



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/2/2026 2.a. Candidate or Committee Name: Cathy Watts
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 2222 River Rock Xing
City: Murfreesboro State: TN Zip Code: 37128 Phone: 6157968610
5. Candidate Home Address: 2222 River Rock Crossing
City: Murfreesboro State: TN Zip Code: 37128 Phone: 6157968610
Candidate Email Address: cathyforruco16@gmail.com
6. Office Sought: (include district number, if applicable) County Commission District #16
7. Name of Political Treasurer (may be candidate): Cathy Watts
Political Treasurer Email Address: cathyforruco16@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: 4/26/2026 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 _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>1,564.78</u>
b. Total Receipts This Period	\$ <u>1,369.85</u>
c. Total Disbursements This Period	\$ <u>1,615.40</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>1,319.23</u>
e. Total Loans Outstanding	\$ <u>100.00</u>
f. Total Obligations Outstanding	\$ <u>0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Cathy Watts

14. Reporting Period: Start Date: 4/26/2026 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) \$ \$1,369.85
- 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.) \$ \$1,369.85

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,615.40
(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.)..... \$ \$1,615.40

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$1,228.42
- c. Total In-Kind Contributions Received This Period \$ \$1,228.42

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 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: Cabrina Middle Name: _____ Last Name: Dieters

Address: 1204 Harvest Grove Blvd 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: \$ \$30.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$30.00

Business or Organization Name: _____ **OR**

First Name: Helen Middle Name: _____ Last Name: Beaty

Address: 226 Hillside Ct City: Murfreesboro State: TN Zip Code: 37130

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: 4/26/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Elizabeth Middle Name: _____ Last Name: Smith

Address: 326 E Bell St City: Murfreesboro State: TN Zip Code: 37130

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: 4/26/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Patricia Middle Name: Casey Last Name: Daley

Address: P O Box 2616 City: Murfreesboro State: TN Zip Code: 37133

Occupation: Photographer Employer: Self

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$230.00

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$230.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Teresa Middle Name: _____ Last Name: Quance

Address: 514 Winfrey Dr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Psychotherapist Employer: Self

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Kelly Middle Name: _____ Last Name: Messerly

Address: 207 Eclipse Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Teacher Employer: RCS

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Kimberli Middle Name: _____ Last Name: Rose-Jensen

Address: 224 Quail Ridge Rd City: Smyrna State: TN Zip Code: 37167

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Ryan Middle Name: _____ Last Name: Foster

Address: 755 St Andrews Dr 27-101 City: Murfreesboro State: TN Zip Code: 37128

Occupation: Bus Driver Employer: Davis Bus Services

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$10.00

Total Contributions: \$ \$295.00

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$295.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Holly Middle Name: _____ Last Name: Anderson
Address: 425 Ossabaw Dr City: Murfreesboro State: TN Zip Code: 37128
Occupation: Customer Service Employer: Treasury
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Arnold Middle Name: _____ Last Name: White
Address: 405 Ross Dr City: Smyrna State: TN Zip Code: 37167
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: 4/26/2026 Aggregate This Election: \$ \$120.00

Business or Organization Name: _____ **OR**
First Name: Jacob Middle Name: _____ Last Name: Bryan
Address: 400 Bains Rd City: Hillsboro State: TN Zip Code: 37342
Occupation: Design Technician Employer: Middle TN Electric
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 4/27/2026 Aggregate This Election: \$ \$50.00

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 Creations
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$5.00 Date of Contribution: 4/30/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$425.00
(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$425.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sherri Middle Name: _____ Last Name: Harris

Address: 1206 Parkview Terr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Registered Nurse Employer: MVAMC

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/1/2026 Aggregate This Election: \$ \$540.65

Business or Organization Name: _____ **OR**

First Name: Angelique Middle Name: _____ Last Name: Golden

Address: 509 Iris Ave City: Murfreesboro State: TN Zip Code: 37128

Occupation: Veterans Service Rep Employer: VA

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 5/1/2026 Aggregate This Election: \$ \$60.00

Business or Organization Name: _____ **OR**

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

Address: 2322 Richmond Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Organizer Employer: CLASI

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

Amount of Contribution: \$ \$16.00 Date of Contribution: 5/12/2026 Aggregate This Election: \$ \$16.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Spry

Address: 2314 Spaulding Cir City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 5/13/2026 Aggregate This Election: \$ \$5.00

Total Contributions: \$ \$506.00

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$506.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Sullivan

Address: 1170 Gaylord Ct City: Murfreesboro State: TN Zip Code: 37130

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: 5/16/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: Ashley Benkarski for 21 **OR**

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

Address: 2322 Richmond Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Campaign Account Employer: Campaign Account

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/20/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Darlene Middle Name: _____ Last Name: Neal

Address: 2620 New Salem Hwy A7 City: Murfreesboro State: TN Zip Code: 37128

Occupation: Community Organizer Employer: SURJ

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/17/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Lasater

