CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 4/27/2026 2.a. Candidate or Committee Name: Katie Darby

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 1407 Holmes Ct

City: Nolensville State: TN Zip Code: 37135 Phone: _____

5. Candidate Home Address: 1407 Holmes Ct

City: Nolensville State: TN Zip Code: 37135 Phone: _____

Candidate Email Address: Katie.darby@yahoo.com

6. Office Sought: (include district number, if applicable) School Board, Zone 4

7. Name of Political Treasurer (may be candidate): Dotty Grattan

Political Treasurer Email Address: dottygee@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

CD33-4821-898B-1E70
04/27/26 - 6:40 PM

12. Summary:

a.	Balance On Hand Last Report	$ $125.67
b.	Total Receipts This Period	$ $2,850.00
c.	Total Disbursements This Period	$ $2,155.86
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $819.81
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Katie Darby

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) ..... $ $2,850.00

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.) ..... $ $2,850.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $2,155.86
(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.)..... $ $2,155.86

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: Katie Darby

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: Michael Middle Name: _____ Last Name: Gallagher

Address: PO Box 3661 City: Brentwood State: TN Zip Code: 37024

Occupation: Best Effort Employer: Best Effort

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 4/1/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Sandra Middle Name: _____ Last Name: Gallagher

Address: PO Box 3661 City: Brentwood State: TN Zip Code: 37024

Occupation: Best Effort Employer: Best Effort

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 4/1/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Gary Middle Name: _____ Last Name: Grattan

Address: 4301 Weakley Lane City: Mt. Juliet State: TN Zip Code: 37122

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $150.00 Date of Contribution: 4/1/2026 Aggregate This Election: $ $150.00

Business or Organization Name: _____ **OR**

First Name: Harry Middle Name: _____ Last Name: Deshpande

Address: 4202 Crowne Brook Cir City: Franklin State: TN Zip Code: 37067

Occupation: Best Effort Employer: Best Effort

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

Amount of Contribution: $ $50.00 Date of Contribution: 4/2/2026 Aggregate This Election: $ $50.00

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: Katie Darby

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) $ $2,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Maffei

Address: 3825 Pitchers Ln City: Murfreesboro State: TN Zip Code: 37128

Occupation: Best Effort Employer: Best Effort

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: Michael Middle Name: _____ Last Name: Jones

Address: 2414 J D Todd Rd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Best Effort Employer: Best Effort

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

Amount of Contribution: $ $500.00 Date of Contribution: 4/16/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Moore

Address: 2149 Aberdeen Ct City: Murfreesboro State: TN Zip Code: 37130

Occupation: Best Effort Employer: SRM Concrete

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

Amount of Contribution: $ $50.00 Date of Contribution: 4/2/2026 Aggregate This Election: $ $50.00

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: $ $2,850.00

(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: Katie Darby

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: Anedot **OR**

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

Address: 3723 Greenville Ave Ste 41002 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Fees for contributions

Amount of Expenditure: $ $26.90 Date of Expenditure: $ 4/16/2026

Business or Organization Name: Card Marketing **OR**

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

Address: 2026 Johnson Industrial Blvd City: Nolensville State: TN Zip Code: 37135

Purpose of Expenditure: Printing of cards

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 4/1/2026

Business or Organization Name: Campaignknock Co **OR**

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

Address: 2004 Commerce Street City: Fairview State: OK Zip Code: 73737

Purpose of Expenditure: Doorknocking and Canvassing Info

Amount of Expenditure: $ $39.99 Date of Expenditure: $ 4/3/2026

Business or Organization Name: Campaignknock Co **OR**

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

Address: 2004 Commerce St City: Fairview State: OK Zip Code: 73737

Purpose of Expenditure: Doorknocking and Canvassing Info

Amount of Expenditure: $ $42.72 Date of Expenditure: $ 4/3/2026

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

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

Address: 931 Old Lebanon Dirt Rd City: Hermitage State: TN Zip Code: 37076

Purpose of Expenditure: Printing

Amount of Expenditure: $ $219.50 Date of Expenditure: $ 4/8/2026

Total Expenditures: $ $379.11

(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: Katie Darby

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) $ $379.11

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: Fox Printing **OR**

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

Address: 931 Old Lebanon Dirt Rd City: Hermitage State: TN Zip Code: 37076

Purpose of Expenditure: Printing

Amount of Expenditure: $ $495.70 Date of Expenditure: $ 4/10/2026

Business or Organization Name: Print PPS.com **OR**

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

Address: 9004 Washington St NE City: Albuquerque State: NM Zip Code: 87113

Purpose of Expenditure: Printing

Amount of Expenditure: $ $99.82 Date of Expenditure: $ 4/13/2026

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

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

Address: 931 Old Lebanon Dirt Road City: Hermitage State: TN Zip Code: 37076

Purpose of Expenditure: Printing

Amount of Expenditure: $ $1,181.23 Date of Expenditure: $ 4/23/2026

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: $ $2,155.86

(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.)