



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 4/9/2026 2.a. Candidate or Committee Name: Marcy Ingram

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: 210 Seabiscuit Drive
 City: Collierville State: TN Zip Code: 38017 Phone: 9014826134

5. Candidate Home Address: 210 Seabiscuit Drive
 City: Collierville State: TN Zip Code: 38017 Phone: 9014826134
 Candidate Email Address: judgemarcy@keepjudgeingram.com

6. Office Sought: (include district number, if applicable) Gen. Sess. Civil Ct. Judge, Div. 2

7. Name of Political Treasurer (may be candidate): Dianne Lamar Withers
 Political Treasurer Email Address: diannewithers@keepjudgeingram.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: 7/1/2025 End Date: 1/16/2026

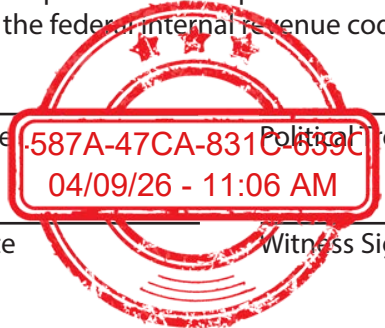
10. Detailed Disclosure: (Check one)

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: 587A-47CA-831C-659C Political Treasurer Signature Date

 Witness Signature Date Witness Signature Date



12. Summary:

a. Balance On Hand Last Report	\$ <u>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$11,125.00</u>
c. Total Disbursements This Period	\$ <u>\$10,168.68</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$956.32</u>
e. Total Loans Outstanding	\$ <u>\$8,300.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Marcy Ingram

14. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$375.00
(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) \$ \$2,450.00
- c. Loans Received This Reporting Period..... \$ \$8,300.00
- 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.) \$ \$11,125.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$10,168.68
(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.)..... \$ \$10,168.68

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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
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: Cheyenne Middle Name: _____ Last Name: Johnson
Address: 1024 Bluebird City: Memphis State: TN Zip Code: 38116
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Damon Middle Name: _____ Last Name: Griffin
Address: 1303 Kentucky St City: Memphis State: TN Zip Code: 38106
Occupation: Attorney Employer: International Paper
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Ronald Middle Name: _____ Last Name: Nesbit
Address: 4040 S Lakewood City: Memphis State: TN Zip Code: 38128
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 1/12/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**
First Name: Bobby Middle Name: _____ Last Name: White
Address: 5339 Brookwater Cove City: Memphis State: TN Zip Code: 38125
Occupation: Educator Employer: BE Legendary
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/12/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$750.00

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Melanie Middle Name: _____ Last Name: Nelson
Address: 8905 CD Smith City: Germantown State: TN Zip Code: 38138
Occupation: Consultant Employer: Self Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Lee Middle Name: _____ Last Name: Rankin
Address: 1298 Harbor Park Drive City: Memphis State: TN Zip Code: 38103
Occupation: Attorney Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 12/6/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**
First Name: Mick Middle Name: _____ Last Name: Wright
Address: 5730 Bartlett Woods Dr City: Bartlett State: TN Zip Code: 38134
Occupation: Executive Employer: Youth Villages
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/14/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Walter Middle Name: _____ Last Name: Ingram
Address: 4633 Chancellor Cove City: Memphis State: TN Zip Code: 38118
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 1/13/2026 Aggregate This Election: \$ \$300.00

Total Contributions: \$ \$1,550.00

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,550.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Garrick Middle Name: _____ Last Name: Florence
Address: 1904 Thomas Street City: Horn Lake State: MS Zip Code: 38637
Occupation: Educator Employer: University of Memphis
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: Joiner
Address: 1444 Pinecrest Drive City: Memphis State: TN Zip Code: 38111
Occupation: Attorney Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Shepperson Middle Name: _____ Last Name: Wilbur
Address: 757 West Drive City: Memphis State: TN Zip Code: 38112
Occupation: Administrator Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Deborah Middle Name: _____ Last Name: Henderson
Address: 1927 Central Ave City: Memphis State: TN Zip Code: 38104
Occupation: Government Official Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$2,050.00

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,050.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Dwan Middle Name: _____ Last Name: Gilliom
Address: 201 Dubois City: Memphis State: TN Zip Code: 38109
Occupation: Consultant Employer: AllWorld
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: Felisa Middle Name: _____ Last Name: Cox
Address: 4503 Pinegate City: Memphis State: TN Zip Code: 38125
Occupation: Attorney Employer: Shelby County Government
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Dana Middle Name: _____ Last Name: Pointer
Address: 1103 Center Ridge Rd City: Collierville State: TN Zip Code: 38017
Occupation: CEO Employer: Preserve Partners LLC
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Tichanda Middle Name: _____ Last Name: Thompson
Address: 7835 Wood Oak City: Cordova State: TN Zip Code: 38016
Occupation: Contractor Employer: Self Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/8/2025 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$2,450.00

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
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: Char Memphis **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 431 S Highland ST City: Memphis State: TN Zip Code: 38111
Purpose of Expenditure: Food and Beverage
Amount of Expenditure: \$ \$85.00 Date of Expenditure: \$ 10/27/2025

