

Final



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 10/26/26 2.a. Candidate or Committee Name: Sade Bradley
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 06 Aug 26
4. Campaign Address: 6039 Cottage Hill Dr
City: Memphis State: TN Zip Code: 38053 Phone: 9015381264
5. Candidate Home Address: 6039 Cottage Hill Dr
City: Memphis State: TN Zip Code: 38053 Phone: 9015381264
Candidate Email Address: Vote Sade 1 @ gmail.com
6. Office Sought: (include district number, if applicable) County Commissioner District 1
7. Name of Political Treasurer (may be candidate): Letosha Buford
Political Treasurer Email Address: Vote Sade 1 @ 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: 26 APR 26 End Date: 30 JUN 26
10. Detailed Disclosure: (Check one)
☒ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☐ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.
11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

<u>[Signature]</u> Candidate Signature	<u>7-10-24</u> Date	<u>[Signature]</u> Political Treasurer Signature	<u>10 Sep 26</u> Date
<u>[Signature]</u> Witness Signature	<u>07-10-26</u> Date	<u>Marci Staber</u> Witness Signature	<u>Jul 20</u> Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>135.05</u>
b. Total Receipts This Period	\$	<u>577.80</u>
c. Total Disbursements This Period	\$	<u>864.24</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>5.00</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

cont. Note funds not to be repaid

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Sode-Braceley

14. Reporting Period: Start Date: 26 APR 26 End Date: 30 JUN 26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 0
(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) \$ 577.80
- c. Loans Received This Reporting Period \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 577.80

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 864.24
(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.) \$ 864.24

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 167.68
- c. Total In-Kind Contributions Received This Period \$ 167.68

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Spide Bralley
2. Reporting Period: Start Date: 26 APR 26 End Date: 30 JUN 26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Ketshg Middle Name: _____ Last Name: Scott
Address: 6155 Christopher Wood Dr City: Memphis State: TN Zip Code: 38135
Occupation: Sheriff Employer: Shelby County
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 09 JUN 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Telise Middle Name: _____ Last Name: TURNER
Address: 2770 Mahone Dr City: Memphis State: TN Zip Code: 38127
Occupation: _____ Employer: Women Dem. Council Pres.
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 16 JUN 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Cigressa Jordan Middle Name: _____ Last Name: Jordan
Address: 6039 Cottage Hill City: Memphis State: TN Zip Code: 38053
Occupation: _____ Employer: I.R.S.
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: ESLANU Middle Name: _____ Last Name: Green
Address: 6095 Century Arbor #108 City: Memphis State: TN Zip Code: 38134
Occupation: Teacher Employer: Breath of Life
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 17 JUN 26 Aggregate This Election: \$ _____

Total Contributions: \$ \$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: Sadie Bralley
2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 100

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Kristen Middle Name: _____ Last Name: Keller
Address: 3778 Russell Hurst Dr City: Bartlett State: TN Zip Code: 38135
Occupation: Respiratory Therapist Employer: Emory Land
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 40 Date of Contribution: 17 Jun 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Christine Anderson Middle Name: _____ Last Name: Anderson
Address: 10182 Green Moss Cr. City: Concordia State: TN Zip Code: 38018
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 18 Jun 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Patrick Middle Name: _____ Last Name: Myers
Address: 5692 Heather Oak Dr. City: Arkington State: TN Zip Code: 38002
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 25 Date of Contribution: 18 Jun 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Doris Middle Name: _____ Last Name: Sordani
Address: 2784 Christwood St. City: Memphis State: TN Zip Code: 38134
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 10 Date of Contribution: 18 Jun 26 Aggregate This Election: \$ _____

