



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. Date: 2/2/26 2.a. Candidate or Committee Name: Friends of Marie Feagins

2.b. If Committee, Name of Candidate: Dr. Marie Feagins 3. Election Date: 5/5/26

4. Campaign Address: 4770 Mahue Dr  
 City: Memphis State: TN Zip Code: 38127 Phone: 205-886-8100

5. Candidate Home Address: 4514 New Brownsvile Rd  
 City: Memphis State: TN Zip Code: 38135 Phone: 205-886-8100  
 Candidate Email Address: info@mariefeagins.com

6. Office Sought: (include district number, if applicable) Shelby County Mayor

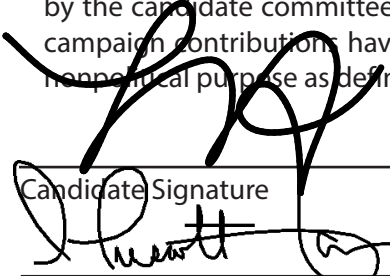
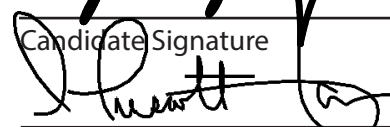
7. Name of Political Treasurer (may be candidate): Telise Ezell-Turner  
 Political Treasurer Email Address: tturner3@bellsouth.net

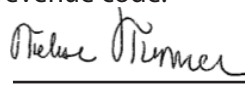

8. Category or Report: (check one)  
 First Quarter     Second Quarter     Third Quarter     Fourth Quarter     Pre-Primary     Pre-General  
 Mid-Year Supplemental     Year-End Supplemental     Runoff Election

9. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26

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 2/2/2026  
  
 Witness Signature \_\_\_\_\_ Date 2/2/2026

  
 Political Treasurer Signature \_\_\_\_\_ Date 2/2/26  
  
 Witness Signature \_\_\_\_\_ Date 02 / 02 / 2026

12. Summary:

a. Balance On Hand Last Report .....	\$ <u>0</u>
b. Total Receipts This Period .....	\$ <u>27,872.26</u>
c. Total Disbursements This Period .....	\$ <u>12,438.40</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>15,433.86</u>
e. Total Loans Outstanding .....	\$ <u>0</u>
f. Total Obligations Outstanding .....	\$ <u>1,800.00</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Friends of Marie Feagins

14. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 1,997.26  
(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) ..... \$ 25,875.00
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period ..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... \$ 27,872.26

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 12,438.40  
(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.)..... \$ 12,438.40

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period ..... \$ 58.58
- b. Itemized In-Kind Contributions Received This Period ..... \$ 1,500.00
- c. Total In-Kind Contributions Received This Period ..... \$ 1,558.58

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) ..... \$ 1,800.00

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
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: Janice Middle Name: \_\_\_\_\_ Last Name: Tankson  
Address: 8062 Chrysalis Cove City: Cordova State: TN Zip Code: 38016  
Occupation: Educator Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Veronica Middle Name: \_\_\_\_\_ Last Name: Jamison  
Address: 9610 Austin Drive City: Olive Branch State: MS Zip Code: 38654  
Occupation: President Employer: Community Foundation of Greater Memphis  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Danielle Middle Name: \_\_\_\_\_ Last Name: Inez  
Address: 158 Vance City: Memphis State: TN Zip Code: 38103  
Occupation: President Employer: AWE  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jack Middle Name: \_\_\_\_\_ Last Name: Elsy  
Address: 18620 Muirland Street City: Detroit State: MI Zip Code: 48221  
Occupation: Founder Employer: Michigan Educators Workforce Initiative  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,000.00 Date of Contribution: 11/15/25 Aggregate This Election: \$ 1,000.00

Total Contributions: \$ 1,750.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Lovell Middle Name: \_\_\_\_\_ Last Name: Ray  
Address: 3216 Carrington Rd. City: Memphis State: TN Zip Code: 38111  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 126.00 Date of Contribution: 12/01/25 Aggregate This Election: \$ 126.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Melinda Middle Name: \_\_\_\_\_ Last Name: Harper  
Address: 2731 Wytham Cove City: Memphis State: TN Zip Code: 38119  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/16/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Eric Middle Name: \_\_\_\_\_ Last Name: Guster  
Address: PO Box 2502 City: Birmingham State: AL Zip Code: 35201  
Occupation: Developer Employer: Guster Development  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/17/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Brittany Middle Name: \_\_\_\_\_ Last Name: Arnold  
Address: 841 Pecan Gardens Cir W City: Memphis State: TN Zip Code: 38122  
Occupation: Rebates Anaylst Employer: PNCI  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 250.00

Total Contributions: \$ 2,626.00

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,626.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ashley Middle Name: \_\_\_\_\_ Last Name: Buescher  
Address: 9130 Foxridge Rd City: Germantown State: TN Zip Code: 38139  
Occupation: Nurse Practitioner DNP Employer: Methodist Healthcare  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Laquandis Middle Name: \_\_\_\_\_ Last Name: Baldwin  
Address: 104 Mountain Vis Cir NE City: Huntsville State: AL Zip Code: 35811  
Occupation: Analyst Employer: ai Solutions  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/26/25 Aggregate This Election: \$ 250.00

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: Amber Huett-Garcia Consulting LLC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/29/25 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Robert Middle Name: \_\_\_\_\_ Last Name: Cole  
Address: 9251 Bluebird Hill Cv City: Lakeland State: TN Zip Code: 38002  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 500.00

Total Contributions: \$ 3,876.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3,876.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: It's All Good Auto Sales **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2944 South Third Street City: Memphis State: TN Zip Code: 38109  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,000.00 Date of Contribution: 12/01/25 Aggregate This Election: \$ 1,000.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Becky Middle Name: \_\_\_\_\_ Last Name: Webb Wilson  
Address: 5863 Garden River Cove City: Memphis State: TN Zip Code: 38120  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,900.00 Date of Contribution: 11/29/25 Aggregate This Election: \$ 1,926.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sonya Middle Name: \_\_\_\_\_ Last Name: Feagins  
Address: 110 Lee Road 573 City: Smiths Station State: AL Zip Code: 36877  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,900.00 Date of Contribution: 11/20/25 Aggregate This Election: \$ 1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Alejandra Middle Name: \_\_\_\_\_ Last Name: Cabrera  
Address: 309 N Monterey Farms Cove City: Collierville State: TN Zip Code: 38017  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,900.00 Date of Contribution: 11/19/2025 Aggregate This Election: \$ 1,900.00

