



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 5/11/2026 2.a. Candidate or Committee Name: Jonathan Carroll

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 3757 Kearney Avenue
 City: Memphis State: TN Zip Code: 38111 Phone: 9013013433

5. Candidate Home Address: 3757 Kearney Avenue
 City: Memphis State: TN Zip Code: 38111 Phone: 9013013433
 Candidate Email Address: votejoncarroll@gmail.com

6. Office Sought: (include district number, if applicable) County School Bd., Dist. 9

7. Name of Political Treasurer (may be candidate): Regina Clarke
 Political Treasurer Email Address: votejoncarroll@gmail.com

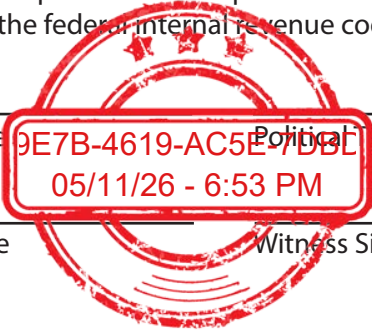
8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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>\$3,243.11</u>
b. Total Receipts This Period	\$ <u>\$8,080.00</u>
c. Total Disbursements This Period	\$ <u>\$9,041.41</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$2,281.70</u>
e. Total Loans Outstanding	\$ <u>\$5,000.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jonathan Carroll

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) \$ \$3,080.00
- c. Loans Received This Reporting Period..... \$ \$5,000.00
- 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.) \$ \$8,080.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$9,041.41
(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.)..... \$ \$9,041.41

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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Sanjeev Middle Name: _____ Last Name: Memula
Address: 393 Dogwood Valley Drive City: Collierville State: TN Zip Code: 38017
Occupation: Attorney Employer: City of Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$950.00

Business or Organization Name: _____ **OR**
First Name: Meggan Middle Name: _____ Last Name: Kiel
Address: 1741 Autumn Avenue City: Memphis State: TN Zip Code: 38112
Occupation: Director Employer: Facing History and Ourselves
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$20.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$290.00

Business or Organization Name: _____ **OR**
First Name: Jeffrey Middle Name: _____ Last Name: Skonhovd
Address: 275 E Olive Drive City: Sunnyvale State: CA Zip Code: 94086
Occupation: Software Developer Employer: Apple
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: LaToya Middle Name: _____ Last Name: Humphrey
Address: 5312 Water Point Drive City: Memphis State: TN Zip Code: 38141
Occupation: IT Employer: City Of Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$10.00 Date of Contribution: 5/15/2026 Aggregate This Election: \$ \$10.00

Total Contributions: \$ \$280.00

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$280.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Amber Middle Name: _____ Last Name: Huett-Garcia
Address: 4653 Chickasaw Rd City: Memphis State: TN Zip Code: 38117
Occupation: Consultant Employer: Self Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$600.00

Business or Organization Name: _____ **OR**
First Name: John Middle Name: _____ Last Name: Marek
Address: 673 N Mclean Blvd City: Memphis State: TN Zip Code: 38107-512
Occupation: Attorney Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/17/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Lance Middle Name: _____ Last Name: Silkes
Address: 191 S Belvedere Blvd City: Memphis State: TN Zip Code: 38104
Occupation: Owner Employer: Little Italy Restaurant
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 4/20/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Will Middle Name: _____ Last Name: Richardson
Address: 444 Island Drive City: Memphis State: TN Zip Code: 38103
Occupation: Self Employed Employer: Self Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 4/22/2026 Aggregate This Election: \$ \$240.00

Total Contributions: \$ \$780.00

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$780.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Dorsey Middle Name: _____ Last Name: Hopson
Address: 186 S Belvedere Blvd City: Memphis State: TN Zip Code: 38104
Occupation: Attorney Employer: Self Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: M-Pace **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 126 Flicker Street City: Memphs State: TN Zip Code: 38104
Occupation: Lobbying Employer: MSCEA
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Michelle Middle Name: _____ Last Name: Newell
Address: 316 Joyner Avenue City: Nashville State: TN Zip Code: 37210
Occupation: Administer Employer: Catholic Diocese of Nashville
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.0 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$1,900.0

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: \$ \$3,080.00

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: _____ **OR**
First Name: Regina Middle Name: _____ Last Name: Clarke
Address: 686 Hobbs Drive City: Memphis State: TN Zip Code: 38111
Purpose of Expenditure: Campaign Manager Salary
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 4/1/2026

Business or Organization Name: April 4th Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 3267 City: Memphis State: TN Zip Code: 38173
Purpose of Expenditure: Awards Banquet
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 4/1/2026

Business or Organization Name: _____ **OR**
First Name: George Middle Name: _____ Last Name: Townsell
Address: 5680 Winter Tree Drive City: Memphis State: TN Zip Code: 38115
Purpose of Expenditure: Pre Election Campaign Canvassing
Amount of Expenditure: \$ \$364.00 Date of Expenditure: \$ 4/22/2026

Business or Organization Name: Black Market Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3625 Covington Pike City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Campaign Mailers and Services
Amount of Expenditure: \$ \$3,500.00 Date of Expenditure: \$ 4/1/2026

Business or Organization Name: DirectFX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 601 N 3rd City: Memphist State: TN Zip Code: 38107
Purpose of Expenditure: Campaign Mailer
Amount of Expenditure: \$ \$2,193.26 Date of Expenditure: \$ 4/14/2026

Total Expenditures: \$ \$6,807.26

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,807.26

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: Diamond Printing OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 611 N 3rd Avenue City: Memphis State: TN Zip Code: 38107

Purpose of Expenditure: Campaign Literature for Mailer

Amount of Expenditure: \$ \$1,657.53 Date of Expenditure: \$ 4/14/2026

Business or Organization Name: Dominos OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 550 S Highland St City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Food for staff

Amount of Expenditure: \$ \$18.64 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Marathon OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 3877 Park City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Drinks for poll workers

Amount of Expenditure: \$ \$9.52 Date of Expenditure: \$ 4/24/2026

Business or Organization Name: _____ OR

First Name: Eric Middle Name: _____ Last Name: LeQuand

Address: 1020 Semmes City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Poll Worker

Amount of Expenditure: \$ \$210.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: _____ OR

First Name: Regina Middle Name: _____ Last Name: Clarke

Address: 686 Hobbs Drive City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Reimbursement for Campaign Expenses

Amount of Expenditure: \$ \$320.00 Date of Expenditure: \$ 4/25/2026

Total Expenditures: \$ \$9,022.95

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,022.95

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: ActBlue **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Act Blue Fees

Amount of Expenditure: \$ \$18.46 Date of Expenditure: \$ 4/25/2026

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: \$ \$9,041.41

(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: Jonathan Carroll
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Jon Middle Name: _____ Last Name: Carroll

Address: 3757 Kearney City: Memphis State: TN Zip Code: 38111

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$5,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$5,000.00

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

Date of Loan: 4/5/2026

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) \$ \$0.00

Loans Received \$ \$5,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$5,000.00