



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/30/2026 2.a. Candidate or Committee Name: Brendan Doughtie
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 2032 Debonair Lane
City: Murfreesboro State: TN Zip Code: 37128 Phone: _____
5. Candidate Home Address: 2032 Debonair Lane
City: Murfreesboro State: TN Zip Code: 37128 Phone: _____
Candidate Email Address: doughtiebrendan@gmail.com
6. Office Sought: (include district number, if applicable) County Commission District #13
7. Name of Political Treasurer (may be candidate): Amy Curtis
Political Treasurer Email Address: acurtis7950@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>\$2,090.00</u>
b. Total Receipts This Period	\$ <u>\$533.00</u>
c. Total Disbursements This Period	\$ <u>\$1,085.62</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,537.38</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Brendan Doughtie

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) \$ \$533.00
- 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.) \$ \$533.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,085.62
(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.)..... \$ \$1,085.62

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: Brendan Doughtie
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: Paul Middle Name: _____ Last Name: Adams

Address: 103 Richland Ave City: Smyrna State: TN Zip Code: 37167

Occupation: Courier Employer: Simple Cremation and Funeral Services

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 7/3/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Amanda Middle Name: _____ Last Name: Buquet

Address: 3408 Fruition Court City: Murfreesboro State: TN Zip Code: 37128

Occupation: BA Employer: ServPro

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

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

Address: 2322 Richmond Avenue City: Murfreesboro State: TN Zip Code: 37128

Occupation: Organizer Employer: CLASI

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

Amount of Contribution: \$ \$13.00 Date of Contribution: 7/12/2026 Aggregate This Election: \$ \$52.00

Business or Organization Name: _____ **OR**

First Name: Zach Middle Name: _____ Last Name: Young

Address: 93 French St. City: Goodlettsville State: TN Zip Code: 37073

Occupation: Real Estate Employer: Wilson Group

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/12/2026 Aggregate This Election: \$ \$450.00

Total Contributions: \$ \$123.00

(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: Brendan Doughtie
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) \$ \$123.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Pat Middle Name: _____ Last Name: Lusk
Address: 609 S. 13th St. City: Nashville State: TN Zip Code: 37206
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: 7/12/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Chaney Middle Name: _____ Last Name: Mosley
Address: 1430 Electric Avenue City: Nashville State: TN Zip Code: 37206
Occupation: Education Employer: MTSU
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 7/12/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Donna Middle Name: _____ Last Name: Hereford
Address: 2510 Patricia Avenue City: Murfreesboro State: TN Zip Code: 37128
Occupation: Registered Nurse Employer: Attempted
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$20.00 Date of Contribution: 7/11/2026 Aggregate This Election: \$ \$80.00

Business or Organization Name: _____ **OR**
First Name: Scott Middle Name: _____ Last Name: Crombie
Address: 1514 Ballater Drive City: Murfreesboro State: TN Zip Code: 37128
Occupation: Teacher Employer: Williamson Co. Schools
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 7/13/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$293.00
(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: Brendan Doughtie
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) \$ \$293.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kayla Middle Name: _____ Last Name: Bonshire

Address: 7828 Retired Court City: Murfreesboro State: TN Zip Code: 37127

Occupation: Phlebotomist Employer: MMC

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 7/17/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**

First Name: Erik Middle Name: _____ Last Name: Dempsey

Address: 2013 Victory Gallup City: Murfreesboro State: TN Zip Code: 37128

Occupation: Dietician Employer: VA Hosptal

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/23/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Mara Middle Name: _____ Last Name: Blumenfeld

Address: 6924 N. Sheridan Road, Apt. 2S City: Chicago State: IL Zip Code: 60626

Occupation: Costume Designer Employer: Self-employed

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 7/26/2026 Aggregate This Election: \$ \$20.00

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: \$ \$533.00

(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: Brendan Doughtie
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: Kroger **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2449 Old Fort Parkway City: Murfreesboro State: TN Zip Code: 37128
Purpose of Expenditure: Meet and greet refreshments
Amount of Expenditure: \$ \$54.36 Date of Expenditure: \$ 7/3/2026

Business or Organization Name: Canva **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3212 E. Cesar Chavez St. City: Austin State: TX Zip Code: 78792
Purpose of Expenditure: Postcards
Amount of Expenditure: \$ \$54.88 Date of Expenditure: \$ 7/6/2026

Business or Organization Name: Sam's Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 125 John Rice Blvd. City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Postage
Amount of Expenditure: \$ \$163.50 Date of Expenditure: \$ 7/6/2026

Business or Organization Name: Kroger **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2449 Old Fort Parkway City: Murfreesboro State: TN Zip Code: 37128
Purpose of Expenditure: Meet and greet refreshments
Amount of Expenditure: \$ \$36.26 Date of Expenditure: \$ 7/6/2026

Business or Organization Name: Canva **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3414 E Cesar Chavez St. City: Austin State: TX Zip Code: 78792
Purpose of Expenditure: Postcards
Amount of Expenditure: \$ \$113.36 Date of Expenditure: \$ 7/14/2026

Total Expenditures: \$ \$422.36

(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: Brendan Doughtie
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) \$ \$422.36

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: Sam's Club OR

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

Address: 125 John Rice Boulevard City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$405.75 Date of Expenditure: \$ 7/14/2026

Business or Organization Name: Campaign Verify OR

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

Address: 1215-31st St. NW City: Washington State: DC Zip Code: 20007

Purpose of Expenditure: Campaign texting

Amount of Expenditure: \$ \$95.00 Date of Expenditure: \$ 7/14/2026

Business or Organization Name: Sal's Pizza OR

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

Address: 536 N. Thompson Lane City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Campaign postcard party

Amount of Expenditure: \$ \$113.20 Date of Expenditure: \$ 7/11/2026

Business or Organization Name: _____ OR

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

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

Purpose of Expenditure: Donation

Amount of Expenditure: \$ \$13.00 Date of Expenditure: \$ 7/13/2026

Business or Organization Name: _____ OR

First Name: Sarah Middle Name: _____ Last Name: Farnsworth

Address: 3215 Donnacona Court City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Campaign video fee

Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 7/26/2026

Total Expenditures: \$ \$1,064.31

(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: Brendan Doughtie
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) \$ \$1,064.31

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: ActBlue OR

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

Address: P.O. Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$21.31 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: \$ \$1,085.62

(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.)