



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. Date: 4/9/2026      2.a. Candidate or Committee Name: Janeen Gordon

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

4. Campaign Address: 6387 S. Massey Hill Dr.

City: Memphis      State: TN      Zip Code: 38120      Phone: 9012777003

5. Candidate Home Address: 6387 S. Massey Hill Dr.

City: Memphis      State: TN      Zip Code: 38120      Phone: 9014280550

Candidate Email Address: info@janeengordon.com

6. Office Sought: (include district number, if applicable) Juvenile Court Clerk

7. Name of Political Treasurer (may be candidate): Shyronica Jones

Political Treasurer Email Address: shyronicasmall@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: 1/16/2026      End Date: 3/31/2026

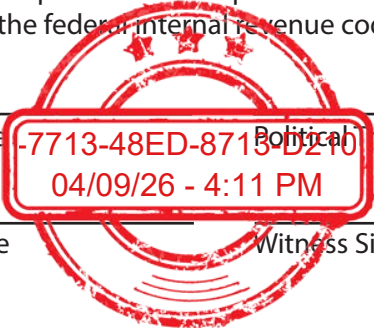
10. Detailed Disclosure: (Check one)

- 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: -7713-48ED-8715-D210      Political Treasurer Signature      Date

\_\_\_\_\_  
Witness Signature      Date      \_\_\_\_\_      Date



12. Summary:

a. Balance On Hand Last Report .....	\$ <u>772.58</u>
b. Total Receipts This Period .....	\$ <u>2,515.00</u>
c. Total Disbursements This Period .....	\$ <u>823.92</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.) .....	\$ <u>2,463.66</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: Janeen Gordon

14. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ \$400.00  
(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) ..... \$ \$2,115.00
- 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.) ..... \$ \$2,515.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$823.92  
(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.)..... \$ \$823.92

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: Janeen Gordon
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
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: Farris Bobanqo PLC Political Action Committee **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 999 S Shelby Grove Rd Ste 500 City: Memphis State: TN Zip Code: 38120

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 2/9/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: John Middle Name: \_\_\_\_\_ Last Name: Farris

Address: 4021 Graybar Ct City: Nashville State: TN Zip Code: 37215

Occupation: Business Lawyer Employer: Phelps Dunbar LLP

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 2/9/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Ira Middle Name: \_\_\_\_\_ Last Name: Richardson

Address: 6387 S Massey Hill Dr City: Memphis State: TN Zip Code: 38120

Occupation: Owner Employer: Preferred Anesthesia Services

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 2/20/2026 Aggregate This Election: \$ \$0.00

Business or Organization Name: \_\_\_\_\_ **OR**

First Name: Cassandra Middle Name: \_\_\_\_\_ Last Name: Simmons

Address: 8352 Honeydew City: Memphis State: TN Zip Code: 38016

Occupation: Unemployed Employer: N/A

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

Amount of Contribution: \$ \$115.00 Date of Contribution: 3/18/2026 Aggregate This Election: \$ \$0.00

Total Contributions: \$ \$2,115.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Janeen Gordon
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
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: GoDaddy Operating Company LLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 100 S Mill Ave City: Tempe State: AZ Zip Code: 85281  
Purpose of Expenditure: Website Renewal  
Amount of Expenditure: \$ \$41.40 Date of Expenditure: \$ 1/26/2026

Business or Organization Name: Diamond Printing **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 61 N Third City: Memphis State: TN Zip Code: 38107  
Purpose of Expenditure: Place Cards  
Amount of Expenditure: \$ \$724.35 Date of Expenditure: \$ 2/20/2026

Business or Organization Name: GoDaddy Operating Company LLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 100 S Mill Ave City: Tempe State: AZ Zip Code: 85281  
Purpose of Expenditure: Website Renewal  
Amount of Expenditure: \$ \$14.26 Date of Expenditure: \$ 2/24/2026

Business or Organization Name: Pinnacle Finance **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 155 Rozelle St City: Memphis State: TN Zip Code: 38104  
Purpose of Expenditure: Return Check Fee  
Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 3/9/2026

Business or Organization Name: GoDaddy Operating Company LLC **OR**  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 100 S Mill Ave City: Tempe State: AZ Zip Code: 85281  
Purpose of Expenditure: Website Renewal  
Amount of Expenditure: \$ \$14.26 Date of Expenditure: \$ 3/24/2026

Total Expenditures: \$ \$809.27

(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: Janeen Gordon
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$809.27

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: Act Blue **OR**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: 14 Arrow St City: Cambridge State: MA Zip Code: 02138

Purpose of Expenditure: Bank Fees

Amount of Expenditure: \$ \$14.65 Date of Expenditure: \$ 3/31/2026

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: \$ \_\_\_\_\_

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: \$ \$823.92

(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.)