



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/29/2026 2.a. Candidate or Committee Name: Sharon Hurt
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 6316 Willow Oak Dr
City: Nashville State: TN Zip Code: 37221 Phone: _____
5. Candidate Home Address: 6316 Willow Oak Dr
City: Nashville State: TN Zip Code: 37221 Phone: 6155451778
Candidate Email Address: sharon.hurt2017@gmail.com
6. Office Sought: (include district number, if applicable) County Clerk
7. Name of Political Treasurer (may be candidate): Danielle Gibson
Political Treasurer Email Address: tlsbookkeeper@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 _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>637.99</u>
b. Total Receipts This Period	\$ <u>2,300.00</u>
c. Total Disbursements This Period	\$ <u>2,293.01</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>644.98</u>
e. Total Loans Outstanding	\$ <u>17,000.00</u>
f. Total Obligations Outstanding	\$ <u>0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Sharon Hurt

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) \$ \$300.00
- c. Loans Received This Reporting Period..... \$ \$2,000.00
- 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.) \$ \$2,300.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,293.01
(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.)..... \$ \$2,293.01

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: Sharon Hurt
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: Sam Middle Name: _____ Last Name: Coleman

Address: 4037 Pepperwood Drive City: Nashville State: TN Zip Code: 37013

Occupation: Best Effort Made Employer: Best Effort Made

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 7/22/2026 Aggregate This Election: \$ \$300.00

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: \$ _____

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: \$ \$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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Sharon Hurt
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: TAB Nashville CDC **OR**

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

Address: 6801 Charlotte Pike City: Nashville State: TN Zip Code: 37207

Purpose of Expenditure: Advertisement

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Sherrell's Accounting Services **OR**

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

Address: Post Office Box 281972 City: Nashville State: TN Zip Code: 37228

Purpose of Expenditure: Accounting Services

Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Intuit Quickbooks **OR**

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

Address: 2700 Coast Avenue City: Mountain View State: CA Zip Code: 94043

Purpose of Expenditure: Accounting Subscription

Amount of Expenditure: \$ \$126.21 Date of Expenditure: \$ 7/27/0026

Business or Organization Name: GoDaddy and Wix **OR**

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

Address: 100 S. MILLS AVE STE.1600 City: Tempe State: AZ Zip Code: 85281

Purpose of Expenditure: Domain

Amount of Expenditure: \$ \$76.80 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Davidson County Democratic Women **OR**

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

Address: Post Office Box 330154, Nashville City: Nashville State: TN Zip Code: 37203

Purpose of Expenditure: Event Sponsor

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/27/2026

Total Expenditures: \$ \$853.01

(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: Sharon Hurt
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) \$ \$853.01

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: Beta Omicron Chapter of Alpha Phi Alpha **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3600 Johns Merritt Boulevard City: Nashville State: TN Zip Code: 37209
Purpose of Expenditure: Professional Campaign Services
Amount of Expenditure: \$ \$1,440.00 Date of Expenditure: \$ 7/27/2026

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: \$ _____

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: \$ \$2,293.01

(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: Sharon Hurt
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Sharon Middle Name: _____ Last Name: Hurt

Address: 6316 Willow Oak Dr City: Nashville State: TN Zip Code: 37221

Outstanding Loan Balance (Beginning) \$ \$15,000.00

Loans Received \$ \$2,000.00

Loan Payments..... \$ \$0.00

Outstanding Loan (End)..... \$ \$17,000.00

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

Date of Loan: 7/15/2026

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) \$ \$15,000.00

Loans Received \$ \$2,000.00

Loan Payments..... \$ \$0.00

Outstanding Loan (End)..... \$ \$17,000.00