



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 10/7/2026 2.a. Candidate or Committee Name: Robert Griffin
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/3/2026
4. Campaign Address: 8278 Thorne Dr
City: Bartlett State: TN Zip Code: 38002 Phone: _____
5. Candidate Home Address: 8278 Thorne Dr
City: Bartlett State: TN Zip Code: 38002 Phone: _____
Candidate Email Address: Robert.wm.griffin@gmail.com
6. Office Sought: (include district number, if applicable) Bartlett Alderman, Pos. 2
7. Name of Political Treasurer (may be candidate): Robert Griffin
Political Treasurer Email Address: Robert.wm.griffin@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: 7/1/2026 End Date: 9/30/2026
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

4BAA-4B7F-8E51-124E
10/07/26 - 10:16 AM

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$260.73</u>
b. Total Receipts This Period	\$ <u>\$4,135.00</u>
c. Total Disbursements This Period	\$ <u>\$2,430.62</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,965.11</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: Robert Griffin

14. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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) \$ \$4,135.00
- 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.) \$ \$4,135.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,430.62
(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.)..... \$ \$2,430.62

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: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
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: Wayne Middle Name: _____ Last Name: Simpson

Address: Summerdale Rd City: Bartlett State: TN Zip Code: 38134

Occupation: retired Employer: n/a

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

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

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Horne

Address: Bright Star Ln City: Bartlett State: TN Zip Code: 38134

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Baker

Address: Deerfield Ln City: Bartlett State: TN Zip Code: 38134

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/9/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Rob Middle Name: _____ Last Name: Hoerter

Address: Pinckney Rd City: Arlington State: TN Zip Code: 38002

Occupation: vp of marketing Employer: GreatNeckTools

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/28/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$475.00

(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: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$475.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mick Middle Name: _____ Last Name: Wright

Address: Bartlett Woods Dr City: Bartlett State: TN Zip Code: 38134

Occupation: county commissioner Employer: Shelby county

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 8/22/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Rick Middle Name: _____ Last Name: Haumesser

Address: Brookhill Cv City: Bartlett State: TN Zip Code: 38134

Occupation: marketing Employer: autozone

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/10/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Shannon Middle Name: _____ Last Name: Park

Address: Deerfield Rd City: Bartlett State: TN Zip Code: 38134

Occupation: nurse Employer: King's Daughters and Sons Home

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 9/12/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Patrick

Address: Brother Blvd. City: Bartlett State: TN Zip Code: 38133

Occupation: CEO Employer: Brim's Snack Foods

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

Amount of Contribution: \$ \$1,000.0 Date of Contribution: 9/21/2026 Aggregate This Election: \$ \$1,000.0

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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,125.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Heather Middle Name: _____ Last Name: Griffin

Address: Thorne Dr City: Bartlett State: TN Zip Code: 38002

Occupation: pharmacist Employer: Dragonfly Health

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/28/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Bob Middle Name: _____ Last Name: Snyder

Address: Pamela Ann Dr City: Bartlett State: TN Zip Code: 38134

Occupation: parks supervisor Employer: City of Bartlett

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/28/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Barr

Address: Walnut Woods Cv City: Memphis State: TN Zip Code: 38018

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/28/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Judy Middle Name: _____ Last Name: Griffin

Address: Black Forest Cv City: Memphis State: TN Zip Code: 38128

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$160.00 Date of Contribution: 8/6/2026 Aggregate This Election: \$ \$160.00

Total Contributions: \$ \$3,335.00

(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: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,335.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Phil Middle Name: _____ Last Name: Moore

Address: Ivanhoe Rd City: Bartlett State: TN Zip Code: 38134

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 8/20/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Harold Middle Name: _____ Last Name: Byrd

Address: Stage Rd City: Bartlett State: TN Zip Code: 38134

Occupation: CEO Employer: Bank of Bartlett

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 8/20/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Todd Middle Name: _____ Last Name: Layne

Address: Melanie June Rd City: Bartlett State: TN Zip Code: 38134

Occupation: professor Employer: U of M

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/8/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Henry Middle Name: _____ Last Name: Miller

Address: Timmeron Cv City: Bartlett State: TN Zip Code: 38135

Occupation: retired Employer: n/a

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/18/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,135.00

(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: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
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: _____ **OR**
First Name: Aimee Middle Name: _____ Last Name: Gundlach
Address: Main St. City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: design services
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/23/2026

Business or Organization Name: Bluff City Sports **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Cooper St. City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: t-shirts
Amount of Expenditure: \$ \$600.88 Date of Expenditure: \$ 8/5/2026

Business or Organization Name: Bartlett City Schools **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Stage Rd. City: Bartlett State: TN Zip Code: 38134
Purpose of Expenditure: High School Sponsorship
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 8/7/2026

Business or Organization Name: DirectFX Solutions **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: N. Third St. City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: yard signs
Amount of Expenditure: \$ \$943.85 Date of Expenditure: \$ 9/15/2026

Business or Organization Name: Lowe's **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Stage Rd City: Bartlett State: TN Zip Code: 38133
Purpose of Expenditure: yard sign equipment
Amount of Expenditure: \$ \$35.08 Date of Expenditure: \$ 9/28/2026

Total Expenditures: \$ \$2,229.81

(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: Robert Griffin
2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,229.81

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 Fuel **OR**

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

Address: Hwy 70 City: Bartlett State: TN Zip Code: 38133

Purpose of Expenditure: gas for sign deliveries

Amount of Expenditure: \$ \$24.00 Date of Expenditure: \$ 9/28/2026

Business or Organization Name: Sam's Wholesale Club **OR**

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

Address: Stage Rd City: Bartlett State: TN Zip Code: 38133

Purpose of Expenditure: water for festival

Amount of Expenditure: \$ \$83.52 Date of Expenditure: \$ 9/28/2026

Business or Organization Name: DirectFX Solutions **OR**

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

Address: N. Third St. City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: campaign push cards

Amount of Expenditure: \$ \$93.29 Date of Expenditure: \$ 7/10/2026

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$2,430.62

(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.)