Business or Organization Name: Marketality LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204
Purpose of Expenditure: Media
Amount of Expenditure: \$ \$258.00 Date of Expenditure: \$ 11/5/2025

Business or Organization Name: JAH Media **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4574 Alixs Drive City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Media
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 11/6/2025

Business or Organization Name: Jerry Harris Creative Guru **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5184 Melissa Woods Dr City: Bartlett State: TN Zip Code: 38135
Purpose of Expenditure: Media
Amount of Expenditure: \$ \$1,125.00 Date of Expenditure: \$ 11/6/2026

Business or Organization Name: Hardland Clarke **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 15955 La Cantera Parkway City: San Antonio State: TX Zip Code: 78256
Purpose of Expenditure: Campaign Checks
Amount of Expenditure: \$ \$49.33 Date of Expenditure: \$ 11/12/2025

Total Expenditures: \$ \$1,667.33

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,667.33

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: Gregory Hairston Photo **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 494 N Hollywood St City: Memphis State: TN Zip Code: 38112
Purpose of Expenditure: Photography
Amount of Expenditure: \$ \$400.00 Date of Expenditure: \$ 11/21/2025

Business or Organization Name: Marketality LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204
Purpose of Expenditure: Media
Amount of Expenditure: \$ \$959.00 Date of Expenditure: \$ 11/24/2025

Business or Organization Name: Marketality LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$1,100.00 Date of Expenditure: \$ 11/24/2025

Business or Organization Name: Friends of Antonio Parkinson **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 425 Rep John Lewis Way N Ste 4 City: Nashville State: TN Zip Code: 37243
Purpose of Expenditure: Donation
Amount of Expenditure: \$ \$99.00 Date of Expenditure: \$ 12/5/2025

Business or Organization Name: Marketality LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204
Purpose of Expenditure: Media
Amount of Expenditure: \$ \$772.50 Date of Expenditure: \$ 12/5/2025

Total Expenditures: \$ \$4,997.83

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,997.83

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: Your Shirts Ink'd **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5948 Mt Moriah City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$515.82 Date of Expenditure: \$ 12/9/2025

Business or Organization Name: Your Shirts Ink'd **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5948 Mt Moriah City: Memphis State: TN Zip Code: 38125
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$203.04 Date of Expenditure: \$ 12/9/2025

Business or Organization Name: Anedot **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112
Purpose of Expenditure: Service Fees
Amount of Expenditure: \$ \$12.30 Date of Expenditure: \$ 12/10/2025

Business or Organization Name: Anedot **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112
Purpose of Expenditure: Service Fees
Amount of Expenditure: \$ \$63.90 Date of Expenditure: \$ 12/11/2025

Business or Organization Name: _____ **OR**
First Name: Marsha Middle Name: _____ Last Name: Houston
Address: 7410 Lost Grove City: Cordova State: TN Zip Code: 38016
Purpose of Expenditure: Food and Beverage
Amount of Expenditure: \$ \$460.00 Date of Expenditure: \$ 12/15/2025

Total Expenditures: \$ \$6,252.89

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,252.89

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: directFX **OR**

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

Address: 8811 Highway 51 N City: Southaven State: MS Zip Code: 38671

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$98.00 Date of Expenditure: \$ 12/22/2025

Business or Organization Name: EDG Marketing Grind TV **OR**

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

Address: 5100 Poplar Ave City: Memphis State: TN Zip Code: 38137

Purpose of Expenditure: Media

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 12/22/2025

Business or Organization Name: Anedot **OR**

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

Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$2.30 Date of Expenditure: \$ 12/22/2025

Business or Organization Name: Marketality LLC **OR**

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

Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204

Purpose of Expenditure: Media

Amount of Expenditure: \$ \$1,144.00 Date of Expenditure: \$ 1/9/2026

Business or Organization Name: Marketality LLC **OR**

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

Address: 100 Powell Place #1482 City: Nashville State: TN Zip Code: 37204

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$752.50 Date of Expenditure: \$ 1/15/2026

Total Expenditures: \$ \$8,599.69

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$8,599.69

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: LIFEFA **OR**

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

Address: 7853 Wood Oak City: Memphis State: TN Zip Code: 38016

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$589.16 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: A1 Printing **OR**

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

Address: 810 East Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Printina

Amount of Expenditure: \$ \$680.45 Date of Expenditure: \$ 11/25/2025

Business or Organization Name: directFX **OR**

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

Address: 8811 Highway 51 N City: Southaven State: MS Zip Code: 38671

Purpose of Expenditure: Advertisina

Amount of Expenditure: \$ \$299.38 Date of Expenditure: \$ 12/9/2025

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: \$ \$10,168.68

(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: Marcy Ingram
2. Reporting Period: Start Date: 7/1/2025 End Date: 1/16/2026
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: Marcy Middle Name: _____ Last Name: Ingram

Address: 210 Seabiscuit Dr City: Collierville State: TN Zip Code: 38017

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$8,300.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$8,300.00

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

Date of Loan: 10/23/2025

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 \$ \$8,300.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$8,300.00