



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/26 2.a. Candidate or Committee Name: EMILY O'DONNELL

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

4. Campaign Address: _____
City: RED BANK State: TN Zip Code: 37415 Phone: 423-443-9915

5. Candidate Home Address: SAME AS ABOVE
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: emilyahiguist@gmail.com

6. Office Sought: (include district number, if applicable) RED BANK JUDGE

7. Name of Political Treasurer (may be candidate): MC WYATT (MARGARET WYATT)
Political Treasurer Email Address: charli.wyatt@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: 6/26/26 End Date: 6/30/26

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.

Emily O'Donnell 7/10/26 _____ 7/10/26
Candidate Signature Date Political Treasurer Signature Date
[Signature] 7/10/26 [Signature] 7/10/26
Witness Signature Date Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$	<u>0</u>
b. Total Receipts This Period	\$	<u>100.00</u>
c. Total Disbursements This Period	\$	<u>0</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>100.00</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: EMILY O'DONNELL

14. Reporting Period: Start Date: _____ End Date: 6/30/26

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) \$ 100.00
- 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.) \$ 100.00

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ _____
(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.) \$ 0

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.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: EMILY O'DONNELL
2. Reporting Period: Start Date: _____ End Date: 6/30/26
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: EMILY Middle Name: AHLQUIST Last Name: O'DONNELL
Address: [REDACTED] City: RED BANK State: TN Zip Code: 37415
Occupation: ATTORNEY Employer: LEGAL AID OF EAST TENNESSEE
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 6/26/26 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: \$ _____

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: \$ _____

(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.)