CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 4/8/2026 2.a. Candidate or Committee Name: SEAN GILLILAND

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 1011 Whitehall Rd

City: murfreesboro State: TN Zip Code: 37130 Phone: 6153904686

5. Candidate Home Address: 1011 Whitehall Rd

City: Murfreesboro State: TN Zip Code: 37130 Phone: 6153904686

Candidate Email Address: seanfor17@gmail.com

6. Office Sought: (include district number, if applicable) County Commission District #17

7. Name of Political Treasurer (may be candidate): Molly Gilliland

Political Treasurer Email Address: mollygilliland@bellsouth.net

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: 1/1/2026 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

024A-4A27-9EC4-9D0E
04/08/26 - 10:57 AM

12. Summary:

a.	Balance On Hand Last Report	$ $0.00
b.	Total Receipts This Period	$ $7,009.30
c.	Total Disbursements This Period	$ $340.40
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $6,668.90
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: SEAN GILLILAND

14. Reporting Period: Start Date: 1/1/2026 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) ..... $ $7,009.30

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.) ..... $ $7,009.30

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $340.40
(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.) ..... $ $340.40

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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 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: Sean Middle Name: _____ Last Name: Gilliland

Address: 1011 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Chief Information Officer Employer: Primary Care and Hope Clinic

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/17/2026 Aggregate This Election: $ $101.00

Business or Organization Name: _____ **OR**

First Name: Amanda Middle Name: _____ Last Name: Moore

Address: 1203 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Attorney Employer: TN Center for Estate & Elder Law PLLC

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/23/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Sean Middle Name: _____ Last Name: Gilliland

Address: 1011 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Chief Information Officer Employer: Primary Care and Hope Clinic

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

Amount of Contribution: $ $1.00 Date of Contribution: 2/27/2026 Aggregate This Election: $ $101.00

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Caputo

Address: 2316 North buchanan Street City: Arlington State: VA Zip Code: 22207

Occupation: SVP Global Government Relatior Employer: Parsons

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

Amount of Contribution: $ $527.47 Date of Contribution: 2/27/2026 Aggregate This Election: $ $527.47

Total Contributions: $ $728.47

(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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $728.47

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Julie Middle Name: _____ Last Name: Eubank

Address: 910 M Street Northwest City: Washington State: DC Zip Code: 20001

Occupation: Government Affairs Employer: National Academy of Sciences

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/27/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Heather Middle Name: _____ Last Name: Bulan

Address: 3133 Lorena Court City: Franklin State: TN Zip Code: 37067

Occupation: Homemaker Employer: Self

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

Amount of Contribution: $ $105.75 Date of Contribution: 2/27/2026 Aggregate This Election: $ $105.75

Business or Organization Name: _____ **OR**

First Name: Bart Middle Name: _____ Last Name: Gordon

Address: 2442 Belmont Rd Nw City: Washington State: DC Zip Code: 20008

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $1,900.0 Date of Contribution: 2/27/2026 Aggregate This Election: $ $1,900.0

Business or Organization Name: _____ **OR**

First Name: Leigh Ann Middle Name: _____ Last Name: Brown

Address: 3338 S Utica Ave City: Tulsa State: OK Zip Code: 74105

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $211.18 Date of Contribution: 3/1/2026 Aggregate This Election: $ $211.18

Total Contributions: $ $3,045.40

(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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $3,045.40

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kent Middle Name: _____ Last Name: Syler

Address: 2922 Longford Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Professor Employer: Middle Tennessee State University

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/2/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Skip Middle Name: _____ Last Name: Ruzicka

Address: 1915 Scarlett Drive 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: $ $263.90 Date of Contribution: 3/4/2026 Aggregate This Election: $ $263.90

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Hooper

Address: 307 E Kansas Ave City: Whitwell State: TN Zip Code: 37397

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/7/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Stubblefield

Address: 1819 Turfland Dr City: Murfreesboro State: TN Zip Code: 37127

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/8/2026 Aggregate This Election: $ $250.00

Total Contributions: $ $4,159.30

(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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $4,159.30

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Tammy Middle Name: _____ Last Name: Brown

Address: 2647 James Edmon Ct City: Murfreesboro State: TN Zip Code: 37129

Occupation: Nurse Employer: Ascend a Maximus Company

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/9/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Reid Middle Name: _____ Last Name: Henderson

Address: 5010 MacArthur Ave City: Murfreesboro State: TN Zip Code: 37129

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: 3/10/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Terry

Address: 1538 Bear Branch Cv City: Murfreesboro State: TN Zip Code: 37130

Occupation: Government Relations Employer: Paramount Strategies

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/15/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Sherry Middle Name: _____ Last Name: Galloway

Address: 3014 Saint Johns Drive City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 3/20/2026 Aggregate This Election: $ $1,000.0

Total Contributions: $ $5,959.30

(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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $5,959.30

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Shirley Middle Name: _____ Last Name: Gilliland

Address: 8524 Savannah Ct City: Knoxville State: TN Zip Code: 37923

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 3/28/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Laura Middle Name: _____ Last Name: Clark

Address: 911 Netherland Dr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Professor/Administrator Employer: Middle Tennessee State University

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/29/2026 Aggregate This Election: $ $50.00

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: $ $7,009.30

(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: SEAN GILLILAND

2. Reporting Period: Start Date: 1/1/2026 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: TN Democratic Party **OR**

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

Address: 4900 Centennial Blvd City: Nashville State: TN Zip Code: 37209

Purpose of Expenditure: VoteBuilder Access

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 3/16/2026

Business or Organization Name: ActBlue **OR**

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

Address: PO Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: ActBlue Fees

Amount of Expenditure: $ $17.86 Date of Expenditure: $ 3/31/2026

Business or Organization Name: DonorBox **OR**

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

Address: 1520 Belle View Blvd #4106 City: Alexandria State: VA Zip Code: 22307

Purpose of Expenditure: DonorBox Fees

Amount of Expenditure: $ $91.72 Date of Expenditure: $ 3/31/2026

Business or Organization Name: Stripe **OR**

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

Address: 354 Oyster Point Blvd City: South San Francisco State: CA Zip Code: 94080

Purpose of Expenditure: Stripe Fees

Amount of Expenditure: $ $130.82 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: $ _____

Total Expenditures: $ $340.40

(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.)