



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Hope Oliver
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 10/26/2026
4. Campaign Address: 507 Mable Mason Cove
City: lavergne State: TN Zip Code: 37086 Phone: 6156686967
5. Candidate Home Address: 507 Mable Mason Cove
City: Lavergne State: TN Zip Code: 37086 Phone: 6156686967
Candidate Email Address: hope4rucodistrict1@gmail.com
6. Office Sought: (include district number, if applicable) County Commission District #01
7. Name of Political Treasurer (may be candidate): Kenekii Ward
Political Treasurer Email Address: Kenekiiv@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: 4/28/2026 End Date: 7/8/2026
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

12. Summary:

- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$1,461.11</u> |
| b. Total Receipts This Period | \$ <u>\$4,565.00</u> |
| c. Total Disbursements This Period | \$ <u>\$4,247.06</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$1,779.05</u> |
| e. Total Loans Outstanding | \$ <u>\$0.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Hope Oliver

14. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$4,565.00
- 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.) \$ \$4,565.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,247.06
(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.)..... \$ \$4,247.06

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$748.14
- c. Total In-Kind Contributions Received This Period \$ \$748.14

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
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: Angela Middle Name: _____ Last Name: Wester

Address: 217 Mcgreevy Drive City: Laverqne State: TN Zip Code: 37086

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/29/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Josephine Middle Name: _____ Last Name: Jones

Address: 43 Pennington Pl City: Jackson State: TN Zip Code: 38305

Occupation: Retried Employer: retired

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 5/3/2026 Aggregate This Election: \$ \$5.00

Business or Organization Name: _____ **OR**

First Name: Pat Middle Name: _____ Last Name: Clements

Address: 7597 Burleson Lane City: Murfreesboro State: TN Zip Code: 37129

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: Tudor Cliage **OR**

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

Address: 3266 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Business Employer: Business

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$330.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$330.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Erica Middle Name: _____ Last Name: Kimbrough
Address: 4927 Myra Drive City: Hermitage State: TN Zip Code: 37076
Occupation: NA Employer: NA
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$35.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$35.00

Business or Organization Name: _____ **OR**
First Name: Linda Middle Name: _____ Last Name: Sullivan
Address: 1170 Gaylord Ct City: Murfreesboro State: TN Zip Code: 37130
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Tamara Middle Name: _____ Last Name: Teague
Address: 266 Bill Stewart City: Laverne State: TN Zip Code: 37130
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$40.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$40.00

Business or Organization Name: _____ **OR**
First Name: Madelyn Middle Name: _____ Last Name: Scales Harris
Address: 511 Archer Ave City: Murfreesboro State: TN Zip Code: 37130
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$705.00
(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$705.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Denice Middle Name: _____ Last Name: Rucker

Address: 2611 Alexander Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Angela Middle Name: _____ Last Name: Bingham

Address: 414 Vaughn Street City: Murfreesboro State: TN Zip Code: 37130

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Margaret Middle Name: _____ Last Name: Gilbert

Address: 125 Lytle Street City: Laverne State: TN Zip Code: 37130

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Martha Middle Name: _____ Last Name: Deshler

Address: 1013 Hiltonwood Blvd City: Castalia Springs State: TN Zip Code: 37130

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$400.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$400.00

Total Contributions: \$ \$1,405.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,405.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Melbra Middle Name: _____ Last Name: Rachell

Address: 5323 Cavendish Drive City: Murfreesboro State: TN Zip Code: 37128

Occupation: HCA Employer: Senior Data Integration Engineer

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 5/18/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Nelson

Address: 7416 Halllows Drive City: Nashville State: TN Zip Code: 37221

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/17/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Kaitlin Middle Name: _____ Last Name: Oliver

Address: 507 Mable Mason Cove City: Laverqne State: TN Zip Code: 37086

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/18/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Carev Middle Name: _____ Last Name: McDowell

Address: 2092 Notchleaf Road City: Antioch State: TN Zip Code: 37013

Occupation: NA Employer: NA

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: \$ \$50.00

Total Contributions: \$ \$2,005.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,005.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kimberli Middle Name: _____ Last Name: Jensen

