CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 1/30/2026 2.a. Candidate or Committee Name: Romel McMurry

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

4. Campaign Address: 1925 Cicero Dr

City: Murfreesboro State: TN Zip Code: 37129 Phone: _____

5. Candidate Home Address: 1925 Cicero Dr

City: Murfreesboro State: TN Zip Code: 37129 Phone: 6156177262

Candidate Email Address: Lemor2004@gmail.com

6. Office Sought: (include district number, if applicable) County Commission District #19

7. Name of Political Treasurer (may be candidate): Romel McMurry

Political Treasurer Email Address: Lemor2004@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: 7/1/2025 End Date: 1/15/2026

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.

92EF-4A7B-9EAD-1D4(
01/30/26 - 5:03 PM

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $12,152.22
b.	Total Receipts This Period	$ $4,125.00
c.	Total Disbursements This Period	$ $1,566.06
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $14,711.16
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Romel McMurry

14. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

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) ..... $ $4,125.00

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.) ..... $ $4,125.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,566.06
(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.)..... $ $1,566.06

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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

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: Teheira Middle Name: _____ Last Name: Wood

Address: 911 Tapoco Ct City: Smyrna State: TN Zip Code: 37167

Occupation: Educator Employer: RCS

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

Amount of Contribution: $ $150.00 Date of Contribution: 8/9/2025 Aggregate This Election: $ $150.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Shirley

Address: 5089 Lytle Creek Rd City: Murfreesboro State: TN Zip Code: 37127

Occupation: Owner Employer: Family Pet Health

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

Amount of Contribution: $ $75.00 Date of Contribution: 11/3/2025 Aggregate This Election: $ $75.00

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Harrell

Address: 4509 Mordecai Ave City: Murfreesboro State: TN Zip Code: 37128

Occupation: Manager Employer: Unknown

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

Amount of Contribution: $ $100.00 Date of Contribution: 1/12/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Matthew Middle Name: _____ Last Name: Taylor

Address: 6901 Dismal Hollow Rd City: Christiana State: TN Zip Code: 37037

Occupation: Vice President Employer: SEC, Inc

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

Amount of Contribution: $ $1,500.0 Date of Contribution: 1/12/2026 Aggregate This Election: $ $1,500.0

Total Contributions: $ $1,825.00

(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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,825.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Joel Middle Name: _____ Last Name: Bigelow

Address: 853 N Church St City: Murfreesboro State: TN Zip Code: 37130

Occupation: Development Coordinator Employer: CUD

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

Amount of Contribution: $$250.00 Date of Contribution: 1/15/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Jeff Middle Name: _____ Last Name: Turner

Address: 3559 Coleman Hill Rd City: Rockvale State: TN Zip Code: 37153

Occupation: CEO Employer: Turner Machine Company

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

Amount of Contribution: $$250.00 Date of Contribution: 1/15/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Dana Middle Name: _____ Last Name: Womack

Address: 906 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37120

Occupation: Agent Employer: State Farm

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

Amount of Contribution: $$100.00 Date of Contribution: 9/24/2025 Aggregate This Election: $ $100.00

Business or Organization Name: MTAR **OR**

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

Address: 311 Butler Dr City: Murfreesboro State: TN Zip Code: 37127

Occupation: n/a Employer: n/a

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

Amount of Contribution: $$500.00 Date of Contribution: 11/5/2025 Aggregate This Election: $ $500.00

Total Contributions: $ $2,925.00

(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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,925.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Busey

Address: 317 N Walnut St City: Murfreesboro State: TN Zip Code: 37130

Occupation: Agent Employer: State Farm

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

Amount of Contribution: $$1,000.0 Date of Contribution: 1/10/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Randall Middle Name: _____ Last Name: Bennett

Address: 3663 Shores Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: Retired

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

Amount of Contribution: $$100.00 Date of Contribution: 1/11/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Leslyne Middle Name: _____ Last Name: Watkins

Address: unknown City: Lebanon State: TN Zip Code: 37087

Occupation: Retired Employer: Retired

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

Amount of Contribution: $$100.00 Date of Contribution: 10/1/2025 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: $ _____

Total Contributions: $ $4,125.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