Total Contributions: \$ 10,576.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 10,576.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Telise Middle Name: \_\_\_\_\_ Last Name: Turner  
Address: 2770 Mahue Dr City: Memphis State: TN Zip Code: 38127  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,900.00 Date of Contribution: 11/29/25 Aggregate This Election: \$ 1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Telise Middle Name: \_\_\_\_\_ Last Name: Turner  
Address: PO Box 271273 City: Memphis State: TN Zip Code: 38167  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 11/17/25 Aggregate This Election: \$ 2,150.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Telise Middle Name: \_\_\_\_\_ Last Name: Turner  
Address: PO Box 271273 City: Memphis State: TN Zip Code: 38127  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ -250.00 Date of Contribution: 1/11/26 Aggregate This Election: \$ 1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sean Middle Name: \_\_\_\_\_ Last Name: Koch  
Address: 1693 Cedarcrest Cv City: Germantown State: TN Zip Code: 38138  
Occupation: Physician Employer: Self-Harmony Health Clinic  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 1,900.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 1,900.00

Total Contributions: \$ 14,376.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 14,376.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sheneka Middle Name: \_\_\_\_\_ Last Name: Balogun  
Address: 2418 Lacosta Drive City: Bartlett State: TN Zip Code: 38134  
Occupation: Operations Employer: Women's Foundation for a Greater Memphis  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 12/20/25 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Brittany Middle Name: \_\_\_\_\_ Last Name: Arnold  
Address: 841 Pecan Gardens Cir W City: Memphis State: TN Zip Code: 38122  
Occupation: Rebates Analyst Employer: PNCI  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 150.00 Date of Contribution: 12/30/25 Aggregate This Election: \$ 400.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Camille Middle Name: \_\_\_\_\_ Last Name: Collins  
Address: 3332 Old Hudsonville Rd City: Holly Springs State: MS Zip Code: 38635  
Occupation: Teacher Employer: Germantown High School  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 78.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 154.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sonya Middle Name: \_\_\_\_\_ Last Name: Feagins  
Address: 110 Lee Road 573 City: Smiths Station State: AL Zip Code: 36887  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/4/26 Aggregate This Election: \$ 2,000.00

Total Contributions: \$ 15,204.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 15,204.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sonya Middle Name: \_\_\_\_\_ Last Name: Feagins  
Address: 110 Lee Road 573 City: Smiths Station State: AL Zip Code: 36887  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/12/26 Aggregate This Election: \$ 1,900.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kerry Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 4868 Old Stone Cv City: Memphis State: TNN Zip Code: 38125  
Occupation: Utilities Employer: MLGW  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 52.00 Date of Contribution: 12/22/25 Aggregate This Election: \$ 152.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Claiborne Middle Name: \_\_\_\_\_ Last Name: Ferguson  
Address: 294 Washington Ave City: Memphis State: TN Zip Code: 38103  
Occupation: Attorney Employer: Ferguson McNeil Law Firm, PA  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 1/5/26 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Melissa Middle Name: \_\_\_\_\_ Last Name: Todd  
Address: 10393 Hulsey Cir City: Collierville State: TN Zip Code: 38017  
Occupation: Executive Director Employer: The Front Porch  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/8/26 Aggregate This Election: \$ 500.00

Total Contributions: \$ 15,906.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 15,906.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kerry Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 4868 Old Stone Cv City: Memphis State: TN Zip Code: 38125  
Occupation: Utilities Employer: MLGW  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/15/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Amar Middle Name: \_\_\_\_\_ Last Name: Pani  
Address: 9341 Lake Bridge Drive City: Lakeland State: TN Zip Code: 38002  
Occupation: Neuroscientist/Faculty Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/8/26 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Leon Middle Name: \_\_\_\_\_ Last Name: Beck  
Address: 5434 Stephen Forest Rd City: Memphis State: TN Zip Code: 38141  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 1/5/26 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: LaTasha Middle Name: \_\_\_\_\_ Last Name: Thomas  
Address: 4475 K. St NW Unit 517 City: Washington State: DC Zip Code: 20001  
Occupation: Attorney Employer: USDOL  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 12/11/25 Aggregate This Election: \$ 250.00

Total Contributions: \$ 17,006.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 17,006.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kerry Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 4868 Old Stone Cv City: Memphis State: TN Zip Code: 38125  
Occupation: Utilities Employer: MLGW  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/3/26 Aggregate This Election: \$ 252.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kerry Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 4868 Old Stone Cv City: Memphis State: TN Zip Code: 38125  
Occupation: Utilities Employer: MLGW  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 125.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 377.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Reginald Middle Name: \_\_\_\_\_ Last Name: Milton  
Address: 1048 S. Bellevue Blvd. City: Memphis State: TN Zip Code: 38106  
Occupation: Executive Director Employer: SMA, Incorporated  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ 89502 **OR**  
First Name: Ronald Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 19460 Mayfield Apt 102 City: Livonia State: MI Zip Code: 48152  
Occupation: Law Enforcement Employer: Wayne County Sheriff's Office  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 200.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 200.00

Total Contributions: \$ 17,931.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 17,931.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Tobey Middle Name: \_\_\_\_\_ Last Name: Shaw  
Address: 1424 Far Drive City: Cordova State: TN Zip Code: 38016  
Occupation: Deputy Sheriff Employer: Shelby County Sheriff's Office  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Virgina Middle Name: \_\_\_\_\_ Last Name: McLean  
Address: 3838 Poplar Ave City: Memphis State: TN Zip Code: 38111  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Shawndolyn Middle Name: \_\_\_\_\_ Last Name: Sims  
Address: 4740 Waterfront Oak Dr City: Memphis State: TN Zip Code: 38128  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Tonya Middle Name: \_\_\_\_\_ Last Name: Hawkins  
Address: 35 Cambium Ln City: Oakland State: TN Zip Code: 38060  
Occupation: Director Employer: TNDOC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 300.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 300.00