Total Contributions: \$ 195.00

(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: Sadie Brackley
2. Reporting Period: Start Date: 26 APR 26 End Date: 30 JUN 26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 195.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: CLARESSA Middle Name: _____ Last Name: JORDAN
Address: 6039 Cottage Hill Dr. City: Memphis TN State: TN Zip Code: 38053
Occupation: _____ Employer: I.R.S.
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 19 JUN 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Debra Middle Name: _____ Last Name: WIGGINS
Address: 9019 Hazlewood Cr. City: Concordia State: TN Zip Code: 38018
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 16 JUN 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: SARICHA Middle Name: _____ Last Name: BRACKLEY
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 14 JUN 26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: BARBARA BOWALD Middle Name: _____ Last Name: WICKAMS
Address: P.O. BOX 132 City: Brownsville State: TN Zip Code: 38014
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 23 JUN 26 Aggregate This Election: \$ _____

Total Contributions: \$ 515

(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: Sade Bralley
2. Reporting Period: Start Date: 26 APR 26 End Date: 30 JUN 26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 515

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Debra Middle Name: _____ Last Name: Sigee
Address: 4181 Bennett Wood City: Wilmington State: IN Zip Code: 38053
Occupation: _____ Employer: RETIRED
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 62.80 Date of Contribution: 09 JUN 26 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: \$ _____

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: \$ 577.80

(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: Saele Bradley
2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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

Business or Organization Name: Election Commission OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 157 Poplar City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: Map of District 1
Amount of Expenditure: \$ 15 Date of Expenditure: \$ 16 Jun 26

Business or Organization Name: Cafe Press OR
First Name: XXXXXXXX Middle Name: _____ Last Name: _____
Address: 23801 Colapostis Rd. City: Colapostis State: CA Zip Code: 91302
Purpose of Expenditure: Magnet for CARS
Amount of Expenditure: \$ 86.25 Date of Expenditure: \$ 29 Jun 26

Business or Organization Name: _____ OR
First Name: Stemg Middle Name: _____ Last Name: McGee
Address: 9750 Woodland brooke City: Concord State: TX Zip Code: 38018
Purpose of Expenditure: Cups & buttons
Amount of Expenditure: \$ 105 Date of Expenditure: \$ 29 Jun 26

Business or Organization Name: CONVA OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3212 E. Cesar Chavez St. City: AUSTIN State: TX Zip Code: 78702
Purpose of Expenditure: Door hangers MARKETING
Amount of Expenditure: \$ 234.89 Date of Expenditure: \$ 16 Jun 26

Business or Organization Name: Starky Broad OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 66 Brecken St. City: S. Burlington State: VT Zip Code: 05403
Purpose of Expenditure: BUSINESS CARDS
Amount of Expenditure: \$ 62.80 Date of Expenditure: \$ 09 Jun 26

Total Expenditures: \$ 503.92

(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: Spide Bradley
 2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 503.92

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: Kroger OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1230 N. Henderson City: Condover State: TN Zip Code: 38018
 Purpose of Expenditure: Vol. for vol. canvassing
 Amount of Expenditure: \$ 5.31 Date of Expenditure: \$ 29 Jun 26

Business or Organization Name: Jimmy Johns OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2293 N. Germantown City: Condover State: TN Zip Code: 38016
 Purpose of Expenditure: Vol. for vol. canvassing
 Amount of Expenditure: \$ 2.23 Date of Expenditure: \$ 30 Jun 26

Business or Organization Name: Race Way OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 8454 Hwy 51 City: Uniontown State: TN Zip Code: 38053
 Purpose of Expenditure: Gas
 Amount of Expenditure: \$ 20 Date of Expenditure: \$ 29 Jun 26

Business or Organization Name: Raleigh C. Store OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 6020 Raleigh Uniontown City: Uniontown State: TN Zip Code: 38053
 Purpose of Expenditure: Gas
 Amount of Expenditure: \$ 10 Date of Expenditure: \$ 14 Jun 26

Business or Organization Name: Charles Caswell Fund Raiser OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Purpose of Expenditure: Event Raiser
 Amount of Expenditure: \$ 25 Date of Expenditure: \$ 31 May 26

Total Expenditures: \$ 567.02

(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: Sade Bradley
2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 567.02