Address: 705 Cason Lane City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/16/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$831.00

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$831.00

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 Creations

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$5.00

Business or Organization Name: _____ **OR**

First Name: Sherri Middle Name: _____ Last Name: Harris

Address: 1206 Parkview Terrace City: Murfreesboro State: TN Zip Code: 37130

Occupation: Registered Nurse Employer: MVAMC

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/1/2026 Aggregate This Election: \$ \$137.77

Business or Organization Name: _____ **OR**

First Name: Angelique Middle Name: _____ Last Name: Golden

Address: 509 Iris Ave City: Murfreesboro State: TN Zip Code: 37128

Occupation: Veterans Service Rep Employer: VA

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 6/1/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**

First Name: Judy Middle Name: _____ Last Name: Posvic

Address: 3224 Clemons Cir City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 6/3/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$921.00

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$921.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

Address: 2322 Richmond Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Organizer Employer: CLASI

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

Amount of Contribution: \$ \$16.00 Date of Contribution: 6/12/2026 Aggregate This Election: \$ \$32.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Spry

Address: 2314 Spaulding Cir City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$4.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$9.00

Business or Organization Name: _____ **OR**

First Name: Darlene Middle Name: _____ Last Name: Neal

Address: 2620 New Salem Hwy A7 City: Murfreesboro State: TN Zip Code: 37128

Occupation: Community Organizer Employer: SURJ

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$60.00

Business or Organization Name: _____ **OR**

First Name: Laura Middle Name: _____ Last Name: Andreson

Address: 1608 Twin Square Way City: Franklin State: TN Zip Code: 37067

Occupation: Physician Employer: Self

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

Amount of Contribution: \$ \$2.38 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$2.38

Total Contributions: \$ \$953.38

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$953.38

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Watson

Address: 2209 Kline Ave City: Nashville State: TN Zip Code: 37211

Occupation: Engineer Employer: Engineering Solutions

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

Amount of Contribution: \$ \$2.38 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$2.38

Business or Organization Name: _____ **OR**

First Name: Katrina Middle Name: _____ Last Name: Green

Address: 407 Bushnell St City: Nashville State: TN Zip Code: 37206

Occupation: Doctor Employer: Em Care

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

Amount of Contribution: \$ \$4.55 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$4.55

Business or Organization Name: _____ **OR**

First Name: Debra Middle Name: _____ Last Name: Goad

Address: 1401 Harrison Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Admin Employer: ESI

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

Amount of Contribution: \$ \$4.54 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$4.54

Business or Organization Name: _____ **OR**

First Name: Joni Middle Name: _____ Last Name: Cochran

Address: 1071 Holland Ridge Way City: Lebanon State: TN Zip Code: 37090

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 6/24/2026 Aggregate This Election: \$ \$5.00

Total Contributions: \$ \$969.85

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$969.85

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Helen Middle Name: _____ Last Name: Beaty

Address: 226 Hillside Ct City: Murfreesboro State: TN Zip Code: 37130

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: 6/25/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Sullivan

Address: 1170 Gaylord Ct City: Murfreesboro State: TN Zip Code: 37130

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: 6/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Chloe Middle Name: _____ Last Name: Cerutti

Address: 2841 Vicwood Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$250.00

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: \$ \$1,369.85

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 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: Sherri Middle Name: _____ Last Name: Harris

Address: 1206 Parkview Terr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Nurse Employer: VA

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

In-Kind Contribution Value: \$ \$190.65 In-Kind Contribution Date: 4/26/2026 Aggregate This Election: \$ \$490.65

Description of In-Kind Contribution: Food for Campaign Kickoff

Business or Organization Name: Oakland's Mansion **OR**

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

Address: 900 N Maney Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Not Employed Employer: Not Employed

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

In-Kind Contribution Value: \$ \$150.00 In-Kind Contribution Date: 4/26/2026 Aggregate This Election: \$ \$150.00

Description of In-Kind Contribution: Venue for Campaign Kickoff

Business or Organization Name: The Jake Leg Stompers **OR**

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

Address: P O Box 2214 City: Murfreesboro State: TN Zip Code: 37133

Occupation: Band Employer: The Jake Leg Stompers

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

In-Kind Contribution Value: \$ \$800.00 In-Kind Contribution Date: 4/26/2026 Aggregate This Election: \$ \$800.00

Description of In-Kind Contribution: Musical Entertainment for Campaign Kickoff

Business or Organization Name: _____ **OR**

First Name: Sherri Middle Name: _____ Last Name: Harris

Address: 1206 Parkview Terr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Nurse Employer: VA

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

In-Kind Contribution Value: \$ \$87.77 In-Kind Contribution Date: 5/17/2026 Aggregate This Election: \$ \$87.77

