



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/28/2026 2.a. Candidate or Committee Name: Julie Wishing
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 962 Alford Rd
City: Murfreesboro State: TN Zip Code: 37129 Phone: _____
5. Candidate Home Address: 962 Alford Road
City: Murfreesboro State: TN Zip Code: 37129 Phone: 6152936543
Candidate Email Address: juliewishing@gmail.com
6. Office Sought: (include district number, if applicable) School Board, Zone 7
7. Name of Political Treasurer (may be candidate): Peter Taylor
Political Treasurer Email Address: pctpgf@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: 2/19/2026 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 _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$12,175.00</u>
c. Total Disbursements This Period	\$ <u>\$4,589.65</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$7,585.35</u>
e. Total Loans Outstanding	\$ <u>\$5,000.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Julie Wishing

14. Reporting Period: Start Date: 2/19/2026 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) \$ \$8,675.00
- c. Loans Received This Reporting Period..... \$ \$3,500.00
- 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.) \$ \$12,175.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,589.65
(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.)..... \$ \$4,589.65

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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 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: Anselem Middle Name: _____ Last Name: Wishing

Address: 962 Alford Rd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Airline Captain Employer: American Airlines

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 3/1/2026 Aggregate This Election: \$ \$5.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Kinard

Address: 1074 Middle TN Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Dentist Employer: John P Kinard DDS

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 3/5/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Tim Middle Name: _____ Last Name: Tidwell

Address: 7947 E Gum Rd City: Murfreesboro State: TN Zip Code: 37127

Occupation: Contractor Employer: Self Employed

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/4/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Cynthia Middle Name: _____ Last Name: Peltier

Address: 1314 Shagbark Tr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Decorator Employer: Self Employed

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/6/2026 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$1,255.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,255.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Amber Middle Name: _____ Last Name: Golden

Address: 1812 Golden Vally Dr City: Christiana State: TN Zip Code: 37037

Occupation: Nurse Employer: Evicore Health Care

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 3/6/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**

First Name: Lee Middle Name: _____ Last Name: Kennedy

Address: 1533 Ashlawn Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 2/18/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Zeline Middle Name: _____ Last Name: Wishing

Address: 1927 Memorial Blvd 263 City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 2/23/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: Michelle Middle Name: _____ Last Name: Molitor

Address: 270 Faldo Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Housewife Employer: None

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 3/9/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$2,725.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,725.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Laurie Middle Name: _____ Last Name: Waldon

Address: 500 Ellie Lee Dr City: Smyrna State: TN Zip Code: 37167

Occupation: Homemaker Employer: None

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/8/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Casie Middle Name: _____ Last Name: Luna

Address: 7700 Nolensville Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Self Employed Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/10/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Bob Middle Name: _____ Last Name: Graham

Address: 430 Brinkley Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/16/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Gallagher

Address: PO BOX 3661 City: Brentwood State: TN Zip Code: 37024

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/16/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$3,075.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,075.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kimberly Middle Name: _____ Last Name: Gauthier

Address: 3798 E Compton Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Housewife Employer: None

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/16/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Ronda Middle Name: _____ Last Name: Hawkins

Address: 433 Brinkley Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Realtor Employer: Self Employed

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/20/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Bob Middle Name: _____ Last Name: Graham

Address: 430 Brinkley Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Gallagher

Address: PO BOX 3661 City: Brentwood State: TN Zip Code: 37024

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$300.00

Total Contributions: \$ \$3,975.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,975.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Ted Middle Name: _____ Last Name: Petty

Address: 1533 Ashlawn Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Bobby Middle Name: _____ Last Name: Givens Sr

Address: 4716 Burnt Knob Rd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Gayle Middle Name: _____ Last Name: Fisher

Address: 4861 Veterans Pkw City: Murfreesboro State: TN Zip Code: 37128

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Hallie Middle Name: _____ Last Name: McNew

Address: 5711 Roxbury Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Nurse Employer: Ascension Medical Group

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,475.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,475.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Oliver Middle Name: _____ Last Name: Owens

Address: 2586 Safari Camp Rd City: Lebanon State: TN Zip Code: 37090

Occupation: Utility Work Employer: Self Employed

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Laura Middle Name: _____ Last Name: West

Address: 3121 Landview Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Housewife Employer: None

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

Amount of Contribution: \$ \$1,500.00 Date of Contribution: 3/23/2026 Aggregate This Election: \$ \$1,500.00

Business or Organization Name: _____ **OR**

First Name: Trisha Middle Name: _____ Last Name: Rintoul

Address: 8825 Rhineriver Av City: Fountain Valley State: CA Zip Code: 92708

Occupation: Airline Captain Employer: American Airlines

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/24/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Milbrey Middle Name: _____ Last Name: Campbell

Address: 1726 Hanymes Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/27/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$6,775.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,775.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Moore

Address: 2149 Aberdeen Cir City: Murfreesboro State: TN Zip Code: 37130

Occupation: Compensation Mgr Employer: SRM

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/28/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Tina Middle Name: _____ Last Name: Taque