Total Contributions: \$ 19,481.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 19,481.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Phil Middle Name: \_\_\_\_\_ Last Name: Garcia  
Address: 2143 Dogwood Creek City: Collierville State: TN Zip Code: 38017  
Occupation: Manager Employer: Elizabeth Weatherman LLC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 250.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Nicole Middle Name: \_\_\_\_\_ Last Name: Travis  
Address: 3141 Hill Lake Dr City: Barlett State: TN Zip Code: 38135  
Occupation: COO Employer: Mascom Communications  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 250.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 276.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Frederick Middle Name: \_\_\_\_\_ Last Name: McWilliams  
Address: 1453 River Pine Drive City: Collierville State: TN Zip Code: 38017  
Occupation: CTO Employer: SavvyTech Innovative Technology Solutions  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 500.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 500.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Janice Middle Name: \_\_\_\_\_ Last Name: Tankson  
Address: 8062 Chrysalis Cove City: Cordova State: TN Zip Code: 38016  
Occupation: Educator Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 350.00

Total Contributions: \$ 20,581.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 20,581.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jack Middle Name: \_\_\_\_\_ Last Name: Elsely  
Address: 18620 Muirland Street City: Detroit State: MI Zip Code: 48221  
Occupation: Founder/CEO Employer: Michigan Educators Workforce Initiative  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 1,100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Daryl Middle Name: \_\_\_\_\_ Last Name: Feagins  
Address: 110 Lee Road 573 City: Smiths Station State: AL Zip Code: 36877  
Occupation: Director Employer: Piedmont  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/4/26 Aggregate This Election: \$ 119.13

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Daryl Middle Name: \_\_\_\_\_ Last Name: Feagins  
Address: 110 Lee Road 573 City: Smiths Station State: AL Zip Code: 36877  
Occupation: Director Employer: Piedmont  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 219.13

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Nicole Middle Name: \_\_\_\_\_ Last Name: Travis  
Address: 3141 Hill Lake Dr City: Bartlett State: TN Zip Code: 38135  
Occupation: CEO Employer: Mascom Communications  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/9/26 Aggregate This Election: \$ 376.00

Total Contributions: \$ 20,981.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 20,981.00

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: Amber Huett-Garcia Consulting LLC  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/29/25 Aggregate This Election: \$ 350.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Marcus Middle Name: \_\_\_\_\_ Last Name: Holliday  
Address: 1967 Lydgate Cove City: Memphis State: TN Zip Code: 38116  
Occupation: Media Employer: GaryTV  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Raven Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 937 Alise Cir City: Fultondale State: AL Zip Code: 35068  
Occupation: Program Director Employer: Small Magic  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Clarke Middle Name: \_\_\_\_\_ Last Name: Perkins  
Address: 4655 Franklin Ave City: New Orleans State: LA Zip Code: 70122  
Occupation: Attorney Employer: Gordon Arata  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/14/25 Aggregate This Election: \$ 100.00

Total Contributions: \$ 21,381.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 21,381.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Will Middle Name: \_\_\_\_\_ Last Name: Puryear  
Address: 3002 Arrendale City: Memphis State: TN Zip Code: 38118  
Occupation: Mail Handler Employer: USPS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/15/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Shara Middle Name: \_\_\_\_\_ Last Name: Ford  
Address: 5442 Chatham Woods Court City: Columbus State: GA Zip Code: 31907  
Occupation: Agile Professional Employer: Aflac  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/17/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Eddie Middle Name: \_\_\_\_\_ Last Name: Keon  
Address: 427 Oneida Pl NW City: Washington State: DC Zip Code: 20011  
Occupation: Business Dev Manager Employer: Habitat for Humanity of Metro Denver  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/17/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Erik Middle Name: \_\_\_\_\_ Last Name: Griffith  
Address: 9 Mitchell Pl Apt 403 City: White Plains State: NY Zip Code: 10601  
Occupation: Sales Employer: Sanofi  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/18/25 Aggregate This Election: \$ 100.00

Total Contributions: \$ 21,781.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 21,781.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Gwendolyn Middle Name: \_\_\_\_\_ Last Name: Gibson  
Address: 3294 Kenbridge Dr City: Bartlett State: TN Zip Code: 38134  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/19/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Deborah Middle Name: \_\_\_\_\_ Last Name: Atkins  
Address: 3077 Goforth Way City: Bartlett State: TN Zip Code: 38134  
Occupation: Educator Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/20/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Donna Middle Name: \_\_\_\_\_ Last Name: Taylor  
Address: 3552 New Horn Lake Road City: Memphis State: TN Zip Code: 38109  
Occupation: HIV Navigation Employer: CAAP  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Daphne Middle Name: \_\_\_\_\_ Last Name: Jones  
Address: 3294 Kenbridge Dr City: Bartlett State: TN Zip Code: 38134  
Occupation: Admin Employer: Coast Guard  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ 100.00

Total Contributions: \$ 22,181.00

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 22,181.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Toson Middle Name: \_\_\_\_\_ Last Name: Knight  
Address: 5811 Grayton City: Detroit State: MI Zip Code: 35473  
Occupation: Dean Employer: DPSCD  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Trista Middle Name: \_\_\_\_\_ Last Name: Gosa  
Address: 7510 Daisy Ln City: Northport State: AL Zip Code: 35473  
Occupation: Operations Supervisor Employer: Social Security Administration  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Frankie Middle Name: \_\_\_\_\_ Last Name: Dakin  
Address: 5055 Howard Place City: Millington State: TN Zip Code: 38053  
Occupation: City Manager Employer: City of Millington  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/21/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Reginald Middle Name: \_\_\_\_\_ Last Name: Williams  
Address: 8991 Summer Grove Cove City: Cordova State: TN Zip Code: 38018  
Occupation: Administrator Employer: City Schools  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/22/25 Aggregate This Election: \$ 100.00