Description of In-Kind Contribution: Stamp donation

Total In-Kind Contributions: \$ \$1,228.42

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 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: Switchboard **OR**

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

Address: PO Box 33485 City: Washington State: DC Zip Code: 20033

Purpose of Expenditure: Texting

Amount of Expenditure: \$ \$120.97 Date of Expenditure: \$ 5/6/2026

Business or Organization Name: Canva **OR**

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

Address: 3212 E Cesar Chavez St City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Postcards

Amount of Expenditure: \$ \$177.80 Date of Expenditure: \$ 5/8/2026

Business or Organization Name: Amazon **OR**

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

Address: 440 Terry Ave N City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Envelopes and labels

Amount of Expenditure: \$ \$14.56 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Office Depot **OR**

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

Address: 620 Ridgely Road City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$35.47 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Canva **OR**

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

Address: 3212 E Cesar Chavez City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Software Subscription

Amount of Expenditure: \$ \$19.76 Date of Expenditure: \$ 5/12/2026

Total Expenditures: \$ \$368.56

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$368.56

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: Office Depot **OR**

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

Address: 620 Ridgely Road City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$14.48 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Amazon **OR**

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

Address: 440 Terry Ave N City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Labels

Amount of Expenditure: \$ \$13.72 Date of Expenditure: \$ 5/14/2026

Business or Organization Name: CustomInk **OR**

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

Address: 1640 Boro Pl Ste301 City: Tysons State: VA Zip Code: 22102

Purpose of Expenditure: Pride T Shirts

Amount of Expenditure: \$ \$61.91 Date of Expenditure: \$ 5/14/2026

Business or Organization Name: Canva **OR**

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

Address: 3212 E Cesar Chavez St City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Door Hangers

Amount of Expenditure: \$ \$208.53 Date of Expenditure: \$ 5/17/2026

Business or Organization Name: eBay **OR**

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

Address: 2025 Hamilton Ave City: San Jose State: CA Zip Code: 95125

Purpose of Expenditure: stamps

Amount of Expenditure: \$ \$307.74 Date of Expenditure: \$ 5/24/2026

Total Expenditures: \$ \$974.94

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$974.94

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: HomeGoods OR

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

Address: 484 N Thompson Ln City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: paper goods for event

Amount of Expenditure: \$ \$26.30 Date of Expenditure: \$ 6/5/2026

Business or Organization Name: Kroger OR

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

Address: 2449 Old Fort Pky City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Decorations for event

Amount of Expenditure: \$ \$13.14 Date of Expenditure: \$ 6/5/2026

Business or Organization Name: Middle Ground Brewing Co OR

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

Address: 2476 Old Fort Pky City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Food for event

Amount of Expenditure: \$ \$64.28 Date of Expenditure: \$ 6/5/2026

Business or Organization Name: RuCo Pride OR

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

Address: 906 Ridgely Rd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Sponsorship

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 6/5/2026

Business or Organization Name: Switchboard OR

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

Address: PO Box 33485 City: Washington State: DC Zip Code: 20033

Purpose of Expenditure: Texting

Amount of Expenditure: \$ \$187.75 Date of Expenditure: \$ 6/8/2026

Total Expenditures: \$ \$1,316.41

(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: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,316.41

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: Canva OR

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

Address: 3212 E Cesar Chavez St City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Software Subscription

Amount of Expenditure: \$ \$19.76 Date of Expenditure: \$ 6/12/2026

Business or Organization Name: AGE Graphics OR

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

Address: 678 Collins Rd City: Little Hocking State: OH Zip Code: 45742

Purpose of Expenditure: Sians

Amount of Expenditure: \$ \$220.00 Date of Expenditure: \$ 6/24/2026

Business or Organization Name: Etsy OR

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

Address: 117 Adams St City: Brooklyn State: NY Zip Code: 11201

Purpose of Expenditure: stickers

Amount of Expenditure: \$ \$35.11 Date of Expenditure: \$ 6/26/2026

Business or Organization Name: ActBlue OR

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

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Transaction Fees Aggregate

Amount of Expenditure: \$ \$7.39 Date of Expenditure: \$ 6/30/2026

Business or Organization Name: Stripe OR

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

Address: 354 Oyster Pt Blvd City: S San Francisco State: CA Zip Code: 94080

Purpose of Expenditure: Transaction Fees Aggregate

Amount of Expenditure: \$ \$16.73 Date of Expenditure: \$ 6/30/2026

Total Expenditures: \$ \$1,615.40

(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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Cathy Watts
2. Reporting Period: Start Date: 4/26/2026 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: Cathy Middle Name: _____ Last Name: Watts

Address: 2222 River Rock Crossing City: Murfreesboro State: TN Zip Code: 37128

Outstanding Loan Balance (Beginning) \$ \$100.00

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$100.00

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

Date of Loan: 10/31/2025

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: \$ \$0.00

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) \$ \$100.00

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$100.00