



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 2/1/2026 2.a. Candidate or Committee Name: Jeff McKinney
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 2623 Chase Ln
City: Murfreesboro State: TN Zip Code: 37130 Phone: 6154192842
5. Candidate Home Address: 2623 Chase Ln
City: Murfreesboro State: TN Zip Code: 37130 Phone: 6154192842
Candidate Email Address: jeffmckinney2929@gmail.com
6. Office Sought: (include district number, if applicable) Circuit Court Clerk
7. Name of Political Treasurer (may be candidate): Rachel Brabender
Political Treasurer Email Address: rachelbrabender@yahoo.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: 9/1/2025 End Date: 1/15/2026
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>\$0.00</u> |
| b. Total Receipts This Period | \$ <u>\$36,649.41</u> |
| c. Total Disbursements This Period | \$ <u>\$23,381.65</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$13,267.76</u> |
| e. Total Loans Outstanding | \$ <u>\$30,000.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jeff McKinney

14. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026

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) \$ \$6,649.41
- c. Loans Received This Reporting Period..... \$ \$30,000.00
- 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.) \$ \$36,649.41

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$23,381.65
(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.)..... \$ \$23,381.65

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$2,500.00
- c. Total In-Kind Contributions Received This Period \$ \$2,500.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
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: Marry Me Tennessee **OR**

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

Address: 520 West Lytle St # A City: Murfreesboro State: TN Zip Code: 37130

Occupation: Wedding Officiants Employer: Self

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

Amount of Contribution: \$ \$350.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$350.00

Business or Organization Name: _____ **OR**

First Name: Kathy Middle Name: _____ Last Name: Baker-Bowen

Address: 2622 Chase Ln City: Murfreesboro State: TN Zip Code: 37130

Occupation: Lawyer Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/22/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Robin Middle Name: Eades Last Name: Gentry

Address: 7030 Timberlake Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Legal Assistant Employer: Mitchell & Mitchell

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Patty Middle Name: _____ Last Name: Bryson

Address: 1104 Flagfin Ln 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: \$ \$250.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$800.00

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Taylor

Address: 5035 Sulphur Springs Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Shearon

Address: 2523 Burgess St City: Murfreesboro State: TN Zip Code: 37128

Occupation: Nurse Employer: Ascension St Thomas

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Steven Middle Name: _____ Last Name: McKinney

Address: 5717 Saint Elmo Ave City: Chattanooga State: TN Zip Code: 37409

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 11/15/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Walter Middle Name: H Last Name: Baltimore

Address: 1305 Kinnard Dr City: Franklin State: TN Zip Code: 37064

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$425.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$425.00

Total Contributions: \$ \$2,475.00

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,475.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Matt's Transmission **OR**

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

Address: 459 Middle Tennessee Blvd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Transmission Shop Employer: Self

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: Southeast Electric & Plumbing Supply **OR**

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

Address: 8211 Manchester Pike City: Murfreesboro State: TN Zip Code: 37127

Occupation: Electric & Plumbing Employer: Self

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 11/7/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Janie Middle Name: B Last Name: Redfield

Address: 769 E Northfield Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Unknown Employer: Unknown

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 11/17/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Phil Middle Name: _____ Last Name: Griffin

Address: PO Box 235 City: Starkville State: MS Zip Code: 39760

Occupation: Self Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,825.00

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,825.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kathryn Middle Name: _____ Last Name: McKinney

Address: 385 County Road 901 City: Cedar Bluff State: AL Zip Code: 35959

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 12/15/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Diedre Middle Name: _____ Last Name: Easton

Address: 9207 Bolton Ave Unit 271 City: Hudson State: FL Zip Code: 34667

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$225.00 Date of Contribution: 12/1/2025 Aggregate This Election: \$ \$225.00

