CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/29/2026 2.a. Candidate or Committee Name: Austin Maxwell

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

4. Campaign Address: 1503 S. E. Broad St

City: Murfreesboro State: TN Zip Code: 37130 Phone: _____

5. Candidate Home Address: 1503 SE Broad Street

City: Murfreesboro State: TN Zip Code: 37130 Phone: 6159072894

Candidate Email Address: austinmaxwell2009@gmail.com

6. Office Sought: (include district number, if applicable) Murfreesboro City, Councilman

7. Name of Political Treasurer (may be candidate): Austin Maxwell

Political Treasurer Email Address: austinmaxwell2009@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: 7/1/2026 End Date: 7/27/2026

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

-DC55-4B1A-8E45-F27(
07/29/26 - 10:03 PM

12. Summary:

a.	Balance On Hand Last Report	$ $42,046.51
b.	Total Receipts This Period	$ $4,000.00
c.	Total Disbursements This Period	$ $28,667.34
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $17,379.17
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Austin Maxwell

14. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

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) ..... $ $4,000.00

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.) ..... $ $4,000.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $28,667.34
(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.)..... $ $28,667.34

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: Austin Maxwell

2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

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: Murfreesboro Middle Name: _____ Last Name: Firefighters Associat

Address: PO Box 10331 City: Murfreesboro State: TN Zip Code: 37129

Occupation: Firefighters Employer: City of Murfreesboro Firefighters PAC

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

Amount of Contribution: $$1,000.0 Date of Contribution: 7/13/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Harney

Address: 6748 West Gum Road City: Murfreesboro State: TN Zip Code: 37127

Occupation: Real Estate Employer: Parks Realty

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

Amount of Contribution: $$500.00 Date of Contribution: 7/8/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Don Middle Name: _____ Last Name: Ash

Address: 1541 Stratford Hall Circle City: Murfreesboro State: TN Zip Code: 37130

Occupation: Retired Employer: Retired

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

Amount of Contribution: $$200.00 Date of Contribution: 7/10/2026 Aggregate This Election: $ $200.00

Business or Organization Name: _____ **OR**

First Name: Shane Middle Name: _____ Last Name: Reeves

Address: 352 W. Northfield Blvd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Pharmacy Employer: Owner Twelve Stone Health

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

Amount of Contribution: $$500.00 Date of Contribution: 7/15/2026 Aggregate This Election: $ $500.00

Total Contributions: $ $2,200.00

(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: Austin Maxwell

2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Vicki Middle Name: _____ Last Name: Fann

Address: 1426 Hawthorn Place City: Murfreesboro State: TN Zip Code: 37130

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $300.00 Date of Contribution: 7/15/2026 Aggregate This Election: $ $300.00

Business or Organization Name: _____ **OR**

First Name: Rutherford County Middle Name: _____ Last Name: Homebuilders PAC

Address: 352 W. Northfield Boulevard #4C City: Murfreesboro State: TN Zip Code: 37129

Occupation: Homebuilders Employer: PAC

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

Amount of Contribution: $ $1,500.0 Date of Contribution: 7/24/2026 Aggregate This Election: $ $1,500.0

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: $_____ Date of Contribution: _____ Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: $_____ Date of Contribution: _____ Aggregate This Election: $ _____

Total Contributions: $ $4,000.00

(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: Austin Maxwell

2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

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: _____ **OR**

First Name: Navigation Middle Name: _____ Last Name: Advertising

Address: 416 Medical Center Parkway Suite City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: IP Ads for General Election

Amount of Expenditure: $ $6,896.25 Date of Expenditure: $ 7/13/2026

Business or Organization Name: _____ **OR**

First Name: Franklins Middle Name: _____ Last Name: Printing

Address: 2227 Southpark Drive City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Printing for Mailer #1 to Voters

Amount of Expenditure: $ $4,853.15 Date of Expenditure: $ 7/13/2026

Business or Organization Name: _____ **OR**

First Name: USPS Middle Name: _____ Last Name: United States Postn

Address: 825 South Church Street City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Postage for Mailer #1

Amount of Expenditure: $ $9,072.03 Date of Expenditure: $ 7/13/2026

Business or Organization Name: _____ **OR**

First Name: WGNS Middle Name: _____ Last Name: WGNS Radio

Address: 306 South Church Street City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Radio Ads and Website Ads thru General Election

Amount of Expenditure: $ $2,022.50 Date of Expenditure: $ 7/9/2026

Business or Organization Name: _____ **OR**

First Name: Franklins Middle Name: _____ Last Name: Printing

Address: 2227 Southpark Drive City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Printing for Mailer #2

Amount of Expenditure: $ $3,169.58 Date of Expenditure: $ 7/21/2026

Total Expenditures: $ $26,013.51

(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: Austin Maxwell

2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $26,013.51

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: ______ **OR**
First Name: United States Middle Name: ______ Last Name: Postmaster
Address: 825 South Church Street City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Postage for Mailer #2
Amount of Expenditure: $ $2,641.03 Date of Expenditure: $ 7/21/2026

Business or Organization Name: ______ **OR**
First Name: Anedot Middle Name: ______ Last Name: Online Fundraising
Address: 1201 West Peachtree Street Suite City: Atlanta State: GA Zip Code: 30309
Purpose of Expenditure: Online Fundraising Fees
Amount of Expenditure: $ $12.80 Date of Expenditure: $ 7/15/2026

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: $ $28,667.34
(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.)