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

Business or Organization Name: AMAZON OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. BOX 81226 City: Seattle State: WA Zip Code: 98108
Purpose of Expenditure: Polo shirts
Amount of Expenditure: \$ 29.48 Date of Expenditure: \$ 30 Jun 26

Business or Organization Name: Chamber of Multnomah OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7965 Veterans Pkwy City: Multnomah State: TN Zip Code: 38053
Purpose of Expenditure: Lectures Luchon Camp
Amount of Expenditure: \$ 35 Date of Expenditure: \$ 04 Jun 26

Business or Organization Name: New Wright Church OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4591 Brunswick Rd City: Drinkington State: TN Zip Code: 38002
Purpose of Expenditure: Donation
Amount of Expenditure: \$ 20 Date of Expenditure: \$ 21 Jun 26

Business or Organization Name: AMAZON OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. BOX 81226 City: Seattle State: WA Zip Code: 98108
Purpose of Expenditure: Cups
Amount of Expenditure: \$ 20.24 Date of Expenditure: \$ 30 Jun 26

Business or Organization Name: Wendy's OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 815 N. Genesee Pkwy City: Concord State: TN Zip Code: 38016
Purpose of Expenditure: Lunch for vol.
Amount of Expenditure: \$ 33.22 Date of Expenditure: \$ 30 Jun 26

Total Expenditures: \$ 76.51

(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: Snels Brackley
2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 715.51

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: Snels Brackley Fund RAISER OR

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

Address: 6646 Hwy 51 City: Murkington State: TX Zip Code: 38053

Purpose of Expenditure: Fund RAISER Supplies

Amount of Expenditure: \$ 8.78 Date of Expenditure: \$ 16 Jun 26

Business or Organization Name: CHASE BANK OR

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

Address: 270 PARK Ave City: New York State: NY Zip Code: 10017

Purpose of Expenditure: BANK fee for MAIL

Amount of Expenditure: \$ 15 Date of Expenditure: \$ 20 May 26

Business or Organization Name: CHASE OR

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

Address: 270 PARK Ave City: New York State: NY Zip Code: 10017

Purpose of Expenditure: BANK fee for MAIL

Amount of Expenditure: \$ 15 Date of Expenditure: \$ 18 Jun 26

Business or Organization Name: QR Developer OR

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

Address: _____ City: San Francisco State: CA Zip Code: 94114

Purpose of Expenditure: QR code

Amount of Expenditure: \$ 38.95 Date of Expenditure: \$ 08 May 26

Business or Organization Name: GREENWOOD PARK OR

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

Address: _____ City: Murkington State: TX Zip Code: 38053

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 25 Date of Expenditure: \$ 28 Jun 26

Total Expenditures: \$ 818.24

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Sade Bralley
2. Reporting Period: Start Date: 26 Apr 26 End Date: 30 Jun 26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 818.24

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: Aueclot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3723 Greenville City: Dallas State: TX Zip Code: 75206
Purpose of Expenditure: Aueclot fee
Amount of Expenditure: \$ 26 Date of Expenditure: \$ _____

Business or Organization Name: Worrel Church McKinney OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8641 Greenville Rd City: McKinney State: TX Zip Code: 75053
Purpose of Expenditure: DONATION
Amount of Expenditure: \$ 20 Date of Expenditure: \$ 17 MAY 26

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: \$ 864.24

(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.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Shelly Brannelley
2. Reporting Period: Start Date: 26 APR 26 End Date: 30 JUN 26
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

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

Business or Organization Name: Shelby County DEM. PARTY 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: \$ 142.08 In-Kind Contribution Date: 25 JUN 26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: flyers

Business or Organization Name: _____ OR
First Name: Lateisha Middle Name: _____ Last Name: Bulford
Address: 1988 Adela City: Concordia State: TN Zip Code: 38016
Occupation: Realtor Employer: KARZEN Realty
In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 25 In-Kind Contribution Date: 23 JUN 26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: shirt

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: \$ 167.08

(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.)