Address: 224 Quail Ridge Rd City: Smyrna State: TN Zip Code: 37167

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Colden Middle Name: _____ Last Name: Mitchell

Address: 1608 Capitol Blvd City: Knoxville State: TN Zip Code: 37931

Occupation: FEMA Employer: Civil Rights

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Fee

Address: 1101 Winding Branch Drive City: Christiana State: TN Zip Code: 37037

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Cheryl Middle Name: _____ Last Name: Griffith

Address: 506 Mable Mason Cove City: Laverne State: TN Zip Code: 37086

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$2,180.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,180.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

Address: 911 Netherland Drive City: Murfreesboro State: TN Zip Code: 37130

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Brett Middle Name: _____ Last Name: Windrow

Address: 208 Land Breeze Drive City: Laverne State: TN Zip Code: 37086

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Ferry

Address: 1501 Belle Oaks Drive City: Murfreesboro State: TN Zip Code: 37130

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Gary Middle Name: _____ Last Name: Oates

Address: 221 Bateman Ave City: Franklin State: TN Zip Code: 37067

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$2,455.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,455.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Violet Middle Name: _____ Last Name: Cox-Wingo

Address: 223 Innsbrooke Blvd City: Murfreesboro State: TN Zip Code: 37128

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Kay Middle Name: _____ Last Name: Carter

Address: 2715 Amber Drive City: Murfreesboro State: TN Zip Code: 37129

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$75.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**

First Name: Leotha Middle Name: _____ Last Name: Wilson

Address: 2070 Kings Cross Lane City: Memphis State: TN Zip Code: 38016

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Byron Middle Name: _____ Last Name: Glenn

Address: 3018 Waywood Drive City: Murfreesboro State: TN Zip Code: 37128

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$2,980.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,980.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sharon Middle Name: _____ Last Name: Hurt

Address: 6316 Willow Oak Drive City: Nashville State: TN Zip Code: 37221

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/5/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Virginia Middle Name: _____ Last Name: Towns

Address: 6413 Grassy Knoll Cv City: Bartlett State: TN Zip Code: 38135

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/8/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Kenya Middle Name: _____ Last Name: Adams

Address: 300 Cherry Drive City: Franklin State: TN Zip Code: 37064

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: TSU Alumni Association - Rutherford County **OR**

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

Address: 3500 John A. Merritt Blvd City: Nashville State: TN Zip Code: 37209

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$160.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$160.00

Total Contributions: \$ \$3,440.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,440.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Ami Middle Name: _____ Last Name: Morrison

Address: 2364 Glenford Drive City: Aurora State: IL Zip Code: 60502

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 6/28/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: George Middle Name: _____ Last Name: Buchanan

Address: 5825 West Gum Road City: Murfreesboro State: TN Zip Code: 37127

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$75.00 Date of Contribution: 7/2/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**

First Name: Douglas Middle Name: _____ Last Name: Williams

Address: 870 Nightingale Ave City: Hendersonville State: TN Zip Code: 37075

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/14/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Holman

Address: 6378 Green Grove Dr City: Memphis State: TN Zip Code: 38141

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/6/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$3,790.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,790.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Angela Middle Name: _____ Last Name: Ponder

Address: 103 Alice Ave City: Laverne State: TN Zip Code: 37086

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Tina Middle Name: _____ Last Name: Doaks

Address: 3321 Calais Circle City: Antioch State: TN Zip Code: 37013

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/16/2025 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Vera Middle Name: _____ Last Name: Seward-Nobis

Address: 4847 Revere Ave NW City: Massillon State: OH Zip Code: 44647

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Johnson

Address: 607 Stone Meadow Ct City: Laverne State: TN Zip Code: 37086

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/15/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,115.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,115.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kenya Middle Name: _____ Last Name: Beverly

Address: 905 Gregory Mills Dr City: Smyrna State: TN Zip Code: 37167

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/10/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Oliver

Address: 507 Mable Mason Cove City: Laverne State: TN Zip Code: 37086

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 3/20/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Violet Middle Name: _____ Last Name: Cox-Wingo