Total Contributions: \$ 22,581.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 22,581.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: David Middle Name: \_\_\_\_\_ Last Name: Page  
Address: 1510 Hanauer Street City: Memphis State: TN Zip Code: 38109  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/25/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Marie Middle Name: \_\_\_\_\_ Last Name: Norcross  
Address: 883 Pipkin Road City: Jackson State: TN Zip Code: 38305  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 11/30/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Willie Middle Name: \_\_\_\_\_ Last Name: Stringer  
Address: 215 Bush Road City: Smiths Station State: AL Zip Code: 36877  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/12/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Marverly Middle Name: \_\_\_\_\_ Last Name: Nettles  
Address: 4905 Smithwick Ln City: Bowie State: MD Zip Code: 20720  
Occupation: Law Enforcement Employer: U.S. Capitol Police  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/14/25 Aggregate This Election: \$ 100.00

Total Contributions: \$ 22,981.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 22,981.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Van Middle Name: \_\_\_\_\_ Last Name: Phillips  
Address: 112 Kilberry Cir City: Pelham State: AL Zip Code: 35124  
Occupation: Self-Employed Employer: Van Phillips  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/17/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Rob Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 5396 Southern Winds Dr City: Arlington State: TN Zip Code: 38002  
Occupation: Architect Employer: DoD  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Damian Middle Name: \_\_\_\_\_ Last Name: Jones  
Address: 784 Eastern Drive City: Memphis State: TN Zip Code: 38122  
Occupation: Chemical Operator Employer: Lanxess  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/19/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Mohagany Middle Name: \_\_\_\_\_ Last Name: Guinn  
Address: 1673 Waverly Ave City: Memphis State: TN Zip Code: 38106  
Occupation: Program Coordinator Employer: St. Jude Children's Research Hospital  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/26/25 Aggregate This Election: \$ 100.00

Total Contributions: \$ 23,381.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 23,381.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Aaron Middle Name: \_\_\_\_\_ Last Name: Gipson  
Address: 4899 Maple Walk Dr City: Lakeland State: TN Zip Code: 38002  
Occupation: IT Director Employer: DOW  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/19/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Judy Middle Name: \_\_\_\_\_ Last Name: Brown  
Address: 5672 Tulip Hill Dr City: Memphis State: TN Zip Code: 38135  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 12/31/25 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Bryant Middle Name: \_\_\_\_\_ Last Name: Tipton  
Address: 28900 Lake Park Drive City: Dearborn State: MI Zip Code: 48124  
Occupation: Principal Employer: DPSCD  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Stephen Middle Name: \_\_\_\_\_ Last Name: Harris  
Address: 301 Rosa L Parks Avenue, 205 City: Nashville State: TN Zip Code: 37203  
Occupation: Consultant Employer: Self - Stephen Harris  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/8/26 Aggregate This Election: \$ 100.00

Total Contributions: \$ 23,781.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 23,781.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ashley Middle Name: \_\_\_\_\_ Last Name: Jordan  
Address: 3169 Players Club Pkwy City: Memphis State: TN Zip Code: 38125  
Occupation: Owner/Graphic Designer Employer: Create10Me Designs  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/15/26 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Robert Middle Name: \_\_\_\_\_ Last Name: Clark  
Address: 1910 Madison 89 City: Memphis State: TN Zip Code: 38104  
Occupation: Consultant Employer: Self - Robert Clark  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/15/26 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ashley Middle Name: \_\_\_\_\_ Last Name: Edwards  
Address: 3889 Bolin Rd City: Hernando State: MS Zip Code: 38632  
Occupation: Principal Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/15/26 Aggregate This Election: \$ 100.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Stacy Middle Name: \_\_\_\_\_ Last Name: Sherley-Muhammad  
Address: 165 Parkdale Dr. City: Memphis State: TN Zip Code: 38109  
Occupation: Deputy Administrator Employer: Shelby County Government  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 01/15/26 Aggregate This Election: \$ 100.00

Total Contributions: \$ 24,181.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 24,181.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Tabitha Middle Name: \_\_\_\_\_ Last Name: Dowell  
Address: 4909 Avi Drive City: Arlington State: TN Zip Code: 38002  
Occupation: Family Engagement Specialist Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 100.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 38002

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Pamela Middle Name: \_\_\_\_\_ Last Name: Yancy-Taylor  
Address: 5078 Moudry Lane City: Arlington State: TN Zip Code: 38002  
Occupation: Project Manger Employer: CSL  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 75.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 75.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kim Middle Name: \_\_\_\_\_ Last Name: Harris  
Address: 2900 Pride Cv City: Memphis State: TN Zip Code: 38118  
Occupation: Sales Employer: Home Depot  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 55.00 Date of Contribution: 12/29/25 Aggregate This Election: \$ 55.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kimberly Middle Name: \_\_\_\_\_ Last Name: Taylor  
Address: 7508 Riverstone Cv City: Memphis State: TN Zip Code: 38125  
Occupation: Supply Mangement Employer: USPS  
Contribution Received For:  Primary Election   Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 26.00

Total Contributions: \$ 24,437.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 24,437.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Cynthia Middle Name: \_\_\_\_\_ Last Name: Johnson  
Address: 136 York Haven Dr City: Collierville State: TN Zip Code: 38017  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 40.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 40.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Katie Middle Name: \_\_\_\_\_ Last Name: McPherson  
Address: 486 Jack Kramer City: Memphis State: TN Zip Code: 38117  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 52.00 Date of Contribution: 1/1/26 Aggregate This Election: \$ 52.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Tachina Middle Name: \_\_\_\_\_ Last Name: Owens  
Address: 4859 Whitworth Rd City: Memphis State: TN Zip Code: 38116  
Occupation: Respiratory Therapist Employer: Self/Contractor - Tachina Owens  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/5/26 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Nicole Middle Name: \_\_\_\_\_ Last Name: Travis  
Address: 3141 Hill Lake Dr City: Bartlett State: TN Zip Code: 38135  
Occupation: COO Employer: Mascom Communications  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 326.00