Address: 2019 Ivy Glen Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Flight Attendant Employer: SW Airlines

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Betsy Middle Name: _____ Last Name: Poole

Address: 2910 Standingbear Way City: Murfreesboro State: TN Zip Code: 37127

Occupation: Retired Employer: None

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/30/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Shelly Middle Name: _____ Last Name: Molitor

Address: 302 Faldo Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Housewife Employer: None

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

Amount of Contribution: \$ \$1,500.0 Date of Contribution: 3/30/2026 Aggregate This Election: \$ \$1,500.0

Total Contributions: \$ \$8,525.00

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,525.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Susan Middle Name: _____ Last Name: Quesenberry
Address: 1792 Breckenridge Dr City: Murfreesboro State: TN Zip Code: 37129
Occupation: Retired Employer: None
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 3/30/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Harshawardhan Middle Name: _____ Last Name: Deshpande
Address: 4202 Crowne Brook Cir City: Franklin State: WA Zip Code: 37067
Occupation: Contractor Employer: Self Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 3/31/2026 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: \$ \$8,675.00
(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 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: Big Frog Custom Tshirts **OR**

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

Address: 533 Main St City: Dunedin State: FL Zip Code: 34698

Purpose of Expenditure: T-Shirts

Amount of Expenditure: \$ \$834.10 Date of Expenditure: \$ 2/24/2026

Business or Organization Name: Harlan Clark **OR**

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

Address: 133 Peachtree St NE City: Atlanta State: GA Zip Code: 30303

Purpose of Expenditure: Checks

Amount of Expenditure: \$ \$32.31 Date of Expenditure: \$ 2/27/2026

Business or Organization Name: Signs on the Cheap **OR**

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

Address: 839 Atlanta St City: Rosewell State: GA Zip Code: 30075

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$1,644.21 Date of Expenditure: \$ 3/16/2026

Business or Organization Name: Signs on the Cheap **OR**

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

Address: 839 Atlanta St City: Rosewell State: GA Zip Code: 30075

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$569.85 Date of Expenditure: \$ 3/16/2026

Business or Organization Name: The View at Fountains **OR**

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

Address: 1500 Medical Center Blvd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Campaign Venue Rent

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 3/16/2026

Total Expenditures: \$ \$3,580.47

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,580.47

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: Staples **OR**

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

Address: 1740 Old Fory PKW Old Fort Cros City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Lables

Amount of Expenditure: \$ \$59.25 Date of Expenditure: \$ 3/19/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fory PKW Old Fort Cros City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Business Cards

Amount of Expenditure: \$ \$27.43 Date of Expenditure: \$ 3/19/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fory PKW Old Fort Cros City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Post Card

Amount of Expenditure: \$ \$65.84 Date of Expenditure: \$ 3/23/2026

Business or Organization Name: Just a Splash **OR**

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

Address: 1629 Calypso Dr City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Event server

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 3/23/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fory PKW Old Fort Cros City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Post Card and Door Hangers

Amount of Expenditure: \$ \$120.70 Date of Expenditure: \$ 3/27/2026

Total Expenditures: \$ \$4,103.69

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,103.69

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: Gammastream Technologies Inc **OR**

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

Address: 2004 Commerce St City: Fairview State: OK Zip Code: 73737

Purpose of Expenditure: Door to Door Software Program

Amount of Expenditure: \$ \$49.01 Date of Expenditure: \$ 3/28/2026

Business or Organization Name: Gammastream Technologies Inc **OR**

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

Address: 2004 Commerce St City: Fairview State: OK Zip Code: 73737

Purpose of Expenditure: Door to Door Software Program

Amount of Expenditure: \$ \$39.99 Date of Expenditure: \$ 3/28/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fory PKW Old Fort Cros City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Post Cards and Door Hangers

Amount of Expenditure: \$ \$98.76 Date of Expenditure: \$ 3/30/2026

Business or Organization Name: Anedot **OR**

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

Address: 3723 Greenville Ave Ste 41002 City: Dallas State: TX Zip Code: 41002

Purpose of Expenditure: Credit card fees on donations

Amount of Expenditure: \$ \$298.20 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: \$ \$4,589.65

(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: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
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: Julie Middle Name: _____ Last Name: Wishing

Address: 962 Alford Rd City: Murfreesboro State: TN Zip Code: 37129

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$1,500.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,500.00

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

Date of Loan: 2/18/2026

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: \$ \$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) \$ _____

Loans Received \$ _____

Loan Payments \$ _____

Outstanding Loan (End) \$ _____

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Julie Wishing
2. Reporting Period: Start Date: 2/19/2026 End Date: 3/31/2026
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: Julie Middle Name: _____ Last Name: Wishing

Address: 962 Alford Rd City: Murfreesboro State: TN Zip Code: 37129

Outstanding Loan Balance (Beginning) \$ \$1,500.00

Loans Received \$ \$2,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$3,500.00

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

Date of Loan: 3/31/2026

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: \$ \$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) \$ \$1,500.00

Loans Received \$ \$3,500.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$5,000.00