



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/9/2026 2.a. Candidate or Committee Name: WILLIAM MONK
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 108-1 OREGON ST
City: JOHNSON CITY State: TN Zip Code: 37601 Phone: 4239264035
5. Candidate Home Address: 108-1 Oregon Street
City: JOHNSON CITY State: TN Zip Code: 37601 Phone: 4239264035
Candidate Email Address: wilmonk74@gmail.com
6. Office Sought: (include district number, if applicable) Gen Sessions Court Judge
7. Name of Political Treasurer (may be candidate): STEPHANIE RADFORD
Political Treasurer Email Address: stephaniejradford@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: 4/27/2026 End Date: 6/30/2026
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

D84C-4C8F-B0D3-118C
07/09/26 - 11:08 AM

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$18,719.36</u>
b. Total Receipts This Period	\$ <u>\$4,000.00</u>
c. Total Disbursements This Period	\$ <u>\$15,581.85</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$7,137.51</u>
e. Total Loans Outstanding	\$ <u>\$35,000.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: WILLIAM MONK

14. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026

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) \$ \$4,000.00
- 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.) \$ \$4,000.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$15,581.85
(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.)..... \$ \$15,581.85

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$350.00
- c. Total In-Kind Contributions Received This Period \$ \$350.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
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: Robert Middle Name: _____ Last Name: Lincoln
Address: 102 Hidden Forest Ct. City: Jonesborough State: TN Zip Code: 37659
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Jerry Middle Name: Radford Last Name: Radford
Address: 410 Telford New Victory Rd. City: Telford State: TN Zip Code: 37690
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Marcos and Ramsey Middle Name: _____ Last Name: Garza
Address: 474 Cherokee Blvd. City: Knoxville State: TN Zip Code: 37919
Occupation: Lawyer Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**
First Name: Lawrence Middle Name: _____ Last Name: Counts
Address: 604 Crestview Drive City: Johnson City State: TN Zip Code: 37604
Occupation: Lawyer Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$600.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$600.00

Total Contributions: \$ \$3,500.00
(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: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: David Middle Name: Kent Last Name: Harris
Address: 184 Ward Rowe Road City: Limestone State: TN Zip Code: 37681
Occupation: Self employed Employer: Self
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 5/5/2026 Aggregate This Election: \$ \$500.00

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: \$ \$4,000.00
(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: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
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: _____ **OR**

First Name: STEPHANIE Middle Name: _____ Last Name: Radford

Address: 410 Telford New Victory Rd. City: Telford State: TN Zip Code: 37690

Occupation: Retired Employer: Retired

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

In-Kind Contribution Value: \$ \$150.00 In-Kind Contribution Date: 5/30/2026 Aggregate This Election: \$ \$150.00

Description of In-Kind Contribution: Dinner for campaign workers at Black Olive

Business or Organization Name: _____ **OR**

First Name: STEPHANIE Middle Name: _____ Last Name: Radford

Address: 410 Telford New Victory Rd. City: Telford State: TN Zip Code: 37690

Occupation: Retired Employer: Retired

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

In-Kind Contribution Value: \$ \$200.00 In-Kind Contribution Date: 5/5/2026 Aggregate This Election: \$ \$200.00

Description of In-Kind Contribution: Food donation for watch party

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: \$ \$350.00

(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: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
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: Texting for Less **OR**

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

Address: 354 State Street City: Hackensack State: NJ Zip Code: 07601

Purpose of Expenditure: Blast text to voters

Amount of Expenditure: \$ \$492.91 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Grass Roots Consultation **OR**

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

Address: 2620 North Australian Avenue Sut City: West Palm Beach State: FL Zip Code: 33407

Purpose of Expenditure: Consulting

Amount of Expenditure: \$ \$372.00 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Texting for Less Texting blast to voters **OR**

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

Address: 354 State Street City: Hackensack State: NJ Zip Code: 07601

Purpose of Expenditure: Texting Blast to voters

Amount of Expenditure: \$ \$452.84 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: _____ **OR**

First Name: Selena Middle Name: Haye Last Name: Hayes

Address: 148 Simmons Ridge City: Johnson City State: TN Zip Code: 37604

Purpose of Expenditure: Snacks for workers on Election Day

Amount of Expenditure: \$ \$60.00 Date of Expenditure: \$ 5/5/2026

Business or Organization Name: Texting for Less **OR**

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

Address: 354 State Street City: Hackensack State: NJ Zip Code: 07601

Purpose of Expenditure: Text Blast for voters

Amount of Expenditure: \$ \$564.26 Date of Expenditure: \$ 4/27/2026

Total Expenditures: \$ \$1,942.01

(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: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,942.01

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: Smart Point **OR**

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

Address: 2750 1st Avenue S. Apt. 304 City: Altoona State: IA Zip Code: 50009

Purpose of Expenditure: Walking App

Amount of Expenditure: \$ \$550.00 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Foster **OR**

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

Address: 146 N Lincoln Avenue City: Jonesborough State: TN Zip Code: 37659

Purpose of Expenditure: Sians

Amount of Expenditure: \$ \$1,653.46 Date of Expenditure: \$ 4/28/2026

Business or Organization Name: Mailworks **OR**

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

Address: 320 Wesley Street City: Johnson City State: TN Zip Code: 37601

Purpose of Expenditure: Mailer mailed out

Amount of Expenditure: \$ \$11,436.38 Date of Expenditure: \$ 4/28/2026

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: \$ _____

Total Expenditures: \$ \$15,581.85

(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: WILLIAM MONK
2. Reporting Period: Start Date: 4/27/2026 End Date: 6/30/2026
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: _____ **OR**

First Name: William Middle Name: _____ Last Name: Monk

Address: 108-1 Oregon Street City: Johnson City State: TN Zip Code: 37601

Outstanding Loan Balance (Beginning) \$ \$35,000.00

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$35,000.00

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

Date of Loan: 4/4/2026

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) \$ \$35,000.00

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$35,000.00