Business or Organization Name: _____ **OR**

First Name: Mark Middle Name: _____ Last Name: Rollins

Address: 1803 Shelley St City: Murfreesboro State: TN Zip Code: 37129

Occupation: CEO Employer: Holston Home Care

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

Amount of Contribution: \$ \$49.95 Date of Contribution: 11/11/2025 Aggregate This Election: \$ \$49.95

Business or Organization Name: _____ **OR**

First Name: Deanna Middle Name: _____ Last Name: Easterling

Address: 4213 Central Valley Rd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Legal Assistance Employer: Red King Road

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

Amount of Contribution: \$ \$99.91 Date of Contribution: 11/12/2025 Aggregate This Election: \$ \$99.91

Total Contributions: \$ \$5,699.86

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,699.86

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Brent Middle Name: _____ Last Name: Pierce

Address: 3116 Maddie Kate Ct City: Murfreesboro State: TN Zip Code: 37128

Occupation: Lawyer Employer: State of Tennessee

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

Amount of Contribution: \$ \$99.91 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$99.91

Business or Organization Name: _____ **OR**

First Name: Carla Middle Name: _____ Last Name: Lemons

Address: 3109 Chapel Hills Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Legal Secretary Employer: State of Tennessee

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

Amount of Contribution: \$ \$49.95 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$49.95

Business or Organization Name: _____ **OR**

First Name: Jake Middle Name: _____ Last Name: Emery

Address: 4007 Edmond Dr City: Murfreesboro State: TN Zip Code: 37127

Occupation: Sales Employer: McKesson

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

Amount of Contribution: \$ \$49.95 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$49.95

Business or Organization Name: _____ **OR**

First Name: Pamela Middle Name: _____ Last Name: Allen

Address: 4420 Attleboro Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$99.91 Date of Contribution: 11/14/2025 Aggregate This Election: \$ \$99.91

Total Contributions: \$ \$5,999.58

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,999.58

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Freda Middle Name: _____ Last Name: Morgan

Address: 2018 Herring Crossing City: Murfreesboro State: TN Zip Code: 37130

Occupation: Sr Major Gifts Employer: Special Kids

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

Amount of Contribution: \$ \$24.97 Date of Contribution: 11/20/2025 Aggregate This Election: \$ \$24.97

Business or Organization Name: _____ **OR**

First Name: Tommy Middle Name: _____ Last Name: Roberts

Address: 218 E. Oak St City: Murfreesboro State: TN Zip Code: 37130

Occupation: Detective Employer: MTSU Police Department

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

Amount of Contribution: \$ \$49.95 Date of Contribution: 12/29/2025 Aggregate This Election: \$ \$49.95

Business or Organization Name: _____ **OR**

First Name: Lucy Middle Name: _____ Last Name: Baltimore

Address: 1944 Black Fox Xing City: Murfreesboro State: TN Zip Code: 37127

Occupation: Administrative Assistant Employer: Murfreesboro Pure Milk

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/30/2025 Aggregate This Election: \$ \$475.00

Business or Organization Name: _____ **OR**

First Name: Jerry Middle Name: _____ Last Name: Blythe Jr

Address: 4122 Suntropic Ln City: Murfreesboro State: TN Zip Code: 37127

Occupation: Asst DA Employer: State of Tennessee

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

Amount of Contribution: \$ \$99.91 Date of Contribution: 1/6/2026 Aggregate This Election: \$ \$99.91

Total Contributions: \$ \$6,224.41

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,224.41

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Lucy Middle Name: _____ Last Name: Baltimore
Address: 1944 Black Fox Xing City: Murfreesboro State: TN Zip Code: 37127
Occupation: Administrative Assistant Employer: Murfreesboro Pure Milk
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$425.00 Date of Contribution: 11/13/2025 Aggregate This Election: \$ \$425.00

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: \$ \$6,649.41
(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
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: Holston Home Care **OR**

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

Address: 925 S Church St Suite C300 City: Murfreesboro State: TN Zip Code: 37130

Occupation: Senior Care Employer: Self

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

In-Kind Contribution Value: \$ \$2,500 In-Kind Contribution Date: 11/13/2025 Aggregate This Election: \$ \$2,500.00

