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

1. Date: 4/1/2026 2.a. Candidate or Committee Name: Catie Beth Thomas

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

4. Campaign Address: 2511 New Holland Circle

City: Murfreesboro State: TN Zip Code: 37128 Phone: _____

5. Candidate Home Address: 2511 New Holland Circle

City: Murfreesboro State: TN Zip Code: 37128 Phone: _____

Candidate Email Address: catiebeth4ruco7@gmail.com

6. Office Sought: (include district number, if applicable) County Commission District #07

7. Name of Political Treasurer (may be candidate): Amber Howell

Political Treasurer Email Address: amberspre@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: 2/16/2026 End Date: 3/31/2026

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

1C4F-4A8B-A98C-3242
04/01/26 - 10:48 AM

12. Summary:

a.	Balance On Hand Last Report	$ $0.00
b.	Total Receipts This Period	$ $1,930.00
c.	Total Disbursements This Period	$ $448.20
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $1,481.80
e.	Total Loans Outstanding	$ $600.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Catie Beth Thomas

14. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

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) ..... $ $1,330.00

c. Loans Received This Reporting Period ..... $ $600.00

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.) ..... $ $1,930.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $448.20
(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.) ..... $ $448.20

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ _____

b. Itemized In-Kind Contributions Received This Period ..... $ $300.00

c. Total In-Kind Contributions Received This Period ..... $ $300.00

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

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: Scott Middle Name: _____ Last Name: McDaniel

Address: 3005 Madison City: Murfreesboro State: TN Zip Code: 37130

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $20.00 Date of Contribution: 2/21/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Brett Middle Name: _____ Last Name: Windrow

Address: 208 Land Breeze Dr City: LaVergne State: TN Zip Code: 37086

Occupation: Attorney Employer: Progressive Insurance

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

Amount of Contribution: $ $75.00 Date of Contribution: 2/21/2026 Aggregate This Election: $ $75.00

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Steen

Address: 3011 Regenwood Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Writer Employer: Susan B. Steen & Associates

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

Amount of Contribution: $ $200.00 Date of Contribution: 2/22/2026 Aggregate This Election: $ $200.00

Business or Organization Name: _____ **OR**

First Name: Jacob Middle Name: C Last Name: Bryan

Address: 400 Bains Road City: Hillsboro State: TN Zip Code: 37342

Occupation: Design Technician Employer: Middle TN Electric

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

Amount of Contribution: $ $25.00 Date of Contribution: 2/22/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $320.00

(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: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $320.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Amber Middle Name: _____ Last Name: Howell

Address: 2106 Hideaway Ln City: Murfreesboro State: TN Zip Code: 37128

Occupation: Manager Employer: Cardinal Health

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

Amount of Contribution: $ $400.00 Date of Contribution: 2/25/2026 Aggregate This Election: $ $400.00

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Armistead

Address: 509 Knob Creek Rd City: Wartrace State: TN Zip Code: 37183

Occupation: Educator Employer: NIET

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/25/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Faenina Middle Name: _____ Last Name: Coyle

Address: 2614 Sunset Pl City: Nashville State: TN Zip Code: 37212

Occupation: Sr. Program Manager Employer: Vanderbilt University Medical Center

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

Amount of Contribution: $ $50.00 Date of Contribution: 2/27/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Spry

Address: 2314 Spaulding Cir City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/3/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $970.00

(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: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $970.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Bernard Middle Name: _____ Last Name: Steen

Address: 907 Woodmont Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Designer Employer: DigiBridge Media

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/5/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Eva Middle Name: _____ Last Name: Berg

Address: 8695 Hwy 269 Bell Buckle Rd City: Christiana State: TN Zip Code: 37037

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/5/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Shannon Middle Name: _____ Last Name: Michel

Address: 2721 Westhaven Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Teacher Employer: RCS

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/11/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Ashley Middle Name: _____ Last Name: Benkarski

