



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. Date: 04/10/2026 2.a. Candidate or Committee Name: Samuel B. Nelson

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: \_\_\_\_\_

4. Campaign Address: 2390 Twain Ave.

City: Memphis State: TN Zip Code: 38114 Phone: (901) 314-0901

5. Candidate Home Address: 2390 Twain Ave.

City: Memphis State: TN Zip Code: 38114 Phone: (901) 314-0901

Candidate Email Address: nelson4district10@gmail.com

6. Office Sought: (include district number, if applicable) Shelby County Commissioner District 10

7. Name of Political Treasurer (may be candidate): LeShea M. Powers-Bland

Political Treasurer Email Address: mspowers112@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: 01/16/2026 End Date: 03/31/2026

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.

	<u>4/10/2026</u>		<u>4/10/26</u>
Candidate Signature	Date	Political Treasurer Signature	Date

	<u>4/10/2026</u>		<u>4/10/2026</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report .....	\$ <u>2,480.89</u>
b. Total Receipts This Period .....	\$ <u>4,459.29</u>
c. Total Disbursements This Period .....	\$ <u>4,003.44</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>2,936.74</u>
e. Total Loans Outstanding .....	\$ <u>3,302.60</u>
f. Total Obligations Outstanding .....	\$ <u>0</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Samuel B. Nelson

14. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026

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) ..... \$ 4,459.29
- 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.) ..... \$ 4,459.29

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 4,003.44  
(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.)..... \$ 4,003.44

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period ..... \$ \_\_\_\_\_
- b. Itemized In-Kind Contributions Received This Period ..... \$ 2,500.00
- c. Total In-Kind Contributions Received This Period ..... \$ 2,500.00

18. Obligations:

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

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 8,011.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Marilyn Middle Name: \_\_\_\_\_ Last Name: Hazzle  
Address: 6694 Finch Rd. City: Memphis State: TN Zip Code: 38141  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 60.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Margaret Middle Name: \_\_\_\_\_ Last Name: Owens  
Address: 2327 Malone Ave. City: Memphis State: TN Zip Code: 38114  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 20.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: James Middle Name: \_\_\_\_\_ Last Name: Greer  
Address: 1597 Carol Dr. City: Memphis State: TN Zip Code: 38116  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Sheila Middle Name: \_\_\_\_\_ Last Name: Middleton  
Address: 7749 Meadowside Cv. City: Memphis State: TN Zip Code: 38125  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 8,241.70

(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/26 End Date: 03/31/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 8,241.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Paul Middle Name: \_\_\_\_\_ Last Name: Debouse  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 25.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Hazel Middle Name: \_\_\_\_\_ Last Name: Devould  
Address: 2386 Twain Ave. City: Memphis State: TN Zip Code: 38114  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 20.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Chris Middle Name: \_\_\_\_\_ Last Name: Allen  
Address: 1355 Far Dr. City: Cordova State: TN Zip Code: 38016  
Occupation: HR Compliance Employer: City Of Memphis  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 225.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Dave Middle Name: \_\_\_\_\_ Last Name: Jones  
Address: 9539 Plantation Rd. City: Olive Branch State: MS Zip Code: 38654  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 600.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 9,111.70

(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/26 End Date: 03/31/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 9,111.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Jackie Middle Name: \_\_\_\_\_ Last Name: Cole  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 125.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Ruby Middle Name: \_\_\_\_\_ Last Name: Massey  
Address: 9267 Cielo Dr. City: Memphis State: TN Zip Code: 38138  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Angela Middle Name: \_\_\_\_\_ Last Name: Echols  
Address: 9758 Misty Pine Dr. City: Arlington State: TN Zip Code: 38002  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/20/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Bridgette Middle Name: \_\_\_\_\_ Last Name: McKinley  
Address: 562 Long St. City: Southaven State: MS Zip Code: 38672  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/21/26 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 9,436.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/26 End Date: 03/31/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 9,436.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Rocquell Middle Name: \_\_\_\_\_ Last Name: Bowles  
Address: 1075 Brownstone Dr. SW City: Marietta State: GA Zip Code: 30008  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/21/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Carmen Middle Name: \_\_\_\_\_ Last Name: Clay  
Address: 4688 Deep Brook Dr. City: Memphis State: TN Zip Code: 38128  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 25.00 Date of Contribution: 01/22/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Tawanda Middle Name: \_\_\_\_\_ Last Name: Hardy  
Address: 4602 Richmond Hills Dr. City: Memphis State: TN Zip Code: 38125  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/22/26 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Jackie Middle Name: \_\_\_\_\_ Last Name: Couch  
Address: 521 Thornbuck Cv. City: Collierville State: TN Zip Code: 38017  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 25.00 Date of Contribution: 01/22/26 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 9,586.70

