



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/8/2026 2.a. Candidate or Committee Name: Tina Montgomery
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____
 4. Campaign Address: 3755 Sweet Tree Dr.
 City: Memphis State: TN Zip Code: 38128 Phone: 901-483-8372
 5. Candidate Home Address: 3755 Sweet Tree Dr.
 City: Memphis State: TN Zip Code: 38128 Phone: (901)483-8372
 Candidate Email Address: gucc38108@gmail.com
 6. Office Sought: (include district number, if applicable) County Clerk
 7. Name of Political Treasurer (may be candidate): Marisa Thomas
 Political Treasurer Email Address: marisathomas87@gmail.com

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

9. Reporting Period: Start Date: 01/16/2026 End Date: 3/31/2026

10. Detailed Disclosure: (Check one)
 This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
 This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.

11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Tina Montgomery 4/9/2026 Marisa Thomas 4/9/2026
 Candidate Signature Date Political Treasurer Signature Date
Sarah Thompson 4/9/2026 Sarah Thompson 4/9/2026
 Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>0</u>
b. Total Receipts This Period	\$	<u>3,000.00</u>
c. Total Disbursements This Period	\$	<u>1,141.03</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>1,958.97</u>
e. Total Loans Outstanding	\$	<u>2,500.00</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Tina Montgomery

14. Reporting Period: Start Date: 01/16/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 600.00
(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) \$ _____
- c. Loans Received This Reporting Period..... \$ 2,500.00
- 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.) \$ 3,100.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 1,141.03
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 1,141.03

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Tina Montgomery
2. Reporting Period: Start Date: 01/16/2026 End Date: 3/31/2026
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: Kathy Middle Name: _____ Last Name: Hogan
Address: 1214 Winfield City: Memphis State: TN Zip Code: 38116
Occupation: Driver Employer: City of Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 3/5/2026 Aggregate This Election: \$ 40

Business or Organization Name: _____ OR
First Name: Linda Middle Name: _____ Last Name: Strong
Address: 6330 Newstone Dr City: Bartlett State: TN Zip Code: 38125
Occupation: Teacher Employer: Educator Now
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 160 Date of Contribution: 3/13/2026 Aggregate This Election: \$ 160

Business or Organization Name: _____ OR
First Name: Mick Middle Name: _____ Last Name: Wright
Address: 160 N Maine St City: Memphis State: TN Zip Code: 38103
Occupation: Government Relations Employer: Youth Villages
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 3/19/2026 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: Donnell Middle Name: _____ Last Name: Worrell
Address: 10754 E. Ridge Dr. City: Olive Branch State: MS Zip Code: 38654
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 3/19/2026 Aggregate This Election: \$ 100

Total Contributions: \$ 400

(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: Tina Montgomery
2. Reporting Period: Start Date: 1/10/2026 End Date: 3/31/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____
Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 0
(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Tina Montgomery
2. Reporting Period: Start Date: 2/20/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 400

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Shawna Middle Name: _____ Last Name: Jenkins
Address: 2875 Bridle Creek Dr. City: Conyers State: GA Zip Code: 30094
Occupation: Teacher Employer: DeKalb County
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 3/29/2026 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: Carrie Middle Name: _____ Last Name: Montgomery
Address: 8971 Windingway City: Germantown State: TN Zip Code: 38139
Occupation: Accountant Employer: Southwind
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 3/29/2026 Aggregate This Election: \$ 100

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: \$ 600

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Tina Montgomery
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,125.45

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: Square OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1955 Broadway Ste 600 City: Oakland State: CA Zip Code: 94612
Purpose of Expenditure: Fees
Amount of Expenditure: \$ 5.58 Date of Expenditure: \$ 3/13/2026

Business or Organization Name: Square OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1955 Broadway Ste 600 City: Oakland State: CA Zip Code: 94612
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ 1,141.03

(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: Tina Montgomery
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
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: Washington Graphics OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2059 Bartlett Rd City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Signs + Stickers
Amount of Expenditure: \$ 510 Date of Expenditure: \$ 3/9/2026

Business or Organization Name: SNO Creations OR
First Name: _____ Middle Name: ~~____~~ Last Name: _____
Address: 400 Peyton Rd City: Holly Springs State: MS Zip Code: 39635
Purpose of Expenditure: Campaign T-shirts
Amount of Expenditure: \$ 160 Date of Expenditure: \$ 3/13/2026

Business or Organization Name: Square Up OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1955 Broadway Ste 600 City: Oakland State: CA Zip Code: 94612
Purpose of Expenditure: Domain
Amount of Expenditure: \$ 21.90 Date of Expenditure: \$ 3/19/2026

Business or Organization Name: SNO Creations OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 400 Peyton Rd City: Holly Springs State: MS Zip Code: 39635
Purpose of Expenditure: Campaign T-shirts
Amount of Expenditure: \$ 275 Date of Expenditure: \$ 3/20/2026

Business or Organization Name: 901 Print Shop OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3167 Norbrook Dr. City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Push cards
Amount of Expenditure: \$ 158.55 Date of Expenditure: \$ 3/23/2026

Total Expenditures: \$ 1125.45

(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: Tina Montgomery
 2. Reporting Period: Start Date: 1/14/2026 End Date: 3/31/2026
 3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

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

Business or Organization Name: _____ **OR**
 First Name: Tina Middle Name: _____ Last Name: Montgomery
 Address: 3755 Sweet Tree Dr. City: Memphis State: TN Zip Code: 3
 Outstanding Loan Balance (Beginning) \$ 0
 Loans Received \$ 1,000 2500^{OK}
 Loan Payments \$ 0
 Outstanding Loan (End)..... \$ 1,000 2500^{OK}
 Loan Received For: Primary Election General Election Runoff (Local Elections Only)
 Date of Loan: 3/9/2026

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

Business or Organization Name: _____ **OR**
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ 0
 Loans Received \$ 2,500
 Loan Payments \$ 0
 Outstanding Loan (End)..... \$ 2,500

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Tina Montgomery

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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	\$ 0	\$ 0	\$ 0

