CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 6/1/2026 2.a. Candidate or Committee Name: The Committee To Elect Davin Clemons

2.b. If Committee, Name of Candidate: Davin Clemons 3. Election Date: 10/05/2023

4. Campaign Address: 1840 Pyramid Place Suite 236

City: Memphis State: Tennessee Zip Code: 38132 Phone: 901-831-0821

5. Candidate Home Address: 603 Denmark Drive Unit 201

City: Memphis State: Tennessee Zip Code: 38103 Phone: 901-831-0821

Candidate Email Address: info@davinclemons.com

6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 8, Pos. 2

7. Name of Political Treasurer (may be candidate): Courtney Davis

Political Treasurer Email Address: cndavispro@bellsouth.net

8. Category or Report: (check one)

☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☒ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental

9. Reporting Period: Start Date: 10-01-2023 End Date: 12-31-2023

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.

Clemons, Davin — Candidate Signature — Date: 6-1-26

Courtney Davis — Political Treasurer Signature — Date: 6-1-26

Rebecca Dudas — Witness Signature — Date: 6-1-26

[illegible] — Witness Signature — Date: 6-1-26

12. Summary:

a.	Balance On Hand Last Report	$ 3274.92
b.	Total Receipts This Period	$ 2381.31
c.	Total Disbursements This Period	$ 5867.83
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ -211.60
e.	Total Loans Outstanding	$ 17,652.69
f.	Total Obligations Outstanding	$ 0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Davin Clemons

14. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $143.42
(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) ..... $ $2,125.00

c. Loans Received This Reporting Period ..... $ $112.89

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.) ..... $ $2,381.31

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $5,867.83
(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.) ..... $ $5,867.83

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: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

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: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St City: Lowell State: MA Zip Code: 01851

Occupation: merchant Employer: Vantiv eCommerce

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

Amount of Contribution: $ $300.00 Date of Contribution: 10/2/2025 Aggregate This Election: $ $300.00

Business or Organization Name: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St, City: Lowell State: MA Zip Code: 01851

Occupation: merchant Employer: 900 Chelmsford St,

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

Amount of Contribution: $ $650.00 Date of Contribution: 10/4/2025 Aggregate This Election: $ $975.00

Business or Organization Name: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St, City: Lowell State: MA Zip Code: 01851

Occupation: merchant Employer: Vantiv eCommerce

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 10/10/2025 Aggregate This Election: $ $1,000.0

Business or Organization Name: CashApp **OR**

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

Address: 1955 Broadway Suite 600 City: Oakland State: CA Zip Code: 94612

Occupation: merchant Employer: Block Inc

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

Amount of Contribution: $ $175.00 Date of Contribution: 10/4/2025 Aggregate This Election: $ $205.00

Total Contributions: $ $2,125.00

(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: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

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: First Horizon Bank **OR**

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

Address: PO Box 84 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: previous month service charge

Amount of Expenditure: $ $15.00 Date of Expenditure: $ 11/1/2023

Business or Organization Name: ActBlue Donate **OR**

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

Address: PO Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: service fee

Amount of Expenditure: $ $22.50 Date of Expenditure: $ 11/3/2023

Business or Organization Name: First Horizon **OR**

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

Address: PO Box 84 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: overdraft charge

Amount of Expenditure: $ $35.00 Date of Expenditure: $ 11/3/2023

Business or Organization Name: USPS **OR**

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

Address: 555 S B B KING BLVD City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: postage

Amount of Expenditure: $ $105.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: KFC **OR**

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

Address: 3215 S Perkins City: Memphis State: TN Zip Code: 38118

Purpose of Expenditure: feed staff

Amount of Expenditure: $ $46.45 Date of Expenditure: $ 10/2/2025

Total Expenditures: $ $223.95

(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: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $223.95

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: _____ **OR**

First Name: Lutriana Middle Name: _____ Last Name: Jefferson

Address: 3808 Overton Crossing City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $75.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: _____ **OR**

First Name: Darnita Middle Name: _____ Last Name: Gooch

Address: 1454 Laudeen City: memhis State: TN Zip Code: 38116

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: _____ **OR**

First Name: Felicia Middle Name: _____ Last Name: Smith

Address: 9 N Second St City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $20.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: _____ **OR**

First Name: Lutriana Middle Name: _____ Last Name: Jefferson

Address: 3808 Overton Crossing City: Memphis State: TN Zip Code: 38127

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $75.00 Date of Expenditure: $ 10/2/2025

Business or Organization Name: _____ **OR**

First Name: Bino Middle Name: _____ Last Name: d

Address: 603 denmark City: memphis State: TN Zip Code: 38103

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 10/2/2025

Total Expenditures: $ $593.95

(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: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $593.95

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: _____ **OR**

First Name: Joseph Middle Name: _____ Last Name: .