Total Contributions: \$ 24,631.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 24,631.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: elly Middle Name: \_\_\_\_\_ Last Name: rvine  
Address: 5344 S ngela City: Memphis State: TN Zip Code: 38120  
Occupation: Customer Care Specialist Employer: eespeout  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Robin Middle Name: \_\_\_\_\_ Last Name: Sirmans  
Address: 4241 Willow Brook Circle City: Birmingham State: AL Zip Code: 35215  
Occupation: Realtor Employer: Sirmans Realty  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 11/25/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Veronica Middle Name: \_\_\_\_\_ Last Name: Boyd  
Address: 7815 tankerston drive City: Memphis State: TN Zip Code: 38125  
Occupation: Registered Nurse Employer: PAC Warriors  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/12/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Caneeka Middle Name: \_\_\_\_\_ Last Name: Miller  
Address: 104 Erskin Parcus Drive City: Madison State: AL Zip Code: 35756  
Occupation: Business Analyst Employer: Thompson Gray  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/15/25 Aggregate This Election: \$ 50.00

Total Contributions: \$ 24,807.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 24,807.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Wanda Middle Name: \_\_\_\_\_ Last Name: Phifer  
Address: 170 Dubois Dr City: Memphis State: TN Zip Code: 38109  
Occupation: Educator Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/17/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jessica Middle Name: \_\_\_\_\_ Last Name: Galdonez  
Address: 4334 Jeffery St City: Millington State: TN Zip Code: 38053  
Occupation: Education Employer: Pathways  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/18/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Donna Middle Name: \_\_\_\_\_ Last Name: Hall Nanney  
Address: 9972 Oban Dr City: Cordova State: TN Zip Code: 38016  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/19/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Rhonda Middle Name: \_\_\_\_\_ Last Name: Brown  
Address: 7825 Parkmont Drive City: Memphis State: TN Zip Code: 38125  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/26/25 Aggregate This Election: \$ 50.00

Total Contributions: \$ 25,007.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,007.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Will Middle Name: \_\_\_\_\_ Last Name: McCain  
Address: 1373 Dogwood Hollow Dr City: Nesbit State: MS Zip Code: 38651  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/29/25 Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sheila Middle Name: \_\_\_\_\_ Last Name: Edwards  
Address: 191 Nancye Reeder Dr City: Munford State: TN Zip Code: 38058  
Occupation: Medicare Sales Employer: SelectQuote  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 12/29/25 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Pamela Middle Name: \_\_\_\_\_ Last Name: Blatch  
Address: 8952 Armadale Drive City: Germantown State: TN Zip Code: 38139  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/1/26 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Phillisha Middle Name: \_\_\_\_\_ Last Name: Gailes  
Address: 1426 Singing Trees Dr City: Memphis State: TN Zip Code: 38116  
Occupation: Claims Specialist Employer: General Electric  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 01/5/26 Aggregate This Election: \$ 50.00

Total Contributions: \$ 25,207.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,207.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Deborah Middle Name: \_\_\_\_\_ Last Name: Atkins  
Address: 3077 Goforth Way City: Bartlett State: TN Zip Code: 38134  
Occupation: Educator Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 150.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Eric Middle Name: \_\_\_\_\_ Last Name: Brent  
Address: 4329 Barry Meadows Cove City: Memphis State: TN Zip Code: 38125  
Occupation: Independent Contractor Employer: Self - Eric Brent  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Emily Middle Name: \_\_\_\_\_ Last Name: Massey  
Address: 268 Castleberry Station Dr SW City: Atlanta State: GA Zip Code: 30313  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 50.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Ray Middle Name: \_\_\_\_\_ Last Name: Sharp  
Address: 576 Watson St. City: Memphis State: TN Zip Code: 38111  
Occupation: Golf Instructor Employer: Ray Sharp  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 50.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 50.00

Total Contributions: \$ 25,407.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,407.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sarah Middle Name: \_\_\_\_\_ Last Name: Livesay  
Address: 5864 Pecan Trace City: Memphis State: TN Zip Code: 38135  
Occupation: Hairdresser Employer: Sarah Livesay  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Marieta Middle Name: \_\_\_\_\_ Last Name: Nix  
Address: 3232 Lee Rd 248 City: Smiths Station State: AL Zip Code: 36877  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/3/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Jesse Middle Name: \_\_\_\_\_ Last Name: Steele  
Address: 5746 Kristy Creek Cove City: Arlington State: TN Zip Code: 38002  
Occupation: Teacher Employer: Bartlett City Schools  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/4/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Phillip Middle Name: \_\_\_\_\_ Last Name: Gossett  
Address: 4319 Mikewood Dr City: Memphis State: TN Zip Code: 38128  
Occupation: Not Employed Employer: Not Employed  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/4/26 Aggregate This Election: \$ 26.00

Total Contributions: \$ 25,511.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,511.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Brandi Middle Name: \_\_\_\_\_ Last Name: Gray  
Address: 4324 Cedar Hills Rd City: Memphis State: TN Zip Code: 38135  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/1/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Regan Middle Name: \_\_\_\_\_ Last Name: Bowley  
Address: 2551 Union Ave City: Memphis State: TN Zip Code: 38112  
Occupation: Education Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Arthur Middle Name: \_\_\_\_\_ Last Name: Scott  
Address: 8848 Quailwood Cv City: Cordova State: TN Zip Code: 38018  
Occupation: Secondary Education Employer: CBHS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Reginald Middle Name: \_\_\_\_\_ Last Name: Burton  
Address: 8920 Johnston St City: Cordova State: TN Zip Code: 38016  
Occupation: Police Officer Employer: State of Tennessee  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/2/26 Aggregate This Election: \$ 26.00

Total Contributions: \$ 25,615.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,615.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Johna Middle Name: \_\_\_\_\_ Last Name: Long  
Address: 1462 Walton Road City: Memphis State: TN Zip Code: 38117  
Occupation: Case Manager Employer: Corebridge Financial  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/4/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Kiera Middle Name: \_\_\_\_\_ Last Name: Mcghee  
Address: 190 Caldwell Ave City: Memphis State: TN Zip Code: 38107  
Occupation: Advocate Employer: Memphis Deaf Community Mid-South  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/5/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sandra Middle Name: \_\_\_\_\_ Last Name: Snipes  
Address: 150 N Highland St City: Memphis State: TN Zip Code: 38111  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/6/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Trela Middle Name: \_\_\_\_\_ Last Name: Anderson  
Address: 2470 Mandeville Lane Apt 806 City: Alexandria State: VA Zip Code: 22314  
Occupation: Teacher Employer: NDU  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/6/26 Aggregate This Election: \$ 26.00

