



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 10-6-26 2.a. Candidate or Committee Name: Elect Heather Ann Long
2.b. If Committee, Name of Candidate: Heather Ann Long 3. Election Date: Nov 3, 2026
4. Campaign Address: 2464 Colada Dale Drive
City: Germentown State: TN Zip Code: 38139 Phone: 901-590-7946
5. Candidate Home Address: 9423 Laurel Hill Dr
City: Lakeland State: TN Zip Code: 38002 Phone: 901-481-9114
Candidate Email Address: heather@electheatherannlong.com
6. Office Sought: (include district number, if applicable) Lakeland City Commissioner
7. Name of Political Treasurer (may be candidate): Sham Ohsfeldt
Political Treasurer Email Address: treasurer@electheatherannlong.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: 7-1-26 End Date: 9-30-26

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.

Heather Ann Long 10-7-26
Candidate Signature Date

Sham Ohsfeldt 10-7-26
Political Treasurer Signature Date

Fishie Fisher 10/7/26
Witness Signature Date

Fishie Fisher 10/7/26
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>0.00</u>
b. Total Receipts This Period	\$	<u>500.00</u>
c. Total Disbursements This Period	\$	<u>731.17</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>500.00</u>
e. Total Loans Outstanding	\$	<u>500.00</u>
f. Total Obligations Outstanding	\$	<u>500.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Elect Heather Ann Hong

14. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

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) \$ _____
- c. Loans Received This Reporting Period \$ 500.00
- d. Interest Received This Reporting Period \$ 0.00
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 500.00

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 731.17
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0.00
- c. Total Obligation Payments Made This Period \$ 0.00
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 731.17

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ 1343.35
- c. Total In-Kind Contributions Received This Period \$ 1343.35

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 500.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: elect / Heather Ann Long
2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26
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: Patricia Rossel Photography OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 551 Fern Meadow Cove City: Chickasaw State: TX Zip Code: 38018
Occupation: Photographer Employer: _____
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 625 In-Kind Contribution Date: 9-16-26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: Editing images & graphics for website

Business or Organization Name: _____ OR
First Name: Tham Middle Name: Louise Last Name: Chapman
Address: 2464 Cedar Dale City: Yermoland State: TX Zip Code: 38139
Occupation: retired Employer: retired
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 718.35 In-Kind Contribution Date: 9-26-26 Aggregate This Election: \$ _____
Description of In-Kind Contribution: website & signs

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: \$ 1343.35

(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: Elect Heather Ann Long
2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26
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: Patricia Possel Photography OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 581 Fern Meadows Cove City: Cordova State: TN Zip Code: 38018
Purpose of Expenditure: Signs, fliers and push cards
Amount of Expenditure: \$ 731.17 Date of Expenditure: \$ 9-26-26

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: \$ _____

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: \$ 731.17

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Elect Heather Ann Long
2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26
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: Heather Middle Name: Ann Last Name: Long

Address: 9423 Laurel Hill Dr. City: Lakeland State: TN Zip Code: 38002

Outstanding Loan Balance (Beginning) \$ 0.00

Loans Received \$ 500.00

Loan Payments \$ 0.00

Outstanding Loan (End) \$ 500.00

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

Date of Loan: 8-21-26

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) \$ 0.00

Loans Received \$ 500.00

Loan Payments \$ 0.00

Outstanding Loan (End) \$ 500.00

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Elect Heather Ann Long
2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____
 First Name: Sharon Middle Name: Louise
 Last Name: Ohsefeldt
 Address: 2464 Cedar Dale Dr.
 City: Memphis
 State: TN Zip Code: 38139

Description of Obligation:	<u>web site design</u>		
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$ 0	\$500.00	\$ 0.00	\$ 500.00

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____
 First Name: _____ Middle Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$