CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 6/25/2026 2.a. Candidate or Committee Name: Ryan Ramkhelawan

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

4. Campaign Address: 9545 William Little Dr

City: Lakeland State: TN Zip Code: 38002 Phone: 6783816532

5. Candidate Home Address: 9545 William Little Dr

City: Lakeland State: TN Zip Code: 38002 Phone: 6783816532

Candidate Email Address: ryan@ryanram.com

6. Office Sought: (include district number, if applicable) Shelby County Commissioner, Dist. 3

7. Name of Political Treasurer (may be candidate): Kristen Frisby

Political Treasurer Email Address: Kristenfrisby@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: 4/25/2026

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

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06/25/26 - 10:56 PM

12. Summary:

a.	Balance On Hand Last Report	$ $2,134.95
b.	Total Receipts This Period	$ $1,450.00
c.	Total Disbursements This Period	$ $524.49
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $3,060.46
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Ryan Ramkhelawan

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) ..... $ $1,450.00

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.) ..... $ $1,450.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $524.49
(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.) ..... $ $524.49

17. In-Kind Contributions:

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

b. Itemized In-Kind Contributions Received This Period ..... $ $2,700.00

c. Total In-Kind Contributions Received This Period ..... $ $2,700.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Ryan Ramkhelawan

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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: Audrey Middle Name: _____ Last Name: Willis

Address: 4304 Southern Grove Drive City: West Memphis State: AR Zip Code: 72301

Occupation: Chief Innovation and Program Of Employer: CodeCrew

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

Amount of Contribution: $ $250.00 Date of Contribution: 4/8/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Jittapong Middle Name: _____ Last Name: Malasri

Address: 655 Riverside Drive City: Memphis State: TN Zip Code: 38103

Occupation: President Employer: Malasri Engineering

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

Amount of Contribution: $ $500.00 Date of Contribution: 4/11/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Derrick Middle Name: _____ Last Name: Reives

Address: 3618 Walker Ave City: Memphis State: TN Zip Code: 38152

Occupation: Founder Employer: UpSquad

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

Amount of Contribution: $ $250.00 Date of Contribution: 4/14/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Isaac Middle Name: _____ Last Name: Rodriguez

Address: 8911 Alana Cv City: Cordova State: TN Zip Code: 38016

Occupation: Chief Science Officer Employer: SweetBio

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/16/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $1,100.00

(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: Ryan Ramkhelawan

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Shaji Middle Name: _____ Last Name: Mathew

Address: 11141 Wellshire ln City: Frisco State: TX Zip Code: 75035

Occupation: CEO Employer: Hera Health Solutions

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

Amount of Contribution: $ $250.00 Date of Contribution: 4/18/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Sooroojnee Middle Name: _____ Last Name: Edoo

Address: 7359 Fairfax Dr City: Tamarac State: FL Zip Code: 33321

Occupation: Realtor Employer: Self Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/18/2026 Aggregate This Election: $ $100.00

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: $ $1,450.00

(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: Ryan Ramkhelawan

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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: Lisa Middle Name: _____ Last Name: Ramkhelawan

Address: 4844 Remington Drive City: Flowery Branch State: GA Zip Code: 30542

Occupation: Production Employer: APA COLOR GRAPHICS

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

In-Kind Contribution Value: $$1,500 In-Kind Contribution Date: 4/6/2026 Aggregate This Election: $ $1,500.00

Description of In-Kind Contribution: Promotional Design

Business or Organization Name: _____ **OR**

First Name: Jess Middle Name: _____ Last Name: Atchley

Address: 4844 Remington Drive City: Flowery Branch State: TN Zip Code: 30542

Occupation: General Manager Employer: APA COLOR GRAPHICS

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

In-Kind Contribution Value: $$1,200 In-Kind Contribution Date: 4/6/2026 Aggregate This Election: $ $1,200.00

Description of In-Kind Contribution: Promotional Material Production

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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: $ $2,700.00

(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: Ryan Ramkhelawan

2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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: Tennessee Democratic PA **OR**

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

Address: 4900 Centennial Blvd City: Nashville State: TN Zip Code: 37209

Purpose of Expenditure: Campaign Software

Amount of Expenditure: $ $322.67 Date of Expenditure: $ 4/13/2026

Business or Organization Name: Campaign Verify **OR**

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

Address: 1215 31st Street NW PO Box 355 City: Washington State: DC Zip Code: 20007

Purpose of Expenditure: Campaign Verification

Amount of Expenditure: $ $95.00 Date of Expenditure: $ 4/15/2026

Business or Organization Name: Home Depot **OR**

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

Address: 8010 Giacosa Pl City: Memphis State: TN Zip Code: 38133

Purpose of Expenditure: Promotional Material Hardware

Amount of Expenditure: $ $106.82 Date of Expenditure: $ 4/20/2026

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: $ _____

Total Expenditures: $ $524.49

(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.)