ Last Name: Rudd

Address: 825 N. Second St City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 50.00 Date of Contribution: 8/15/2025 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ **OR**

First Name: Javia Middle Name: _____ Last Name: Austin

Address: 1200 David St City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 50.00 Date of Contribution: 8/15/2025 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ **OR**

First Name: LueElla Middle Name: _____ Last Name: Marshall

Address: 2393 Deadrick Ave City: Memphis State: TN Zip Code: 38114

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 100.00 Date of Contribution: 8/18/2025 Aggregate This Election: \$ 50.00

Total Contributions: \$ 260.00

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 260

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Janet Middle Name: _____ Last Name: McClora

Address: 6636 Richway Cove City: Bartlett State: TN Zip Code: 38135

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 10 Date of Contribution: 8/20/2025 Aggregate This Election: \$ 10

Business or Organization Name: _____ **OR**

First Name: Jamar Middle Name: _____ Last Name: Douglas

Address: 5574 Bayshore City: Memphis State: TN Zip Code: 38115

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 5 Date of Contribution: 8/21/2025 Aggregate This Election: \$ 5

Business or Organization Name: _____ **OR**

First Name: Tiffany Middle Name: _____ Last Name: Fletcher

Address: 1189 Lemasa Dr. City: Cordova State: TN Zip Code: 38018

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 200 Date of Contribution: 8/23/2025 Aggregate This Election: \$ 200

Business or Organization Name: _____ **OR**

First Name: Brittany Middle Name: _____ Last Name: Arnolds

Address: 841 Pecan Gardens City: Memphis State: TN Zip Code: 38122

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 50 Date of Contribution: 11/25/2025 Aggregate This Election: \$ 50.00

Total Contributions: \$ 265.00

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 525

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Lora Middle Name: _____ Last Name: Warr
Address: 1056 College City: Memphis State: TN Zip Code: 38106
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40.79 Date of Contribution: 12/01/2025 Aggregate This Election: \$ 40.79

Business or Organization Name: _____ **OR**
First Name: Archie Middle Name: _____ Last Name: Reemes
Address: 1056 College City: Memphis State: TN Zip Code: 38106
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 12/1/2025 Aggregate This Election: \$ 25

Business or Organization Name: _____ **OR**
First Name: Louise Middle Name: _____ Last Name: King
Address: 3732 Mandaray City: Memphis State: TN Zip Code: 38111
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 12/1/2025 Aggregate This Election: \$ 25

Business or Organization Name: _____ **OR**
First Name: Susan Middle Name: _____ Last Name: Massa
Address: 3050 Windstone City: Germentown State: TN Zip Code: 38122
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 12/01/2025 Aggregate This Election: \$ 25

Total Contributions: \$ 100

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 625

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Fred Middle Name: _____ Last Name: Scott

Address: _____ City: Memphis State: TN Zip Code: 38109

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 10 Date of Contribution: 12/5/2025 Aggregate This Election: \$ 10

Business or Organization Name: _____ **OR**

First Name: Arlene Middle Name: _____ Last Name: Fifer

Address: 1091 Popen Dr City: Memphis State: TN Zip Code: 38111

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 20 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 20

Business or Organization Name: _____ **OR**

First Name: Shelia Middle Name: _____ Last Name: Williams

Address: _____ City: Memphis State: TN Zip Code: _____

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 25 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 25

Business or Organization Name: _____ **OR**

First Name: Juanita Middle Name: _____ Last Name: Johnson

Address: 2940 Knight Rd City: Memphis State: TN Zip Code: 38118

Occupation: _____ Employer: _____

Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ 25 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 25

Total Contributions: \$ 80.00

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 705

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Lisa Middle Name: _____ Last Name: Moore
Address: 3778 Silver Chalice City: Memphis State: TN Zip Code: 38115
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 12/5/2025 Aggregate This Election: \$ 25

Business or Organization Name: _____ **OR**
First Name: Trishia Middle Name: _____ Last Name: Henderson
Address: 3238 Yale Rd City: Memphis State: TN Zip Code: 38112
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 20

Business or Organization Name: _____ **OR**
First Name: Toni Middle Name: _____ Last Name: Horton
Address: 4574 Dunn Ave City: Memphis State: TN Zip Code: 38117
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 20

Business or Organization Name: _____ **OR**
First Name: Andrea Middle Name: _____ Last Name: Jones
Address: 5145 Bridge Meadow City: Memphis State: TN Zip Code: 38125
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 12/19/2025 Aggregate This Election: \$ 20

Total Contributions: \$ 85.00

(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: Lashanta Rudd for County Commissioner D10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 790.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Brian Middle Name: _____ Last Name: Tilman
Address: 209 Walnut Trace Dr City: Cordova State: TN Zip Code: 38108
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25.00 Date of Contribution: 12/24/2025 Aggregate This Election: \$ 25.00

Business or Organization Name: _____ **OR**
First Name: Sharney Middle Name: _____ Last Name: Davis
Address: 5273 Neely City: Memphis State: TN Zip Code: 38109
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 12/24/2025 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Andre Middle Name: _____ Last Name: Farmer
Address: 4230 Philsdale City: Memphis State: TN Zip Code: 38111
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25.00 Date of Contribution: 12/26/2025 Aggregate This Election: \$ 25.00

Business or Organization Name: _____ **OR**
First Name: Ashonte Middle Name: _____ Last Name: Howard
Address: 950 Hamilton City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 12/26/2025 Aggregate This Election: \$ 20.00