Address: 223 Innsbrooke Blvd City: Murfreesboro State: TN Zip Code: 37129

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/7/2025 Aggregate This Election: \$ \$200.00

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: \$ _____

Total Contributions: \$ \$4,565.00

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

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: Morgan Middle Name: _____ Last Name: Woodberry

Address: 614 Butternut Trace City: Laverne State: TN Zip Code: 37086

Occupation: NA Employer: NA

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

In-Kind Contribution Value: \$ \$150.00 In-Kind Contribution Date: 5/16/2026 Aggregate This Election: \$ \$150.00

Description of In-Kind Contribution: Fundraiser Refreshments

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Oliver

Address: 507 Mable Mason Cove City: Laverne State: TN Zip Code: 37086

Occupation: NA Employer: NA

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

In-Kind Contribution Value: \$ \$598.14 In-Kind Contribution Date: 5/16/2026 Aggregate This Election: \$ \$598.14

Description of In-Kind Contribution: Fundraiser Yard signage

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: \$ \$748.14

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
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: TSU Alumni Association - Rutherford County **OR**

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

Address: 3500 John A. Merritt Blvd City: Nashville State: TN Zip Code: 37209

Purpose of Expenditure: TSU Scholarship Brunch

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 5/2/2026

Business or Organization Name: John Smith Marketing **OR**

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

Address: 901 Broadway Ste 22363 City: Nashville State: TN Zip Code: 37202

Purpose of Expenditure: Campaign Retractable Banner

Amount of Expenditure: \$ \$245.81 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Imprint **OR**

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

Address: 14550 Beechnut Street City: Houston State: TX Zip Code: 77083

Purpose of Expenditure: Campaign Buttons

Amount of Expenditure: \$ \$83.41 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Chilis **OR**

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

Address: 610 Sam Ridley Pkwy W City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Dinner with Constituent Volunteer Strategies

Amount of Expenditure: \$ \$39.22 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Celestial Delites **OR**

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

Address: celestialdelites@gmail.com City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Catering Campaign Event

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 5/19/2026

Total Expenditures: \$ \$818.44

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$818.44

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: John Smith Marketing **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: johnsmithmarketing.com City: Nashville State: TN Zip Code: 37202
Purpose of Expenditure: Car Magnets
Amount of Expenditure: \$ \$76.48 Date of Expenditure: \$ 6/9/2026

Business or Organization Name: RUCO PRIDE 2026 **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 901 N Maney Avenue City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Annual Pride Celebration
Amount of Expenditure: \$ \$58.50 Date of Expenditure: \$ 6/10/2026

Business or Organization Name: VIP Murfreesboro **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 1007 City: Shelbyville State: TN Zip Code: 37162
Purpose of Expenditure: 1/2 Page Ad
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 6/9/2026

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: Campaign Material
Amount of Expenditure: \$ \$41.89 Date of Expenditure: \$ 7/4/2026

Business or Organization Name: Lowe's **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 410 Genie Lane City: Smyrna State: TN Zip Code: 37167
Purpose of Expenditure: Campaign Materials
Amount of Expenditure: \$ \$24.97 Date of Expenditure: \$ 7/4/2026

