CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Jeanice McCord

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/5/2026

4. Campaign Address: 6001 Jackson Square Blvd Ste 400

City: Lavergne State: TN Zip Code: 37086 Phone: 9312050047

5. Candidate Home Address: 6001 Jackson Square Blvd Ste 400

City: Lavergne State: TN Zip Code: 37086 Phone: 9312050047

Candidate Email Address: jeanice4zone1@outlook.com

6. Office Sought: (include district number, if applicable) School Board, Zone 1

7. Name of Political Treasurer (may be candidate): Kelly Hill

Political Treasurer Email Address: kellydhill@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: 4/1/2026 End Date: 7/10/2026

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than $1,000 and/or expenditures total more than $1,000 for this reporting period.

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

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

4DB7-4D3D-BA78-07[illegible]
07/10/26 - 1:11 PM

12. Summary:

a.	Balance On Hand Last Report	$ $961.60
b.	Total Receipts This Period	$ $2,110.00
c.	Total Disbursements This Period	$ $1,297.24
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $1,774.36
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jeanice McCord

14. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $2,110.00

c. Loans Received This Reporting Period..... $ _____

d. Interest Received This Reporting Period ..... $ _____

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ $2,110.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,297.24
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ _____

c. Total Obligation Payments Made This Period..... $ _____

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... $ $1,297.24

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ _____

b. Itemized In-Kind Contributions Received This Period ..... $ _____

c. Total In-Kind Contributions Received This Period ..... $ _____

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Laura Middle Name: _____ Last Name: Clark

Address: 911 Netherland Dr City: Murfreesbor State: TN Zip Code: 37130

Occupation: Professor/Administrator Employer: Middle Tennessee State University

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

Amount of Contribution: $ $25.00 Date of Contribution: 4/26/2026 Aggregate This Election: $ $0.00

Business or Organization Name: _____ **OR**

First Name: Jeremy Middle Name: _____ Last Name: JONES

Address: 1616 West End Ave Unit 2703 City: Nashville State: TN Zip Code: 37203

Occupation: CEO Employer: Self

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

Amount of Contribution: $ $750.00 Date of Contribution: 4/27/2026 Aggregate This Election: $ $2,150.0

Business or Organization Name: _____ **OR**

First Name: Tamia Middle Name: _____ Last Name: Mcknight

Address: 1001 Mason Tucker Dr Apt QQ34 City: Smyrna State: TN Zip Code: 37167

Occupation: Mail Clerk Employer: Ingram

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

Amount of Contribution: $ $20.00 Date of Contribution: 4/27/2026 Aggregate This Election: $ $0.00

Business or Organization Name: _____ **OR**

First Name: Paul Middle Name: _____ Last Name: Adams

Address: 103 Richland Ave City: Smyrna State: TN Zip Code: 37167

Occupation: courier Employer: Simple Cremations and Funeral Services

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

Amount of Contribution: $ $5.00 Date of Contribution: 4/30/2026 Aggregate This Election: $ $10.00

Total Contributions: $ $800.00

(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: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Brendan Middle Name: _____ Last Name: Doughtie

Address: 1061 Aire ct City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $$5.00 Date of Contribution: 5/2/2026 Aggregate This Election: $ $15.00

Business or Organization Name: _____ **OR**

First Name: Charlane Middle Name: _____ Last Name: Oliver

Address: PO Box 330263 City: Nashville State: TN Zip Code: 37203

Occupation: Consultant Employer: Upstream Strategies

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

Amount of Contribution: $$100.00 Date of Contribution: 5/17/2026 Aggregate This Election: $ $0.00

Business or Organization Name: _____ **OR**

First Name: Dan Middle Name: _____ Last Name: Hayes

Address: 602 Tuckahoe Drive City: Madison State: TN Zip Code: 37115

Occupation: Designer Employer: Dan Hayes

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

Amount of Contribution: $$50.00 Date of Contribution: 5/18/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Rosalind Middle Name: _____ Last Name: Burnett

Address: 136 calm waters dtreet City: Franklin State: TN Zip Code: 37064

Occupation: Medical coder Employer: Clover health

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

Amount of Contribution: $$100.00 Date of Contribution: 5/21/2026 Aggregate This Election: $ $0.00