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 9,586.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: April Middle Name: \_\_\_\_\_ Last Name: Potter  
Address: 7686 Red Hill Dr. City: Memphis State: TN Zip Code: 38119  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 95.70 Date of Contribution: 01/22/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: Guaranty Bank & Trust OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 2.00 Date of Contribution: 01/30/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Charles Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 02/08/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Jean & Keith Middle Name: \_\_\_\_\_ Last Name: Mitchell  
Address: 9363 Barrow Dr. City: Cordova State: TN Zip Code: 38016  
Occupation: Postal Carrier Employer: USPS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 02/08/2026 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 9,834.40

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 9,834.40

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Darrell Middle Name: \_\_\_\_\_ Last Name: Thomas  
Address: 4597 Tchulahoma Rd. City: Memphis State: TN Zip Code: 38118  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 02/10/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: SlickText (Refund) 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: \$ 31.83 Date of Contribution: 02/12/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: Slick Text (Refund) 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: \$ 31.83 Date of Contribution: 02/12/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: Slick Text (Refund) 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: \$ 31.83 Date of Contribution: 02/13/2026 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 10,179.89

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 10,179.89

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Diane Middle Name: \_\_\_\_\_ Last Name: Rudner  
Address: 495 Montaigne Blvd. City: Memphis State: TN Zip Code: 38103  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,000.00 Date of Contribution: 03/31/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Laura Middle Name: \_\_\_\_\_ Last Name: Goodman-Bryan  
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 47.70 Date of Contribution: 02/13/2026 Aggregate This Election: \$ 286.20

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Laura Middle Name: \_\_\_\_\_ Last Name: Goodman-Bryan  
Address: 346 Buena Vista Pl. City: Memphis State: TN Zip Code: 38112  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 47.70 Date of Contribution: 03/13/2026 Aggregate This Election: \$ 333.90

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Reginald Middle Name: \_\_\_\_\_ Last Name: Freeman-Alexander  
Address: 9004 Johnston St. City: Cordova State: TN Zip Code: 38016  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 95.70 Date of Contribution: 03/19/2026 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 11,370.99

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 11,370.99

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Guaranty Bank & Trust OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Amount of Contribution: \$ 300.00 Date of Contribution: 02/05/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: Amber Middle Name: \_\_\_\_\_ Last Name: Floyd

Address: 2687 Central Terrace Rd. #27 City: Memphis State: TN Zip Code: 38111

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Amount of Contribution: \$ 250.00 Date of Contribution: 02/12/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: Carol Middle Name: \_\_\_\_\_ Last Name: Jones

Address: 1324 Partee Cv. City: Memphis State: TN Zip Code: 38111

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Amount of Contribution: \$ 200.00 Date of Contribution: 02/15/2026 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR

First Name: Carmella Middle Name: \_\_\_\_\_ Last Name: Rogers

Address: 459 Frontline Cv. City: Memphis State: TN Zip Code: 38103

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

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

Amount of Contribution: \$ 250.00 Date of Contribution: 02/28/2026 Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 12,370.99

(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: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 12,370.99

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Richard Middle Name: \_\_\_\_\_ Last Name: Green  
Address: 2389 Twain Ave. City: Memphis State: TN Zip Code: 38114  
Occupation: Plant Manager Employer: Volvo  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 03/05/2026 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: \$ \_\_\_\_\_

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: \$ 12,470.99

(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,533.41

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: Canva.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Fundraiser Flyers  
Amount of Expenditure: \$ 108.66 Date of Expenditure: 01/20/2026

Business or Organization Name: Textedly.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Mass Texting for Campaign  
Amount of Expenditure: \$ 95.48 Date of Expenditure: 01/20/2026

Business or Organization Name: Family Dollar OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Food for Fundraiser  
Amount of Expenditure: \$ 47.93 Date of Expenditure: 01/20/26

Business or Organization Name: Young Actors Guild OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Building Rental Deposit  
Amount of Expenditure: \$ 300.00 Date of Expenditure: 01/21/2026