Total Expenditures: \$ \$1,520.28

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,520.28

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: Popeyes **OR**

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

Address: 121 Charter Place City: Lavergne State: TN Zip Code: 37086

Purpose of Expenditure: 4th Campaign Event

Amount of Expenditure: \$ \$9.33 Date of Expenditure: \$ 7/4/2026

Business or Organization Name: H & S Mkt **OR**

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

Address: 5207 Murfreesboro City: Lavergne State: TN Zip Code: 37086

Purpose of Expenditure: 4th Campaign Event

Amount of Expenditure: \$ \$16.46 Date of Expenditure: \$ 7/4/2026

Business or Organization Name: H & S Mkt **OR**

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

Address: 5207 Murfreesboro City: Lavergne State: TN Zip Code: 37086

Purpose of Expenditure: 4th Campaign Event

Amount of Expenditure: \$ \$6.59 Date of Expenditure: \$ 7/4/2026

Business or Organization Name: Dollar General **OR**

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

Address: 670 Stones River Rd City: Lavergne State: TN Zip Code: 37086

Purpose of Expenditure: 4th Campaign Event

Amount of Expenditure: \$ \$75.74 Date of Expenditure: \$ 7/4/2026

Business or Organization Name: Wix **OR**

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

Address: Wix.com City: New York State: NY Zip Code: 10014

Purpose of Expenditure: Campaign Website

Amount of Expenditure: \$ \$26.34 Date of Expenditure: \$ 5/18/2026

Total Expenditures: \$ \$1,654.74

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,654.74

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

Business or Organization Name: Wix **OR**

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

Address: Wix.com City: New York State: NY Zip Code: 10014

Purpose of Expenditure: Campaign T-Shirts

Amount of Expenditure: \$ \$26.34 Date of Expenditure: \$ 6/17/2026

Business or Organization Name: The Flow Co **OR**

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

Address: leignajouett@gmail.com City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Campaign Website

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 6/23/2026

Business or Organization Name: Canva **OR**

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

Address: 3212 E Cesar Chavez Street Bld 1 City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Campaign Designs

Amount of Expenditure: \$ \$43.90 Date of Expenditure: \$ 7/1/2026

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: Campaign Materials

Amount of Expenditure: \$ \$72.42 Date of Expenditure: \$ 7/6/2026

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: Campaign Materials

Amount of Expenditure: \$ \$9.08 Date of Expenditure: \$ 5/16/2026

Total Expenditures: \$ \$2,806.48

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,806.48

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

Business or Organization Name: Arch Angel Balloon Company **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: arch.angelballoonco@gmail.com City: Nashville State: TN Zip Code: 37210
Purpose of Expenditure: Campaign Decorations Deposit
Amount of Expenditure: \$ \$54.32 Date of Expenditure: \$ 5/13/2026

Business or Organization Name: Arch Angel Balloon Company **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: arch.angelballoonco@gmail.com City: Nashville State: TN Zip Code: 37210
Purpose of Expenditure: Campaign Decorations Deposit
Amount of Expenditure: \$ \$110.30 Date of Expenditure: \$ 5/14/2026

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: Campaign Materials
Amount of Expenditure: \$ \$59.56 Date of Expenditure: \$ 6/16/2026

Business or Organization Name: Fedex **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1016 W Pioplar Ave City: Collierville State: TN Zip Code: 38017
Purpose of Expenditure: Campaign Materials
Amount of Expenditure: \$ \$21.52 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: Canva **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3212 E Cesar Chavez Street Bld 1 City: Austin State: TX Zip Code: 78702
Purpose of Expenditure: Campaign Design
Amount of Expenditure: \$ \$133.35 Date of Expenditure: \$ 6/3/2026

Total Expenditures: \$ \$3,185.53

(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: Hope Oliver
2. Reporting Period: Start Date: 4/28/2026 End Date: 7/8/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,185.53

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 E Cesar Chavez Street Bld 1 City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Campaign Design

Amount of Expenditure: \$ \$43.90 Date of Expenditure: \$ 6/1/2026

Business or Organization Name: The Goat **OR**

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

Address: 2355 Adwell Street City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Campaign Network

Amount of Expenditure: \$ \$113.31 Date of Expenditure: \$ 6/1/2026

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: Campaign Materials

Amount of Expenditure: \$ \$60.69 Date of Expenditure: \$ 5/18/2026

Business or Organization Name: Joslin & Son Signs **OR**

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

Address: 630 Murfreesboro Pike City: Nashville State: TN Zip Code: 37210

Purpose of Expenditure: Campaign Materials

Amount of Expenditure: \$ \$603.63 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Desha Platt **OR**

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

Address: 3725 Montgomery Way City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Campaign T-Shirts

Amount of Expenditure: \$ \$240.00 Date of Expenditure: \$ 3/20/2026

Total Expenditures: \$ \$4,247.06

(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.)