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: MTSU BRAA **OR**

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

Address: 2650 Middle TN Blvd., G102 City: Murfreesboro State: TN Zip Code: 37132

Purpose of Expenditure: Donation

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 7/8/2025

Business or Organization Name: Walmart **OR**

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

Address: 2000 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: School Supplies for Heart to Heart Back to School Backpacks Giveaway

Amount of Expenditure: $ $92.19 Date of Expenditure: $ 8/4/2025

Business or Organization Name: Website Builder **OR**

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

Address: unknown City: Burlington State: ME Zip Code: 37087

Purpose of Expenditure: Website creation

Amount of Expenditure: $ $126.96 Date of Expenditure: $ 8/4/2025

Business or Organization Name: GoDaddy.com **OR**

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

Address: unknown City: Tempe State: AZ Zip Code: 11111

Purpose of Expenditure: Domain name purchase

Amount of Expenditure: $ $52.36 Date of Expenditure: $ 8/4/2025

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fort Parkway City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Business Cards

Amount of Expenditure: $ $27.43 Date of Expenditure: $ 8/25/2025

Total Expenditures: $ $398.94

(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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $398.94

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: Amazon **OR**

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

Address: unknown City: unknown State: TN Zip Code: 11111

Purpose of Expenditure: Envelopes

Amount of Expenditure: $ $10.96 Date of Expenditure: $ 9/16/2025

Business or Organization Name: Glenn Turkey Giveaway-Go Fund Me **OR**

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

Address: 500 Arguello St City: Redwood City State: CA Zip Code: 94063

Purpose of Expenditure: Donation for Turkey giveaway

Amount of Expenditure: $ $35.00 Date of Expenditure: $ 10/14/2025

Business or Organization Name: Domestic Violence & Sexual Assault Center **OR**

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

Address: 1423 Kensington Square Ct City: Murfreesboro State: TN Zip Code: 37120

Purpose of Expenditure: Donation

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 10/24/2025

Business or Organization Name: St Thomas Rutherford Foundation **OR**

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

Address: 1700 Medical Center Pkwy City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Donation

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 10/27/2025

Business or Organization Name: Habitat for Humanity Rutherford County **OR**

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

Address: 850 Dr. Martin Luther King Jr. Blvc City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Donation

Amount of Expenditure: $ $30.00 Date of Expenditure: $ 11/3/2025

Total Expenditures: $ $624.90

(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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $624.90

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: Read to Succeed **OR**

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

Address: 910 A Ridgely Rd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Donation

Amount of Expenditure: $ $150.00 Date of Expenditure: $ 11/6/2025

Business or Organization Name: Read to Succeed **OR**

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

Address: 910 A Ridgely Rd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Donation

Amount of Expenditure: $ $205.00 Date of Expenditure: $ 11/12/2025

Business or Organization Name: Postal Annex **OR**

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

Address: 4183 Franklin Rd. Suite B1 #19 City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: PO Box rental

Amount of Expenditure: $ $96.00 Date of Expenditure: $ 11/18/2025

Business or Organization Name: Single Tree BBQ **OR**

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

Address: 2805 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Thanksgiving Community Dinner Food

Amount of Expenditure: $ $204.62 Date of Expenditure: $ 11/28/2025

Business or Organization Name: Rutherford County Elections Commission **OR**

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

Address: 426 E. Vine St City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Data

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 12/24/2025

Total Expenditures: $ $1,330.52

(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: Romel McMurry

2. Reporting Period: Start Date: 7/1/2025 End Date: 1/15/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,330.52

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: Best Buy **OR**

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

Address: 2615 Medical Center Pkwy., Suite City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Pinter Ink

Amount of Expenditure: $ $25.34 Date of Expenditure: $ 1/2/2026

Business or Organization Name: MLK Breakfast-Murfreesboro NAACP **OR**

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

Address: PO Box 371 City: Murfreesboro State: TN Zip Code: 37133

Purpose of Expenditure: Donation

Amount of Expenditure: $ $103.20 Date of Expenditure: $ 1/5/2026

Business or Organization Name: MLK Breakfast-Murfreesboro NAACP **OR**

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

Address: PO Box 371 City: Murfreesboro State: TN Zip Code: 37133

Purpose of Expenditure: Ad in program

Amount of Expenditure: $ $107.00 Date of Expenditure: $ 1/7/2026

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: $ $1,566.06

(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.)