



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/29/26 2.a. Candidate or Committee Name: Mona Petro
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 08/06/26
 4. Campaign Address: 8571 DEMARS LANE
 City: HIXSON State: TN Zip Code: 37343 Phone: 423-704-7226
 5. Candidate Home Address: 8571 DEMARS LANE
 City: HIXSON State: TN Zip Code: 37343 Phone: 423-704-7226
 Candidate Email Address: MONAPETRO@gmail.com
 6. Office Sought: (include district number, if applicable) COUNTY COMMISSIONER #1
 7. Name of Political Treasurer (may be candidate): JEAN D. RUTKOWSKI
 Political Treasurer Email Address: jhoff0410@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: 07/01/26 End Date: 07/27/26

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.

Mona Petro 07/27/26
 Candidate Signature Date

Jean D Rutkowski 07/27/26
 Political Treasurer Signature Date

Bil Jek 07/27/26
 Witness Signature Date

Bil Jek 07/27/26
 Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>4,502.09</u>
b. Total Receipts This Period	\$	<u>580.00</u>
c. Total Disbursements This Period	\$	<u>4,506.05</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>876.04 576.04</u>
e. Total Loans Outstanding	\$	<u>-0-</u>
f. Total Obligations Outstanding	\$	<u>-0-</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: MONA PETRO

14. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 105.00
(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) \$ 475.00
- c. Loans Received This Reporting Period..... \$ -0-
- d. Interest Received This Reporting Period..... \$ -0-
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 580.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 4506.05
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ -0-
- c. Total Obligation Payments Made This Period..... \$ -0-
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 4506.05

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ ~~81.13~~ -0-
- b. Itemized In-Kind Contributions Received This Period \$ 81.13
- c. Total In-Kind Contributions Received This Period \$ 81.13

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ -0-

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: MONA PETRO
2. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ -0-

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Penny Middle Name: _____ Last Name: Werth
Address: 36 Mountain Cove Rd. City: Signal Mtn. State: TN Zip Code: 37377
Occupation: Administrator Employer: Unity of Chattanooga
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 07/01/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: Rebecca Middle Name: _____ Last Name: Conner
Address: 3229 Social Circle City: Chattanooga State: TN Zip Code: 37415
Occupation: Not Employed Employer: N/A
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200.00 Date of Contribution: 07/13/26 Aggregate This Election: \$ 200.00

Business or Organization Name: Brighter Future Fund OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 527 Young Avenue City: Chattanooga State: TN Zip Code: 37405
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 175.00 Date of Contribution: 07/22/26 Aggregate This Election: \$ 550.00

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: \$ 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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Mona Petro
2. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ -0-

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: Marlene Middle Name: _____ Last Name: Stasulas
Address: 883 Dog Trot Trail City: Hixson State: TN Zip Code: 37343
Occupation: Not Employed Employer: N/A
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 61.00 In-Kind Contribution Date: 07/06/26 Aggregate This Election: \$ 209.91
Description of In-Kind Contribution: Stamps

Business or Organization Name: _____ OR
First Name: Lisa Middle Name: _____ Last Name: Elores
Address: 112 Pine Street City: Soddy-Daisy State: TN Zip Code: 37379
Occupation: Massage therapist Employer: Self
In-Kind Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 20.13 In-Kind Contribution Date: 07/06/26 Aggregate This Election: \$ 123.22
Description of In-Kind Contribution: Stamps

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: \$ 81.13

(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: Mona Petro
2. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ -0-

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: Print Ready OR

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

Address: 4300 North Access Rd City: Chattanooga State: TN Zip Code: 37415

Purpose of Expenditure: Campaign Literature

Amount of Expenditure: \$ 174.80 Date of Expenditure: \$ 07/02/26

Business or Organization Name: Vector Printing OR

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

Address: 4905 ENGLISH AVE City: Chattanooga State: TN Zip Code: 37407

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: \$ 393.38 Date of Expenditure: \$ 07/07/26

Business or Organization Name: Act Blue OR

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

Address: P.O. Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Online Fundraising Fee

Amount of Expenditure: \$.40 Date of Expenditure: \$ 07/07/26

Business or Organization Name: United States Post Office OR

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

Address: 10575 Dayton Pike City: Saddy Daisy State: TN Zip Code: 37379

Purpose of Expenditure: Postage

Amount of Expenditure: \$ 197.95 Date of Expenditure: \$ 07/08/26

Business or Organization Name: Act Blue OR

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

Address: P.O. Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Online Fundraising Fee

Amount of Expenditure: \$ 2.10 Date of Expenditure: \$ 07/10/26

Total Expenditures: \$ 768.55

(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: Mona Petro
2. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 768.55

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 Valley Strategies OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 15152 City: Chattanooga State: TN Zip Code: 37407
Purpose of Expenditure: Campaign Management
Amount of Expenditure: \$ 506.25 Date of Expenditure: \$ 07/10/26

Business or Organization Name: Act Blue OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 441146 City: Somerville State: MA Zip Code: 02144
Purpose of Expenditure: Online Fundraising Fee
Amount of Expenditure: \$ 6.73 Date of Expenditure: \$ 07/15/26

Business or Organization Name: Act Blue OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 441146 City: Somerville State: MA Zip Code: 02144
Purpose of Expenditure: Online Fundraising Fee
Amount of Expenditure: \$ 1.86 Date of Expenditure: \$ 07/18/26

Business or Organization Name: United States Postal Service OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6050 Shallowford Rd City: Chattanooga State: TN Zip Code: _____
Purpose of Expenditure: Postage
Amount of Expenditure: \$ 1631.83 Date of Expenditure: \$ 07/27/26

Business or Organization Name: Print Ready OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4300 North Access Rd. Ste D City: Chattanooga State: TN Zip Code: 37415
Purpose of Expenditure: Campaign Mailers
Amount of Expenditure: \$ 1215.83 Date of Expenditure: \$ 07/24/26

Total Expenditures: \$ 4,131.05

(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: Mona Petro
2. Reporting Period: Start Date: 07/01/26 End Date: 07/27/26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4131.05

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: Voiles OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1919 Bay Hill Dr. City: Hixson State: TN Zip Code: 37343
Purpose of Expenditure: Design Work
Amount of Expenditure: \$ 230.00 Date of Expenditure: \$ 07/27/26

Business or Organization Name: TN Valley Strategies OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 15152 City: Chattanooga State: TN Zip Code: 37415
Purpose of Expenditure: Campaign Management
Amount of Expenditure: \$ 145.00 Date of Expenditure: \$ 07/27/26

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: \$ 4,506.05

(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.)