Total Contributions: \$ 25,719.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,719.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Erin Middle Name: \_\_\_\_\_ Last Name: Midgley  
Address: 1726 Peach City: Memphis State: TN Zip Code: 38133  
Occupation: Researcher Employer: Erin Midgley  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/8/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Alexandra Middle Name: \_\_\_\_\_ Last Name: Kassela  
Address: 7868 Anna Calla Way City: Memphis State: TN Zip Code: 38133  
Occupation: Warehouse Employer: Mascom  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/8/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Larmaine Middle Name: \_\_\_\_\_ Last Name: Chapman  
Address: 1122 Melvin Dr City: Murfreesboro State: TN Zip Code: 37128  
Occupation: Sr. Financial Analyst Employer: BSBS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/13/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Sarah Middle Name: \_\_\_\_\_ Last Name: Gum  
Address: 7032 Frenbank Lane City: Memphis State: TN Zip Code: 38125  
Occupation: Teacher Employer: MSCS  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/13/26 Aggregate This Election: \$ 26.00

Total Contributions: \$ 25,823.00

(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: Friends of Marie Feagins  
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 25,823.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Lanell Middle Name: \_\_\_\_\_ Last Name: Smith  
Address: 1780 Meadow Mill Cove City: Cordova State: TN Zip Code: 38016  
Occupation: HR Director Employer: ALCO Mgmt  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/14/26 Aggregate This Election: \$ 26.00

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Edward Middle Name: \_\_\_\_\_ Last Name: Lofton  
Address: 3089 Wickham City: Memphis State: TN Zip Code: 38118  
Occupation: Landscaper Employer: Kingdom Landscaping  
Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
Amount of Contribution: \$ 26.00 Date of Contribution: 1/15/26 Aggregate This Election: \$ 26.00

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: \$ \_\_\_\_\_

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: \$ 25,875.00

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
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: Torrey Middle Name: \_\_\_\_\_ Last Name: Harris  
Address: 1835 Union Ave City: Memphis State: TN Zip Code: 38104  
Occupation: President Employer: Vanguard Govt Relations  
In-Kind Contribution Received For:  Primary Election  General Election  Runoff (Local Elections Only)  
In-Kind Contribution Value: \$ 1,500.00 In-Kind Contribution Date: 12/11/25 Aggregate This Election: \$ 1,500.00  
Description of In-Kind Contribution: Partial Payment - Policy Service Agreement

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: \$ 1,500.00

(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.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
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: \_\_\_\_\_ **OR**  
First Name: Theryn Middle Name: \_\_\_\_\_ Last Name: Bond  
Address: 509 G St NE City: Washington State: DC Zip Code: 20002  
Purpose of Expenditure: Campaign Policy - Consultant  
Amount of Expenditure: \$ 1,500.00 Date of Expenditure: 12/11/25

Business or Organization Name: US Postal Service **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 521 Erin Dr City: Memphis State: TN Zip Code: 38117  
Purpose of Expenditure: Postage  
Amount of Expenditure: \$ 16.90 Date of Expenditure: 01/02/26

Business or Organization Name: TNsigns Services - Kenneth Wilson **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2688 Lamar City: Memphis State: TN Zip Code: 38114  
Purpose of Expenditure: Campaign Tshirts & Hands Signs  
Amount of Expenditure: \$ 2,000.00 Date of Expenditure: 12/17/25

Business or Organization Name: TNsigns Services - Kenneth Wilson **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2688 Lamar City: Memphis State: TN Zip Code: 38114  
Purpose of Expenditure: Campaign Tshirts & Hand Signs: Reversal of billing discrepancy  
Amount of Expenditure: \$ -2,323.00 Date of Expenditure: 12/17/25

Business or Organization Name: TNsigns Services - Kenneth Wilson **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2688 Lamar City: Memphis State: TN Zip Code: 38114  
Purpose of Expenditure: Campaign Tshirts & Hand Signs  
Amount of Expenditure: \$ 2,323.00 Date of Expenditure: 12/17/25

Total Expenditures: \$ 3,516.90

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3,516.90

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: 1469 Pine Shadows City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Campaign Yard Signs & Stands (partial payment; balance paid as an in-kind donation)

Amount of Expenditure: \$ 784.71 Date of Expenditure: 12/12/25

Business or Organization Name: Create10Me Design Co. **OR**

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

Address: 3169 Players Club Prkwy City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Event Decor - Ballons / Backdrops (Campaign)

Amount of Expenditure: \$ 939.00 Date of Expenditure: 12/17/25

Business or Organization Name: Minuteman Press **OR**

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

Address: 6100 Primacy Prkwy Suite 105 City: Memphis State: TN Zip Code: 38119

Purpose of Expenditure: Printing - Event Signage (Campaign)

Amount of Expenditure: \$ 356.55 Date of Expenditure: 12/17/25

Business or Organization Name: The Bold Lion **OR**

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

Address: 6063 Mt. Moriah Ext, Suite 115 City: Memphis State: TN Zip Code: 38115

Purpose of Expenditure: Campaign Event Supplies - Tableclothes

Amount of Expenditure: \$ 65.85 Date of Expenditure: 12/16/25

Business or Organization Name: Fiverr International **OR**

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

Address: 8 Eliezer Kaplan Street City: Tel-Aviv Israel State: \_\_\_\_\_ Zip Code: 6473409

Purpose of Expenditure: Campaign Website Design / Service Fee

Amount of Expenditure: \$ 61.74 Date of Expenditure: 12/11/25

Total Expenditures: \$ 5,724.75

(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.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 5,724.75

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: Mary Middle Name: \_\_\_\_\_ Last Name: Robinson  
Address: 7626 Rowlett Dr City: Olive Branch State: MS Zip Code: 38654  
Purpose of Expenditure: Campaign event entertainment & equipment  
Amount of Expenditure: \$ 500.00 Date of Expenditure: 12/11/25

Business or Organization Name: Run! **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 651 N Broad St Suite 201 City: Middletown State: MD Zip Code: 19709  
Purpose of Expenditure: Campaign Website  
Amount of Expenditure: \$ 550.00 Date of Expenditure: 1/12/26

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: One Microsoft Way City: Redmond State: WA Zip Code: 98052  
Purpose of Expenditure: Campaign communications software subscription  
Amount of Expenditure: \$ 171.20 Date of Expenditure: 1/3/26

