



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/27/2026 2.a. Candidate or Committee Name: Brendan Doughtie
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 1061 Aire Ct
City: Murfreesboro State: TN Zip Code: 37128 Phone: _____
5. Candidate Home Address: 1061 Aire Court
City: Murfreesboro State: TN Zip Code: 37128 Phone: _____
Candidate Email Address: doughtiebrendan@gmail.com
6. Office Sought: (include district number, if applicable) County Commission District #13
7. Name of Political Treasurer (may be candidate): Amy Curtis
Political Treasurer Email Address: acurtis7950@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: 4/1/2026 End Date: 4/25/2026
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
_____	_____	_____	_____

12. Summary:

a. Balance On Hand Last Report	\$ <u>1,734.82</u>
b. Total Receipts This Period	\$ <u>508.00</u>
c. Total Disbursements This Period	\$ <u>125.65</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>2,117.17</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: Brendan Doughtie

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) \$ \$508.00
- 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.) \$ \$508.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$125.65
(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.)..... \$ \$125.65

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: Brendan Doughtie
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Amber Middle Name: _____ Last Name: Howell

Address: 3106 Cardinal Lane City: Murfreesboro State: TN Zip Code: 37128

Occupation: Manager Employer: Cardinal Health

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Gale Middle Name: _____ Last Name: Schmenk

Address: 413 Beaumont Drive City: Murfreesboro State: TN Zip Code: 37129

Occupation: Unemployed Employer: Unemployed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 4/12/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Jacob Middle Name: _____ Last Name: Bryan

Address: 499 Bains Road City: Hillsboro State: TN Zip Code: 37342

Occupation: Design Technician Employer: Middle TN Electric

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

Amount of Contribution: \$ \$13.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$13.00

Business or Organization Name: _____ **OR**

First Name: Savannah Middle Name: _____ Last Name: Duncan

Address: 2298 Dewey Drive City: Spring Hill State: TN Zip Code: 37174

Occupation: Server Employer: BoomBozz Pizza

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$188.00

(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: Brendan Doughtie
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$188.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Candida Middle Name: _____ Last Name: Layne
Address: 2883 Sulphur Springs Road City: Murfreesboro State: TN Zip Code: 37129
Occupation: Financial Specialist Employer: VA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$20.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**
First Name: Matt Middle Name: _____ Last Name: Ferry
Address: 1501 Bell Oaks Drive City: Murfreesboro State: TN Zip Code: 37130
Occupation: Photographer Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Wilson Middle Name: _____ Last Name: Shannon
Address: 146 Washer Drive City: La Vergne State: TN Zip Code: 37086
Occupation: Associate Employer: A-Z Office Resources
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/18/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Amy Middle Name: _____ Last Name: Curtis
Address: 4900 Rucker Christiana Road City: Christiana State: TN Zip Code: 37037
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/25/2026 Aggregate This Election: \$ \$180.00

Total Contributions: \$ \$508.00
(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: Brendan Doughtie
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Act Blue **OR**

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

Address: P.O. Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Rutherford County Democratic Women Garden Party

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 4/6/2026

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

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

Address: P.O. Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Rutherford County Democratic Women

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 4/20/2026

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

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

Address: P.O. Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$25.65 Date of Expenditure: \$ 4/25/2026

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: \$ \$125.65

(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.)