Total Contributions: \$ 90.00

(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: Lashanta Rudd for County Commissioner D10
2. Reporting Period: Start Date: 07/01/2025 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 890.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Dedrick Middle Name: _____ Last Name: Butler
Address: 3284 Ridgcrest St City: Memphis State: TN Zip Code: 38127
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10.00 Date of Contribution: 12/26/2025 Aggregate This Election: \$ 10.00

Business or Organization Name: _____ **OR**
First Name: Tamara Middle Name: _____ Last Name: Thompson
Address: 1061 Natchez City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 12/24/2025 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Shaniqua Middle Name: _____ Last Name: Fields
Address: 3648 Buffalo Rd City: Memphis State: TN Zip Code: 38109
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10.00 Date of Contribution: 12/26/2025 Aggregate This Election: \$ 10.00

Business or Organization Name: _____ **OR**
First Name: Sonya Middle Name: _____ Last Name: Feagins
Address: 215 Bush Rd. City: Smith Station State: AL Zip Code: 36877
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 25.00 Date of Contribution: 12/29/2025 Aggregate This Election: \$ 25.00

Total Contributions: \$ 65.00

(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: Lashanta Rudd for County Commissioner D10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 945.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Shereva Middle Name: _____ Last Name: Vaugh
Address: 1441 Eastmoreland City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 70.00 Date of Contribution: 1/2/2026 Aggregate This Election: \$ 70.00

Business or Organization Name: _____ **OR**
First Name: Cynthia Middle Name: _____ Last Name: Thomas
Address: 3157 Winchester City: Memphis State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 1/3/2026 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Kenneth Middle Name: _____ Last Name: Ellis
Address: 130 S. Front St City: Memphis State: TN Zip Code: 38103
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 10.00 Date of Contribution: 1/6/2026 Aggregate This Election: \$ 10.00

Business or Organization Name: _____ **OR**
First Name: Timothy Middle Name: _____ Last Name: Conley
Address: 5352 Bradcliff City: Memphis State: TN Zip Code: 38109
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 1/7/2026 Aggregate This Election: \$ 100.00

Total Contributions: \$ 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: Lashanta Rudd for County Commissioner D10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1145.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Casio Middle Name: _____ Last Name: Jones
Address: _____ City: Memphis State: TN Zip Code: 38128
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 1/8/2026 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Avis Middle Name: _____ Last Name: Bailey
Address: _____ City: Memphis State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 1/8/2026 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Tammy Middle Name: _____ Last Name: Harris
Address: 2877 Knight Rd City: Memphis State: TN Zip Code: 38118
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.00 Date of Contribution: 1/8/2026 Aggregate This Election: \$ 20.00

Business or Organization Name: _____ **OR**
First Name: Steven Middle Name: _____ Last Name: Hardrick
Address: 2453 Park Ave. City: Memphis State: TN Zip Code: 38114
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 20.79 Date of Contribution: 1/8/2026 Aggregate This Election: \$ 20.79

Total Contributions: \$ 80.79

(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: Lashanta Rudd for County Commissioner D10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1225.79

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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: Bailey
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: Harris
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: \$ 1225.79

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Direct FX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Car Magnets
Amount of Expenditure: \$ 197.95 Date of Expenditure: 9/26/2025

Business or Organization Name: Vista Print **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Flyers and Wire Racks
Amount of Expenditure: \$ 96.47 Date of Expenditure: 10/24/2025

Business or Organization Name: Vista Print **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Flyers
Amount of Expenditure: \$ 89.97 Date of Expenditure: 11/30/2025

Business or Organization Name: Signs On The Cheap **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Signs
Amount of Expenditure: \$ 340.22 Date of Expenditure: 12/7/2025

Business or Organization Name: Signs On The Cheap **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Campaign Signs
Amount of Expenditure: \$ 294.95 Date of Expenditure: 12/17/2025

Total Expenditures: \$ 1019.56

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1019.56

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: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank fees
Amount of Expenditure: \$ 3.00 Date of Expenditure: 9/30/2025

Business or Organization Name: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank Fees
Amount of Expenditure: \$ 3.00 Date of Expenditure: 10/31/2025

Business or Organization Name: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank fees
Amount of Expenditure: \$ 3.00 Date of Expenditure: 11/28/2025

Business or Organization Name: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank Fee
Amount of Expenditure: \$ 35.00 Date of Expenditure: 12/8/2025

Business or Organization Name: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank fees
Amount of Expenditure: \$ 35.00 Date of Expenditure: 12/18/2025

Total Expenditures: \$ 79.00

(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: Lashanta Rudd for County Commissioner D-10
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/1026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1098.56

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: First Horizon Bank **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Bank fees
Amount of Expenditure: \$ 3.00 Date of Expenditure: 12/31/2025

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

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: \$ 1101.56

(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 OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Lashanta Ludd for County Commission
2. Reporting Period: Start Date: 7/1/25 End Date: 1/15/26
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)
\$	\$	\$	\$ 0

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)
\$	\$	\$	\$ 0

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)
\$	\$	\$	\$ 0

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)
\$	\$	\$	\$ 0

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

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Lashanta Ridd for County Commissioner
2. Reporting Period: Start Date: 7/1/25 End Date: 1/15/26
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 \$ _____

Outstanding Loan (End) \$ 0