Business or Organization Name: Surmente Store - Amazon **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109  
Purpose of Expenditure: Campaign Event Supplies - Tablecloths  
Amount of Expenditure: \$ 83.36 Date of Expenditure: 12/12/25

Business or Organization Name: Trello **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 888 Broadway 4th Floor City: New York State: NY Zip Code: 10003  
Purpose of Expenditure: Campaign project management software subscription  
Amount of Expenditure: \$ 27.44 Date of Expenditure: 11/27/25

Total Expenditures: \$ 7,056.75

(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.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 7,056.75

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: Tobey Middle Name: \_\_\_\_\_ Last Name: Shaw  
Address: 1424 Far Dr. City: Cordova State: TN Zip Code: 38016  
Purpose of Expenditure: Event Security Service (Campaign)  
Amount of Expenditure: \$ 450.00 Date of Expenditure: 12/29/25

Business or Organization Name: FedEx Office **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 4691 Poplar Ave - Knickerbocker Plaza City: Memphis State: TN Zip Code: 38117  
Purpose of Expenditure: Printing / Event Supplies - Lanyards, Posters, Badges, etc. (Campaign)  
Amount of Expenditure: \$ 282.55 Date of Expenditure: 12/17/25

Business or Organization Name: Run! **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 651 N Broad St, Suite 201 City: Middleton State: DE Zip Code: 19709  
Purpose of Expenditure: Campaign Website Fee  
Amount of Expenditure: \$ 1,550.00 Date of Expenditure: 12/8/25

Business or Organization Name: Run! **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 651 N Broad St, Suite 201 City: Middleton State: DE Zip Code: 19709  
Purpose of Expenditure: Campaign Website Fee - Reimbursement for errors  
Amount of Expenditure: \$ -950.00 Date of Expenditure: 12/8/25

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Noah Middle Name: \_\_\_\_\_ Last Name: Nordstrom  
Address: 1978 Southern Ave City: Memphis State: TN Zip Code: 38114  
Purpose of Expenditure: Campaign Stipend - Core Team - Coalitions/Volunteers  
Amount of Expenditure: \$ 1,000.00 Date of Expenditure: 1/7/26

Total Expenditures: \$ 9,389.30

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,389.30

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: Trello **OR**

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

Address: 888 Broadway 4th Floor City: New York State: NY Zip Code: 10003

Purpose of Expenditure: Campaign Project management subscription

Amount of Expenditure: \$ 20.11 Date of Expenditure: 12/8/25

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98052

Purpose of Expenditure: Licenses/Subscriptions - Credit (Campaign)

Amount of Expenditure: \$ -81.40 Date of Expenditure: 10/26/25

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98052

Purpose of Expenditure: Licenses/Subscriptions

Amount of Expenditure: \$ 160.50 Date of Expenditure: 12/2/25

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

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

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

Purpose of Expenditure: \_\_\_\_\_

Amount of Expenditure: \$ \_\_\_\_\_ Date of Expenditure: \_\_\_\_\_

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98052

Purpose of Expenditure: Licenses/Subscriptions (Campaign)

Amount of Expenditure: \$ 118.50 Date of Expenditure: 11/25/25

Total Expenditures: \$ 9,607.01

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,607.01

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: Trello **OR**

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

Address: 888 Broadway 4th Floor City: New York State: NY Zip Code: 10003

Purpose of Expenditure: Subscription - Campaign Project management software

Amount of Expenditure: \$ 8.24 Date of Expenditure: 12/6/25

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98502

Purpose of Expenditure: Subscription Credit - Campaign Licenses / Communications

Amount of Expenditure: \$ -160.50 Date of Expenditure: 12/22/25

Business or Organization Name: Trello **OR**

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

Address: 888 Broadway 4th Floor City: New York State: NY Zip Code: 10003

Purpose of Expenditure: Subscription - Campaign Project management software

Amount of Expenditure: \$ 15.55 Date of Expenditure: 12/7/25

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98502

Purpose of Expenditure: Subscription - Campaign Licenses / Communications

Amount of Expenditure: \$ 160.50 Date of Expenditure: 12/4/25

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98502

Purpose of Expenditure: Subscription - Campaign Licenses / Communications

Amount of Expenditure: \$ 20.60 Date of Expenditure: 1/5/26

Total Expenditures: \$ 9,651.40

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,651.40

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: 366 Summer St City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Refund - Fee

Amount of Expenditure: \$ -3.75 Date of Expenditure: 1/11/26

Business or Organization Name: ActBlue **OR**

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

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

Purpose of Expenditure: Refund - Fee

Amount of Expenditure: \$ -1.50 Date of Expenditure: 1/12/26

Business or Organization Name: Trello **OR**

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

Address: 888 Broadway 4th Floor City: New York State: NY Zip Code: 10003

Purpose of Expenditure: Subscription - Campaign Project management software

Amount of Expenditure: \$ 113.40 Date of Expenditure: 1/3/26

Business or Organization Name: Microsoft **OR**

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98502

Purpose of Expenditure: Subscription - Campaign Licenses / Communications

Amount of Expenditure: \$ 134.30 Date of Expenditure: 12/26/25

Business or Organization Name: Pinnacle Bank **OR**

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

Address: 155 Rozelle St City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Check Fee

Amount of Expenditure: \$ 10.00 Date of Expenditure: 1/14/26

Total Expenditures: \$ 9,903.85

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 9,903.85

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: Pinnacle Bank **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 155 Rozelle St City: Memphis State: TN Zip Code: 38104  
Purpose of Expenditure: Check Fee  
Amount of Expenditure: \$ 10.00 Date of Expenditure: 1/7/26

Business or Organization Name: \_\_\_\_\_ **OR**  
First Name: Nicole Middle Name: \_\_\_\_\_ Last Name: Lytle  
Address: 1303 Colonial Rd City: Memphis State: TN Zip Code: 38117  
Purpose of Expenditure: Campaign Stipend - Communications  
Amount of Expenditure: \$ 1,000.00 Date of Expenditure: 1/14/26

