



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/8/2026 2.a. Candidate or Committee Name: Mary Kate Brown
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 4316 Belle Mina Ln
City: Franklin State: TN Zip Code: 37064 Phone: _____
5. Candidate Home Address: 4316 Belle Mina Ln
City: Franklin State: TN Zip Code: 37064 Phone: _____
Candidate Email Address: marykateforsec@gmail.com
6. Office Sought: (include district number, if applicable) State Ex Committeewoman- Rep
7. Name of Political Treasurer (may be candidate): Rick Shepherd
Political Treasurer Email Address: shepherd40@yahoo.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: 4/26/2026 End Date: 6/30/2026
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

B438-40F0-94DA-78B1
07/08/26 - 10:43 PM

12. Summary:

a. Balance On Hand Last Report	\$ \$0.00
b. Total Receipts This Period	\$ \$12,650.00
c. Total Disbursements This Period	\$ \$4,468.85
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ \$8,181.15
e. Total Loans Outstanding	\$ \$0.00
f. Total Obligations Outstanding	\$ \$0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Mary Kate Brown

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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) \$ \$12,650.00
- 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.) \$ \$12,650.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,468.85
(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.)..... \$ \$4,468.85

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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Jack Pac **OR**

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

Address: 915 Lewisburg Pike City: Franklin State: TN Zip Code: 37064

Occupation: Senator Employer: TN

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

Amount of Contribution: \$ \$2 000 0 Date of Contribution: 5/24/2026 Aggregate This Election: \$ \$2 000 0

Business or Organization Name: McCalmon **OR**

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

Address: 5105 Aberleigh Lane City: Franklin State: TN Zip Code: 37064

Occupation: Representative Employer: TN

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

Amount of Contribution: \$ \$500 00 Date of Contribution: 5/25/2026 Aggregate This Election: \$ \$500 00

Business or Organization Name: Moore **OR**

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

Address: 725 W. Main St City: Franklin State: TN Zip Code: 37064

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$1 000 0 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$1 000 0

Business or Organization Name: Smith **OR**

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

Address: 7065 M oores LN City: Brentwood State: TN Zip Code: 37027

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$1 000 0 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$1 000 0

Total Contributions: \$ \$4,500.00

(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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Barshall **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8645 Belladonna Dr City: College Grove State: TN Zip Code: 37046
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Smith **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7065 Moores LN City: Brentwood State: TN Zip Code: 37027
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Alexander **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4450 Columbia Pike City: Thompson Station State: TN Zip Code: 37179
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/15/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: Hininger **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3 Colonel Winstead Dr City: Brentwood State: TN Zip Code: 37027
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/19/2026 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$9,800.00
(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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Saltsman Jr. **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6221 Brownlee Dr City: Nashville State: TN Zip Code: 37205
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/19/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: Winstead **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Peeble Beach Dr City: Franklin State: TN Zip Code: 37069
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/22/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Anderson **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 708 Dorris Ct City: Franklin State: TN Zip Code: 37069
Occupation: Mayor Employer: Williamson County
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/25/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Andrews **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1242 Monarch Way City: Brentwood State: TN Zip Code: 37027
Occupation: Unk Employer: Unk
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/27/2026 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$11,300.00
(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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$11,300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: McGuire **OR**

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

Address: 1155 Old Cameron Ln City: Franklin State: TN Zip Code: 37067

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/28/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: McInturff **OR**

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

Address: 3077 Old Hillsboro Rd City: Franklin State: TN Zip Code: 37064

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: Cross IV **OR**

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

Address: 2208 Crossway Dr City: Franklin State: TN Zip Code: 37064

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 6/30/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: Pratt **OR**

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

Address: 3228 Baker Lane City: Franklin State: TN Zip Code: 37064

Occupation: Unk Employer: Unk

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 6/30/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$12,650.00

(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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Go Daddy OR

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

Address: 2155 E Warner Rd City: Tempe State: AZ Zip Code: 85284

Purpose of Expenditure: Website

Amount of Expenditure: \$ \$223.00 Date of Expenditure: \$ 5/18/2026

Business or Organization Name: Vista Print OR

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

Address: 15 N 4th Ave City: Chula Vista State: CA Zip Code: 91910

Purpose of Expenditure: Card Printing

Amount of Expenditure: \$ \$23.18 Date of Expenditure: \$ 5/18/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Ads

Amount of Expenditure: \$ \$265.00 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: Direct Edge Campaign OR

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

Address: 2000 Glen Echo Rd #207a City: Nashville State: TN Zip Code: 37215

Purpose of Expenditure: Flyers

Amount of Expenditure: \$ \$960.31 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: Ecanvasser App OR

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

Address: 27 Upper Pembroke St City: Dublin State: N/A Zip Code: 02361

Purpose of Expenditure: Knocking App

Amount of Expenditure: \$ \$200.79 Date of Expenditure: \$ 6/9/2026

Total Expenditures: \$ \$1,672.28

(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: Mary Kate Brown
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,672.28

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: Graphics 615 OR

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

Address: 7104 Crossroads BLVD Suite 108 City: Brentwood State: TN Zip Code: 37027

Purpose of Expenditure: Name Stickers and Cards

Amount of Expenditure: \$ \$634.49 Date of Expenditure: \$ 6/10/2026

Business or Organization Name: Signs First OR

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

Address: 100 Beta Dr #A City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Yard Signs

Amount of Expenditure: \$ \$2,162.08 Date of Expenditure: \$ 6/10/2026

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: \$ _____

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: \$ \$4,468.85

(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.)