



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Jordan Hammond
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 5460 Blue Oak Drive
City: Chattanooga State: TN Zip Code: 37416 Phone: 9312593883
5. Candidate Home Address: 5460 Blue Oak Drive
City: Chattanooga State: TN Zip Code: 37416 Phone: 9312593883
Candidate Email Address: JordanHammondD9@gmail.com
6. Office Sought: (include district number, if applicable) County School Board Dist. 9
7. Name of Political Treasurer (may be candidate): Shelly Doran
Political Treasurer Email Address: shelly.doran04@yahoo.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: 4/26/2026 End Date: 6/30/2026
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>587.65</u>
b. Total Receipts This Period	\$ <u>1,175.00</u>
c. Total Disbursements This Period	\$ <u>602.75</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>1,159.90</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: Jordan Hammond

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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) \$ \$1,175.00
- 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.) \$ \$1,175.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$602.75
(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.)..... \$ \$602.75

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$482.50
- c. Total In-Kind Contributions Received This Period \$ \$482.50

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Laura Middle Name: _____ Last Name: Goins

Address: PO Box 6669 City: Dalton State: GA Zip Code: 30722

Occupation: Vitruvian Health Employer: lkgoins@gmail.com

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/9/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Kathy Middle Name: _____ Last Name: Lennon

Address: 401 Crisman Street City: Red Bank State: TN Zip Code: 37415

Occupation: Not Employed Employer: lennonkathy2012@gmail.com

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/21/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Eddy Middle Name: _____ Last Name: Bell

Address: 1020 Trojan Run Dr City: Soddy Daisy State: TN Zip Code: 37379

Occupation: City Employer: choloto@aol.com

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Louis Middle Name: _____ Last Name: Russo

Address: 883 Dog Trot Trail City: Hamilton County State: TN Zip Code: 37343

Occupation: Not Employed Employer: lou4516@gmail.com

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$350.00

(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: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$350.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Beverly Middle Name: _____ Last Name: Gallagher

Address: 7876 Royal Harbor Cir City: Ooltewah State: TN Zip Code: 37363

Occupation: Conifer Health Employer: beverlygallagher105@gmail.com

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Nancy Middle Name: _____ Last Name: Rus

Address: 526 River Street City: Chattanooga State: TN Zip Code: 37405

Occupation: Not Employed Employer: chattperson@gmail.com

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Tuley

Address: 1005 E. Dallas Rd City: Chattanooga State: TN Zip Code: 37405

Occupation: Not Employed Employer: ttuley@gmail.com

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/8/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Sharon Middle Name: _____ Last Name: Bohm

Address: 300 North Woods Lane City: Trenton State: GA Zip Code: 30752

Occupation: Not Available Employer: Not Available

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/9/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$775.00

(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: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$775.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Sharon Middle Name: _____ Last Name: Alexander
Address: 7323 River Run Drive City: Chattanooga State: TN Zip Code: 37416
Occupation: Not Available Employer: Not Available
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Peter and Sue Middle Name: _____ Last Name: Elvin
Address: 1714 Union Avenue City: Chattanooga State: TN Zip Code: 37404
Occupation: Not Available Employer: Not Available
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Allison Middle Name: _____ Last Name: Gorman
Address: 400 Tremont Street City: Chattanooga State: TN Zip Code: 37405
Occupation: Not Available Employer: Not Available
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$100.00

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: \$ \$1,175.00
(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: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

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: Sharon Middle Name: _____ Last Name: Alexander

Address: 7323 River Run Drive City: Chattanooga State: TN Zip Code: 37416

Occupation: Retired Employer: Retired

In-Kind Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: \$ \$482.50 In-Kind Contribution Date: 5/29/2026 Aggregate This Election: \$ \$482.50

Description of In-Kind Contribution: Catering costs - fundraising event

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: \$ \$482.50

(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: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$1.86 Date of Expenditure: \$ 5/9/2026

Business or Organization Name: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$3.48 Date of Expenditure: \$ 5/21/2026

Business or Organization Name: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$3.48 Date of Expenditure: \$ 5/29/2026

Business or Organization Name: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$3.48 Date of Expenditure: \$ 5/29/2026

Business or Organization Name: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$1.86 Date of Expenditure: \$ 5/29/2026

Total Expenditures: \$ \$14.16

(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: Jordan Hammond
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$14.16

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 Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$11.31 Date of Expenditure: \$ 5/29/2026

Business or Organization Name: Actblue Fees **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Proffessional Fees

Amount of Expenditure: \$ \$1.86 Date of Expenditure: \$ 6/15/2026

Business or Organization Name: Print Ready **OR**

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

Address: 4300 N Access Road City: Chattanooga State: TN Zip Code: 37415

Purpose of Expenditure: Campaign Materials

Amount of Expenditure: \$ \$238.17 Date of Expenditure: \$ 6/10/2026

Business or Organization Name: Matt Johnson **OR**

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

Address: P.O. Box 15152 City: Chattanooga State: TN Zip Code: 37415

Purpose of Expenditure: Campaign Management

Amount of Expenditure: \$ \$337.25 Date of Expenditure: \$ 6/15/2026

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: \$ _____

Total Expenditures: \$ \$602.75

(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.)