Description of In-Kind Contribution: Venue for Kick-Off

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: \$ \$2,500.00

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
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: Griffin Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 235 City: Starkville State: MS Zip Code: 39760
Purpose of Expenditure: Campaign Development
Amount of Expenditure: \$ \$7,500.00 Date of Expenditure: \$ 9/26/2025

Business or Organization Name: Sams Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 125 John Rice Blvd City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Parade Candy
Amount of Expenditure: \$ \$287.04 Date of Expenditure: \$ 12/10/2025

Business or Organization Name: Sams Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 125 John Rice Blvd City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Parade Candy
Amount of Expenditure: \$ \$469.91 Date of Expenditure: \$ 11/26/2025

Business or Organization Name: Raider Tees **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 111 MTCS Rd Suite A-B City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Beanies & Shirts
Amount of Expenditure: \$ \$845.08 Date of Expenditure: \$ 12/10/2025

Business or Organization Name: City of Murfreesboro **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 111 W Vine St City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Christmas Parade
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 11/18/2025

Total Expenditures: \$ \$9,127.03

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,127.03

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: Awnings Plus OR

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

Address: 1007 Dr Martin Luther Jr Blvd City: mURFREESBORO State: TN Zip Code: 37130

Purpose of Expenditure: Sign

Amount of Expenditure: \$ \$41.77 Date of Expenditure: \$ 12/12/2025

Business or Organization Name: Awnings Plus OR

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

Address: 1007 Dr Martin Luther Jr Blvd City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Business Cards, Magnets, Car Magnets

Amount of Expenditure: \$ \$817.64 Date of Expenditure: \$ 10/31/2025

Business or Organization Name: Awnings Plus OR

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

Address: 1007 Dr Martin Luther Jr Blvd City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Small Car Magnets

Amount of Expenditure: \$ \$168.74 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: Griffin Strategies OR

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

Address: PO Box 235 City: Starkville State: MS Zip Code: 39760

Purpose of Expenditure: Shirts, Cups, Pens, Invitations

Amount of Expenditure: \$ \$1,672.37 Date of Expenditure: \$ 10/20/2025

Business or Organization Name: Griffin Strategies OR

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

Address: PO Box 235 City: Starkville State: MS Zip Code: 39760

Purpose of Expenditure: Push Cards, Door Hangers, Yard Signs

Amount of Expenditure: \$ \$5,566.75 Date of Expenditure: \$ 12/15/2025

Total Expenditures: \$ \$17,394.30

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$17,394.30

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: Griffin Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 235 City: Starkville State: MS Zip Code: 39760
Purpose of Expenditure: Mailer
Amount of Expenditure: \$ \$5,500.00 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: Raider Tees **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 111 MTCS Rd Suite A-B City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Polos
Amount of Expenditure: \$ \$265.60 Date of Expenditure: \$ 10/20/2025

Business or Organization Name: Murfreesboro Pulse **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 714 W. Main St Suite 208 City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Ad
Amount of Expenditure: \$ \$220.00 Date of Expenditure: \$ 11/20/2025

Business or Organization Name: Stripe Inc **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 354 Oyster Point Blvd City: San Francisco State: CA Zip Code: 94080
Purpose of Expenditure: Credit Card Fee
Amount of Expenditure: \$ \$1.75 Date of Expenditure: \$ 12/30/2025

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: \$ _____

Total Expenditures: \$ \$23,381.65

(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: Jeff McKinney
2. Reporting Period: Start Date: 9/1/2025 End Date: 1/15/2026
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: Jeff McKinney **OR**

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

Address: 2623 Chase Ln City: Murfreesboro State: TN Zip Code: 37130

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$30,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$30,000.00

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

Date of Loan: 10/14/2025

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 \$ \$30,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$30,000.00