



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/31/2025 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: 6156177262
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: 7/1/2024 End Date: 1/15/2025
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>\$3,900.00</u> |
| c. Total Disbursements This Period | \$ <u>\$0.00</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$3,900.00</u> |
| e. Total Loans Outstanding | \$ <u>\$0.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Romel McMurry

14. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025

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) \$ \$3,900.00
- 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.) \$ \$3,900.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ _____
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ _____

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: 7/1/2024 End Date: 1/15/2025
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: Beth Middle Name: _____ Last Name: Geer
Address: 5037 High Valley Drive City: Brentwood State: TN Zip Code: 37027
Occupation: Chief of Staff Employer: Office of Al Gore
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/14/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Carolyn Middle Name: _____ Last Name: Cox
Address: 878 Sitting Bull Xing City: Murfreesboro State: TN Zip Code: 37128
Occupation: Financial Rep Employer: Northwestern Mutual
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/14/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: John Middle Name: _____ Last Name: Foutch
Address: 708 W Main St City: Lebanon State: TN Zip Code: 37087
Occupation: CPA Employer: CPA Consulting Group
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/14/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Brandon Middle Name: _____ Last Name: Seay
Address: 803 Becham Kenneth Cir City: Smyrna State: TN Zip Code: 37167
Occupation: CEO Employer: Sharpen Clicks
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 1/14/2025 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$1,750.00
(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Margaret Middle Name: _____ Last Name: Bone
Address: 2145 Carthage Hwy City: Lebanon State: TN Zip Code: 37087
Occupation: Executive Director Employer: Our Sisters Keeper
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**
First Name: Cookie Middle Name: _____ Last Name: Pickett
Address: 88 Spickard Rd City: Lebanon State: TN Zip Code: 37090
Occupation: Secretary Employer: Hamilton Chapel Church
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: Kathleen Middle Name: _____ Last Name: Murphy
Address: 231 Orlando Ave City: Nashville State: TN Zip Code: 37209
Occupation: Associate Employer: Murphy Public Strategies
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: Bricke Middle Name: _____ Last Name: Murfree
Address: 2227 Shannon Drive City: Murfreesboro State: TN Zip Code: 37129
Occupation: Attorney Employer: Murfree & Goodman
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$300.00

Total Contributions: \$ \$2,650.00
(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Patricia Middle Name: _____ Last Name: Bryant

Address: 5611 Bridgemore Blvd City: Murfreesboro State: TN Zip Code: 37129

Occupation: Vice President Employer: HCA

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Frank Middle Name: _____ Last Name: Clayton

Address: 1270 Lasalle Dr City: Smyrna State: TN Zip Code: 37167

Occupation: IT Administrator Employer: Deloitte

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Hal Middle Name: _____ Last Name: Bone

Address: 680 Tennessee Blvd City: Lebanon State: TN Zip Code: 37087

Occupation: Owner Employer: Bone & Associates

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 1/15/2025 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: \$ _____

Total Contributions: \$ \$3,900.00

(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.)