Business or Organization Name: Young Actors Guild OR  
First Name: Robin Middle Name: \_\_\_\_\_ Last Name: Andrews  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Building Rental Balance  
Amount of Expenditure: \$ 220.00 Date of Expenditure: 01/21/2026

Total Expenditures: \$ 10,305.48

(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: Samuel B. Nelson

2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026

3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 10,305.48

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: King Ice Atlanta OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: Atlanta State: GA Zip Code: \_\_\_\_\_

Purpose of Expenditure: Ice For Fundraiser

Amount of Expenditure: \$ 3.15 Date of Expenditure: 01/21/2026

Business or Organization Name: King Ice Atlanta OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: Atlanta State: GA Zip Code: \_\_\_\_\_

Purpose of Expenditure: Ice For Fundraiser

Amount of Expenditure: \$ 3.15 Date of Expenditure: 01/21/2026

Business or Organization Name: \_\_\_\_\_ OR

First Name: Journey Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: Oakland State: CA Zip Code: \_\_\_\_\_

Purpose of Expenditure: Accidental Payment (will pay campaign back)

Amount of Expenditure: \$ 192.50 Date of Expenditure: 01/22/2026

Business or Organization Name: \_\_\_\_\_ OR

First Name: Jalen Middle Name: \_\_\_\_\_ Last Name: Green

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Accidental Payment (will pay campaign back)

Amount of Expenditure: \$ 192.50 Date of Expenditure: 01/22/2026

Business or Organization Name: Slick Text OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Mass Text for Campaign

Amount of Expenditure: \$ 31.83 Date of Expenditure: 01/23/2026

Total Expenditures: \$ 10,728.61

(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: Samuel B. Nelson

2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026

3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 10,728.61

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: Guaranty Bank & Trust OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117

Purpose of Expenditure: SC Electronic Statement CR Offset (Bank Charge)

Amount of Expenditure: \$ 14.00 Date of Expenditure: 01/30/2026

Business or Organization Name: Dunkin Donuts OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Alcy Ball CDC Meet & Greet

Amount of Expenditure: \$ 67.01 Date of Expenditure: 02/02/2026

Business or Organization Name: EZ Pay OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Parking

Amount of Expenditure: \$ 1.30 Date of Expenditure: 02/03/2026

Business or Organization Name: Universal Collections Systems OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Accidental Payment (will pay campaign back)

Amount of Expenditure: \$ 40.00 Date of Expenditure: 03/03/2026

Business or Organization Name: Community Service Leaders OR

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Expenditure: Event for Social Media Marketing

Amount of Expenditure: \$ 200.00 Date of Expenditure: 02/04/2026

Total Expenditures: \$ 11,050.92

(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,050.92

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: Wix.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Campaign Website  
Amount of Expenditure: \$ 26.34 Date of Expenditure: 02/17/2026

Business or Organization Name: Textedly.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Mass Text for Campaign  
Amount of Expenditure: \$ 95.48 Date of Expenditure: 02/19/2026

Business or Organization Name: Democratic Party OR  
First Name: Damon Middle Name: \_\_\_\_\_ Last Name: Morris  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Democratic Party Breakfast  
Amount of Expenditure: \$ 50.00 Date of Expenditure: 02/20/2026

Business or Organization Name: Canva.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Campaign Post Cards  
Amount of Expenditure: \$ 186.58 Date of Expenditure: 02/20/2026

Business or Organization Name: Home Depot OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: 6' Steel Post---for campaign signs  
Amount of Expenditure: \$ 122.46 Date of Expenditure: 02/28/2026

Total Expenditures: \$ 11,531.78  
(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,531.78

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: Kroger OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Food for Strategy Campaign Meeting  
Amount of Expenditure: \$ 84.36 Date of Expenditure: 03/02/2026

Business or Organization Name: EZ Pay OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Parking  
Amount of Expenditure: \$ 1.30 Date of Expenditure: 03/03/2026

Business or Organization Name: Midsouth Solutions OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2209 Whitten Rd. City: Memphis State: TN Zip Code: 38133  
Purpose of Expenditure: 18"x 24" w/stakes & 4' x4' Digital Yard Signs  
Amount of Expenditure: \$ 609.11 Date of Expenditure: 03/04/2026

Business or Organization Name: Midsouth Solutions OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2209 Whitten Rd. City: Memphis State: TN Zip Code: 38133  
Purpose of Expenditure: 18" x 24" w/stakes & 4' x4' Digital Yard Signs  
Amount of Expenditure: \$ 757.28 Date of Expenditure: 03/04/2026