Total Contributions: $ $1,055.00

(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: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,055.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Paul Middle Name: _____ Last Name: Adams

Address: 103 Richland Ave City: Smyrna State: TN Zip Code: 37167

Occupation: courier Employer: Simple Cremations and Funeral Services

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

Amount of Contribution: $$5.00 Date of Contribution: 5/30/2026 Aggregate This Election: $ $0.00

Business or Organization Name: _____ **OR**

First Name: Jonathan Middle Name: _____ Last Name: Edmontson

Address: A3-1 City: Queens State: NY Zip Code: 11103

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: 6/11/2026 Aggregate This Election: $ $0.00

Business or Organization Name: _____ **OR**

First Name: Jeremy Middle Name: _____ Last Name: JONES

Address: 1616 West End Ave Unit 2703 City: Nashville State: TN Zip Code: 37203

Occupation: CEO Employer: Self

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

Amount of Contribution: $$1,000.0 Date of Contribution: 6/24/2026 Aggregate This Election: $ $2,150.0

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: $ $2,110.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: COPY PACK AND MAIL **OR**

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

Address: 433 West Sam Ridley Parkway City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Mailers

Amount of Expenditure: $ $17.50 Date of Expenditure: $ 6/24/2026

Business or Organization Name: _____ **OR**

First Name: Raul Middle Name: _____ Last Name: Lopez

Address: 5602 Elam Rd City: Murfreesboro State: NY Zip Code: 37127

Purpose of Expenditure: Tip for creating logo

Amount of Expenditure: $ $5.00 Date of Expenditure: $ 5/29/2026

Business or Organization Name: Williams Strategic Research Group **OR**

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

Address: 1923 Morris Ave City: Columbia State: TN Zip Code: 38401

Purpose of Expenditure: Campaign Manager

Amount of Expenditure: $ $75.00 Date of Expenditure: $ 5/28/2026

Business or Organization Name: Staples **OR**

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

Address: 809 Industrial Blvd City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Print Services

Amount of Expenditure: $ $160.97 Date of Expenditure: $ 5/17/2026

Business or Organization Name: _____ **OR**

First Name: Anna Middle Name: _____ Last Name: Pickelsime

Address: 314 Braxton Drive City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Tent and Rollaway Campaign Travel Supplies

Amount of Expenditure: $ $220.00 Date of Expenditure: $ 5/17/2026

Total Expenditures: $ $478.47

(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: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $478.47

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Canva **OR**

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

Address: 3212 East Cesar Chavez St Suite City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Design Services

Amount of Expenditure: $ $312.79 Date of Expenditure: $ 5/14/2026

Business or Organization Name: Williams Strategic Research Group **OR**

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

Address: 1923 Morris Ave City: Columbia State: TN Zip Code: 38401

Purpose of Expenditure: Campaign Manager

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 5/10/2026

Business or Organization Name: Firebirds Wood Fired Pizza **OR**

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

Address: 2532 Medical Center Parkway City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Team Lunch

Amount of Expenditure: $ $115.00 Date of Expenditure: $ 5/4/2026

Business or Organization Name: Oaklands Mansion **OR**

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

Address: 900 N Maney Ave City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Fee for Recording Video on site

Amount of Expenditure: $ $70.00 Date of Expenditure: $ 5/1/2026

Business or Organization Name: Sticker Mule **OR**

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

Address: 336 Forest Ave City: Amsterdam State: NY Zip Code: 12010

Purpose of Expenditure: Stickers

Amount of Expenditure: $ $98.78 Date of Expenditure: $ 4/28/2026

Total Expenditures: $ $1,175.04

(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: Jeanice McCord

2. Reporting Period: Start Date: 4/1/2026 End Date: 7/10/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,175.04

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: Williams Strategic Research Group **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: 1923 Morris Ave City: Columbia State: TN Zip Code: 38401

Purpose of Expenditure: Campaign Manager

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 4/28/2026

Business or Organization Name: ActBlue **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: 366 Summer Street City: Somerville State: MA Zip Code: 21440

Purpose of Expenditure: Fees

Amount of Expenditure: $ $22.20 Date of Expenditure: $ 6/10/2026

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: $ $1,297.24

(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.)