Address: PO Box 84 City: memhis State: TN Zip Code: 38101

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $400.00 Date of Expenditure: $ 10/4/2025

Business or Organization Name: Act Blue **OR**

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

Address: PO Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: merchant fee

Amount of Expenditure: $ $45.51 Date of Expenditure: $ 10/5/2025

Business or Organization Name: misc debit **OR**

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

Address: PO Box 84 City: memphis State: TN Zip Code: 38101

Purpose of Expenditure: poll worker pay

Amount of Expenditure: $ $3,700.00 Date of Expenditure: $ 10/5/2025

Business or Organization Name: Amex payment **OR**

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

Address: PO Box 9821535 City: El Paso State: TX Zip Code: 79998

Purpose of Expenditure: supplies

Amount of Expenditure: $ $500.00 Date of Expenditure: $ 10/10/2025

Business or Organization Name: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St, City: Lowell State: MA Zip Code: 01851

Purpose of Expenditure: merchant fee

Amount of Expenditure: $ $60.71 Date of Expenditure: $ 10/11/2025

Total Expenditures: $ $5,300.17

(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: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 12/31/2023

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $5,300.17

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: DirectFX **OR**

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

Address: 601 N 3rd St City: Memphis State: TN Zip Code: 38107

Purpose of Expenditure: political yard signs

Amount of Expenditure: $ $504.85 Date of Expenditure: $ 10/11/2025

Business or Organization Name: First Horizon **OR**

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

Address: PO Box 84 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: bank fee

Amount of Expenditure: $ $5.00 Date of Expenditure: $ 10/31/2025

Business or Organization Name: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St, City: Lowell State: MA Zip Code: 01851

Purpose of Expenditure: merchant fee

Amount of Expenditure: $ $7.81 Date of Expenditure: $ 11/9/2025

Business or Organization Name: Vantiv eCommerce **OR**

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

Address: 900 Chelmsford St, City: Lowell State: TN Zip Code: 01851

Purpose of Expenditure: overdraft charge

Amount of Expenditure: $ $35.00 Date of Expenditure: $ 11/9/2025

Business or Organization Name: First Horizon **OR**

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

Address: PO Box 84 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: bank fee

Amount of Expenditure: $ $15.00 Date of Expenditure: $ 10/2/2025

Total Expenditures: $ $5,867.83

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

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Davin Clemons

2. Reporting Period: Start Date: 10/1/2023 End Date: 11/30/2023

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

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

Business or Organization Name: ______ **OR**

First Name: Darnell Middle Name: ______ Last Name: Gooch, Jr

Address: 603 Denmark 201 City: Memphis State: TN Zip Code: 38103

Outstanding Loan Balance (Beginning) .... $ $4,000.00

Loans Received .... $ $0.00

Loan Payments .... $ $0.00

Outstanding Loan (End) .... $ $4,000.00

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

Date of Loan: 9/1/2023 loan made candiate spouse. not inteneded to be repaid

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

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ___ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ___ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ___ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ___ Zip Code: ______

Amount Guaranteed Outstanding: $______

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

Balance (Beginning) .... $______

Loans Received .... $______

Loan Payments .... $______

Outstanding Loan (End) .... $______

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Davin Clemons
2. Reporting Period: Start Date: 10/1/2023 End Date: 11/30/2023
3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

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

Business or Organization Name: ______ **OR**

First Name: Davin Middle Name: ______ Last Name: Clemons

Address: 603 Denmark 201 City: Memphis State: TN Zip Code: 38103

Outstanding Loan Balance (Beginning) .... $ $13,539.80

Loans Received .... $ $112.89

Loan Payments .... $ $0.00

Outstanding Loan (End) .... $ $13,652.69

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

Date of Loan: 7/28/2023 loan mde by canidate. not intended to be repaid

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

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ____ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ____ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ____ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ____ Zip Code: ______

Amount Guaranteed Outstanding: $______

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

Balance (Beginning) .... $ $17,539.80

Loans Received .... $ $112.89

Loan Payments .... $ $0.00

Outstanding Loan (End) .... $ $17,652.69