CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7-28-26 2.a. Candidate or Committee Name: Committe To Elect Charles Gilchrist

2.b. If Committee, Name of Candidate: Billy (Charles) Gilchrist 3. Election Date: 8-6-26

4. Campaign Address: 1127 Talamore Cove

City: Collierville State: TN Zip Code: 38017 Phone: 901-485-9552

5. Candidate Home Address: 1127 Talamore Cove

City: Collierville State: TN Zip Code: 38017 Phone: 901-485-9552

Candidate Email Address: billy.gilchrist@comcast.net

6. Office Sought: (include district number, if applicable) General Sessions Criminal Court 7

7. Name of Political Treasurer (may be candidate): Frances Castillo

Political Treasurer Email Address: francastillo97@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: 7-1-26 End Date: 7-27-26

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.

Candidate Signature	Date	Political Treasurer Signature	Date
[signature]	7-29-26	Frances Castillo	7-29-26

Witness Signature	Date	Witness Signature	Date
Becky Gilchrist	7-29-26	[signature]	7-29-26

12. Summary:

a.	Balance On Hand Last Report	$ 474.57
b.	Total Receipts This Period	$ 1,549
c.	Total Disbursements This Period	$ 1,449.39
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 574.18
e.	Total Loans Outstanding	$ 0
f.	Total Obligations Outstanding	$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Committee to Elect Kevin Calhoun

14. Reporting Period: Start Date: 7-1-26 End Date: 7-27-26

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 0
(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) ..... $ 1,549

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.) ..... $ 1,549

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 1,449.39
(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.) ..... $ 1,443.39

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 ..... $ 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: Committee To Elect Charles Collins

2. Reporting Period: Start Date: 7-1-26 End Date: 7-27-26

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: Ken Middle Name: _____ Last Name: Stonebrook

Address: 1530 Collingham Dr City: Collierville State: TN Zip Code: 38017

Occupation: Real Estate Broker Employer: Stonebrook Real Estate

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

Amount of Contribution: $ 100 Date of Contribution: 7-6-26 Aggregate This Election: $ 100

Business or Organization Name: _____ OR

First Name: Donald Middle Name: _____ Last Name: Volner

Address: 834 Carmel Cove City: Collierville State: TN Zip Code: 38017

Occupation: Human Resources Employer: Phelps Security

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

Amount of Contribution: $ 150 Date of Contribution: 7-7-26 Aggregate This Election: $ 150

Business or Organization Name: _____ OR

First Name: Patti Middle Name: _____ Last Name: Phelps

Address: 4574 Paso Fino Trail City: Collierville State: TN Zip Code: 38017

Occupation: CEO Employer: Phelps Security

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

Amount of Contribution: $ 999 Date of Contribution: _____ Aggregate This Election: $ 999

Business or Organization Name: _____ OR

First Name: Terry Middle Name: _____ Last Name: Coulombaritis

Address: 756 East Brookhaven Cir City: Memphis State: TN Zip Code: 38119

Occupation: Real Estate Broker Employer: Self Mid-South Realty

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

Amount of Contribution: $ 150 Date of Contribution: 7-9-26 Aggregate This Election: $ 150

Total Contributions: $ 1349

(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: ______________________

2. Reporting Period: Start Date: ____________ End Date: ____________

3. Total in-kind contributions from preceding page (enter $0 if first page) $ ____________

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: $ ____________

(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 CONTRIBUTIONS - CANDIDATE

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1. Candidate or Committee Name: Committee to Elect Charles Gilchrist
2. Reporting Period: Start Date: 7-1-26 End Date: 7-27-26
3. Total campaign contributions from preceding page (enter $0 if first page) $ 1,399

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ OR
First Name: George Middle Name: ______ Last Name: Coulouhavitsis
Address: 2111 Old Oak Drive City: Memphis State: TN Zip Code: 38119
Occupation: Real Estate Broker Employer: Mid South Realty
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 150 Date of Contribution: 7-17-26 Aggregate This Election: $ 150

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: ______
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: $ 1,549 1,399 + 150 = 1549
(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: Committee to Elect Charles Griffin
2. Reporting Period: Start Date: 7-1-26 End Date: 7-27-26
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: SMS8.10 **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: ____ Zip Code: _____
Purpose of Expenditure: Text Messaging
Amount of Expenditure: $ 29.00 Date of Expenditure: $ 7-13-26

Business or Organization Name: CMYK printing company **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: ____ Zip Code: _____
Purpose of Expenditure: campaign yard signs
Amount of Expenditure: $ 900 Date of Expenditure: $ 7-17-26

Business or Organization Name: Signup Genius **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: ____ Zip Code: _____
Purpose of Expenditure: calendar, volunteer app for scheduling
Amount of Expenditure: $ 59.99 Date of Expenditure: $ 7-20-26

Business or Organization Name: The Awards Place **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: ____ Zip Code: _____
Purpose of Expenditure: t-shirts for volunteers
Amount of Expenditure: $ 460.40 Date of Expenditure: $ 7-24-26

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: $ _____

Total Expenditures: $ 1,449.39
(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.)