Business or Organization Name: Fox Ridge Pizza OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 711 W. Brookhaven Cir. City: Memphis State: TN Zip Code: 38117  
Purpose of Expenditure: Political Strategy Meeting w/Advisory Board  
Amount of Expenditure: \$ 229.82 Date of Expenditure: 03/07/2026

Total Expenditures: \$ 13,213.65  
(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 13,213.65

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: Gordins OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Snack Donations for Kids @ Greater New Shiloh Missionary Baptist Church  
Amount of Expenditure: \$ 42.34 Date of Expenditure: 03/13/2026

Business or Organization Name: Home Depot OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Rails for Campaign Yard Signs  
Amount of Expenditure: \$ 52.48 Date of Expenditure: 03/14/2026

Business or Organization Name: Home Depot OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Zip Ties for Campaign Signs  
Amount of Expenditure: \$ 13.67 Date of Expenditure: 03/18/2026

Business or Organization Name: Bala's Bistro Corporation OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 4571 Elvis Presley Blvd. City: Memphis State: TN Zip Code: 38116  
Purpose of Expenditure: Donor Meeting  
Amount of Expenditure: \$ 63.13 Date of Expenditure: 03/20/2026

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Elaura Middle Name: \_\_\_\_\_ Last Name: James  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Accidental Payment (Will pay campaign back)  
Amount of Expenditure: \$ 50.00 Date of Expenditure: 03/23/2026

Total Expenditures: \$ 13,435.27  
(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: Samuel B. Nelson  
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026  
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 13,435.27

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: Guaranty Bank & Trust OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 4894 Poplar Ave. City: Memphis State: TN Zip Code: 38117  
Purpose of Expenditure: Charge Back for Returned Check  
Amount of Expenditure: \$ 10.00 Date of Expenditure: 03/24/2026

Business or Organization Name: Wings On The Fly OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Lunch for Campaign Team Member  
Amount of Expenditure: \$ 25.24 Date of Expenditure: 03/30/2026

Business or Organization Name: Wix.com OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Campaign Website  
Amount of Expenditure: \$ 26.34 Date of Expenditure: 03/11/2026

Business or Organization Name: Universal Collection Systems OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: Accidental Payment (will pay campaign back)  
Amount of Expenditure: \$ 40.00 Date of Expenditure: 03/03/2026

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: \$ 13,536.85  
(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Samuel B. Nelson
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

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: Brandon Middle Name: \_\_\_\_\_ Last Name: Zuber

Address: 8 Aubra St. City: Memphis State: TN Zip Code: 38111

Occupation: Entrepreneur/Artist Employer: \_\_\_\_\_

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

In-Kind Contribution Value: \$ 700.00 In-Kind Contribution Date: 01/20/2026 Aggregate This Election: \$ \_\_\_\_\_

Description of In-Kind Contribution: Artwork for Fundraiser

Business or Organization Name: \_\_\_\_\_ OR

First Name: Pierre Middle Name: \_\_\_\_\_ Last Name: Hibbler

Address: 444 Vance City: Memphis State: TN Zip Code: 38126

Occupation: Entrepreneur/Artist Employer: \_\_\_\_\_

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

In-Kind Contribution Value: \$ 700.00 In-Kind Contribution Date: 01/20/2026 Aggregate This Election: \$ \_\_\_\_\_

Description of In-Kind Contribution: Artwork for Fundraiser

Business or Organization Name: \_\_\_\_\_ OR

First Name: Shaniya Middle Name: \_\_\_\_\_ Last Name: Allen

Address: 5331 Greenwood Rd. City: Horn Lake State: MS Zip Code: 38637

Occupation: Entrepreneur/Artist Employer: \_\_\_\_\_

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

In-Kind Contribution Value: \$ 700.00 In-Kind Contribution Date: 01/20/2026 Aggregate This Election: \$ \_\_\_\_\_

Description of In-Kind Contribution: Artwork for Fundraiser

Business or Organization Name: Diamond Events OR

First Name: Robin Middle Name: \_\_\_\_\_ Last Name: Andrews

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Occupation: Caterer/Event Planner Employer: \_\_\_\_\_

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

In-Kind Contribution Value: \$ 700.00 In-Kind Contribution Date: 01/20/2026 Aggregate This Election: \$ \_\_\_\_\_

Description of In-Kind Contribution: Catering Services--Food for Fundraiser

Total In-Kind Contributions: \$ 2,500.00

(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.)