Address: 2322 Richmond Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Organizer Employer: CLASI

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

Amount of Contribution: $ $10.00 Date of Contribution: 3/14/2026 Aggregate This Election: $ $10.00

Total Contributions: $ $1,180.00

(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: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,180.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Sullivan

Address: 1170 Gaylord Ct City: Murfreesboro State: TN Zip Code: 37130

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/25/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Caitlyn Middle Name: _____ Last Name: Parris

Address: 1911 Saddlebrook Dr Apt Z208 City: Murfreesboro State: TN Zip Code: 37129

Occupation: Teacher Employer: Rutherford County Schools

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/21/2026 Aggregate This Election: $ $100.00

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: $ _____

Total Contributions: $ $1,330.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

3. Total in-kind contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars ($100) from any contributor during the period must be reported.

Business or Organization Name: ______ **OR**
First Name: Molly Middle Name: ______ Last Name: Steen
Address: 907 Woodmont Dr City: Murfreesboro State: TN Zip Code: 37129
Occupation: Designer Employer: DigiBridge Media
In-Kind Contribution Received For: ■ Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: $ $300.00 In-Kind Contribution Date: 2/26/2026 Aggregate This Election: $ $300.00
Description of In-Kind Contribution: Logo & branding

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Occupation: ______ Employer: ______
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______
Description of In-Kind Contribution: ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Occupation: ______ Employer: ______
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______
Description of In-Kind Contribution: ______

Business or Organization Name: ______ **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ______ Zip Code: ______
Occupation: ______ Employer: ______
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: $______ In-Kind Contribution Date: ______ Aggregate This Election: $______
Description of In-Kind Contribution: ______

Total In-Kind Contributions: $ $300.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

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: Wilson Bank **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Campaign Checks

Amount of Expenditure: $ $19.31 Date of Expenditure: $ 2/18/2026

Business or Organization Name: Staples **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Business Cards

Amount of Expenditure: $ $30.72 Date of Expenditure: $ 2/19/2026

Business or Organization Name: Staples **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Post cards/stickers

Amount of Expenditure: $ $137.15 Date of Expenditure: $ 2/19/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fort City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: "Supplies (pens

Amount of Expenditure: $ $43.94 Date of Expenditure: $ 2/20/2026

Business or Organization Name: Porkbun.com **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Domain Registration (website)

Amount of Expenditure: $ $8.88 Date of Expenditure: $ 2/24/2026

Total Expenditures: $ $240.00

(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: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $240.00

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: TN DEM Party **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Party LOC (VoteBuilder/MiniVan)

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 3/23/2026

Business or Organization Name: Staples **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: Post cards/stickers

Amount of Expenditure: $ $75.72 Date of Expenditure: $ 3/30/2026

Business or Organization Name: ActBlue Fees **OR**

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

Address: ONLINE City: ONLINE State: ONI Zip Code: 37128

Purpose of Expenditure: ActBlue transaction fees

Amount of Expenditure: $ $32.48 Date of Expenditure: $ 3/31/2026

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: $ $448.20

(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: Catie Beth Thomas

2. Reporting Period: Start Date: 2/16/2026 End Date: 3/31/2026

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: Catherine Middle Name: _____ Last Name: Thomas

Address: 2511 New Holland Cir City: Murfreesboro State: TN Zip Code: 37128

Outstanding Loan Balance (Beginning) ..... $ $0.00

Loans Received ..... $ $600.00

Loan Payments ..... $ $0.00

Outstanding Loan (End) ..... $ $600.00

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

Date of Loan: 2/11/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

First Name: Catherine Middle Name: _____ Last Name: Thomas

Address: 2511 New Holland Cir City: Murfreesboro State: TN Zip Code: 37128

Amount Guaranteed Outstanding: $ $600.00

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 ..... $ $600.00

Loan Payments ..... $ $0.00

Outstanding Loan (End) ..... $ $600.00