Business or Organization Name: Hampton Inn by Hilton - Southwind **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 3579 Hacks Cross Rd City: Memphis State: TN Zip Code: 38125  
Purpose of Expenditure: Hotel Lodge - Sherri Brown / Campaign Announcement Event Entertainment  
Amount of Expenditure: \$ 99.77 Date of Expenditure: 12/11/25

Business or Organization Name: Sherri Brown Music **OR**  
First Name: Sherri Middle Name: \_\_\_\_\_ Last Name: Brown  
Address: 1416 18th St S City: Birmingham State: \_\_\_\_\_ Zip Code: 35022  
Purpose of Expenditure: Campaign Event Entertainment  
Amount of Expenditure: \$ 417.00 Date of Expenditure: 12/11/25

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: \$ 11,430.62

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,430.62

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: Microsoft OR

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

Address: One Microsoft Way City: Redmond State: WA Zip Code: 98052

Purpose of Expenditure: Subscriptions - Campaign Licenses /Communications

Amount of Expenditure: \$ 160.50 Date of Expenditure: 12/2/25

Business or Organization Name: Act Blue OR

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 1.19 Date of Expenditure: 11/17/25

Business or Organization Name: Act Blue OR

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 40.23 Date of Expenditure: 11/18/25

Business or Organization Name: Act Blue OR

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 79.81 Date of Expenditure: 11/19/25

Business or Organization Name: Act Blue OR

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 3.93 Date of Expenditure: 11/20/25

Total Expenditures: \$ 11,716.28

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 7/1/2025 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,716.28

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: Amazon **OR**

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

Address: 410 Terry Ave North City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Purchase Error

Amount of Expenditure: \$ 35.01 Date of Expenditure: 12/16/25

Business or Organization Name: Amazon **OR**

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

Address: 410 Terry Ave North City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Purchase Error - Reimbursement

Amount of Expenditure: \$ -35.01 Date of Expenditure: 12/16/25

Business or Organization Name: Act Blue **OR**

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 76.54 Date of Expenditure: 11/21/2025

Business or Organization Name: ActBlue **OR**

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 75.65 Date of Expenditure: 11/24/2025

Business or Organization Name: Act Blue **OR**

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 58.53 Date of Expenditure: 11/25/2025

Total Expenditures: \$ 11,927.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 11,927.00

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: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 5.09 Date of Expenditure: 11/26/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 6.01 Date of Expenditure: 11/28/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 9.48 Date of Expenditure: 12/1/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 159.36 Date of Expenditure: 12/3/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 0.97 Date of Expenditure: 12/10/2025

Total Expenditures: \$ 12,107.91

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 12,107.91

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: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 2.08 Date of Expenditure: 12/11/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 9.48 Date of Expenditure: 12/15/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 7.72 Date of Expenditure: 12/16/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 11.13 Date of Expenditure: 12/17/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 18.80 Date of Expenditure: 12/19/2025

Total Expenditures: \$ 12,157.12

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 12,157.12

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: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 98.09 Date of Expenditure: 12/22/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 15.89 Date of Expenditure: 12/23/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 25.64 Date of Expenditure: 12/24/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 3.54 Date of Expenditure: 12/26/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 0.39 Date of Expenditure: 12/29/2025

Total Expenditures: \$ 12,300.67

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 12,300.67

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: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 3.03 Date of Expenditure: 12/30/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 6.00 Date of Expenditure: 12/31/2025

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 3.93 Date of Expenditure: 1/5/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 2.64 Date of Expenditure: 1/2/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Redmond State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 20.72 Date of Expenditure: 1/6/2026

Total Expenditures: \$ 12,336.99

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 12,336.99

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: Act Blue **OR**

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

Address: 366 Summer St City: Somerville State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 35.38 Date of Expenditure: 1/7/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Somerville State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 2.38 Date of Expenditure: 1/8/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Somerville State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 1.19 Date of Expenditure: 1/9/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Somerville State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 43.77 Date of Expenditure: 1/12/2026

Business or Organization Name: Act Blue **OR**

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

Address: 366 Summer St City: Somerville State: MA Zip Code: 01244

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 11.43 Date of Expenditure: 1/13/2026

Total Expenditures: \$ 12,431.14

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 12,431.14

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: Act Blue **OR**

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 3.00 Date of Expenditure: 1/14/2026

Business or Organization Name: Act Blue **OR**

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

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

Purpose of Expenditure: Payout Fees

Amount of Expenditure: \$ 4.26 Date of Expenditure: 1/15/2026

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: \_\_\_\_\_

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: \$ 12,438.40

(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: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

**Complete the following for the source of each loan received and/or outstanding during the period.**

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

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

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

Outstanding Loan Balance (Beginning) ..... \$ 0

Loans Received ..... \$ 0

Loan Payments ..... \$ 0

Outstanding Loan (End) ..... \$ 0

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

Date of Loan: \_\_\_\_\_

**List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)**

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

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

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

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

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

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

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

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

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

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

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

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

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

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

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

Amount Guaranteed Outstanding: \$ \_\_\_\_\_

**Totals for all loans** (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... \$ 0

Loans Received ..... \$ 0

Loan Payments ..... \$ 0

Outstanding Loan (End) ..... \$ 0

# ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Friends of Marie Feagins
2. Reporting Period: Start Date: 07/01/25 End Date: 01/15/26
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: FiveStar MultiMedia  
 First Name: Angel Middle Name: \_\_\_\_\_  
 Last Name: Ortez  
 Address: 4172 Summer Ave  
 City: Memphis  
 State: TN Zip Code: 38122

Description of Obligation:	Campaign Videography/Photography		
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 1,800.00	\$ 0	\$ 1,800.00

Business Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
 Last Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

**TOTALS**

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$ 1,800.00	\$ 0	\$ 1,800.00

<b>Title</b>	2025 YE Supplemental FD Reporting(Dr. Marie Feagins)
<b>File name</b>	2025 YE Supplemen...arie Feagins).pdf
<b>Document ID</b>	03f39d57a9cb46dcef6847c8d6eeddac54b5ae25
<b>Audit trail date format</b>	MM / DD / YYYY
<b>Status</b>	● Signed

### Document History



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acting on behalf of prescott@swingstate.solutions  
IP: 2600:4040:112a:5600:7420:639f:fb09:ab53



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