



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/29/2026 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: 37128-4850 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: 7/1/2026 End Date: 7/27/2026
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>1,319.23</u>
b. Total Receipts This Period	\$ <u>1,316.59</u>
c. Total Disbursements This Period	\$ <u>688.00</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>1,947.82</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: 7/1/2026 End Date: 7/27/2026

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) \$ \$1,316.59
- 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.) \$ \$1,316.59

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$688.00
(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.)..... \$ \$688.00

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: Cathy Watts
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: 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: 7/1/2026 Aggregate This Election: \$ \$187.77

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: 7/1/2026 Aggregate This Election: \$ \$30.00

Business or Organization Name: _____ **OR**

First Name: Aftyn Middle Name: _____ Last Name: Behn

Address: 1215 Forest Ave City: Nashville State: TN Zip Code: 37206

Occupation: Self Employed Employer: Self Employed

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

Amount of Contribution: \$ \$2.27 Date of Contribution: 7/2/2026 Aggregate This Election: \$ \$2.27

Business or Organization Name: _____ **OR**

First Name: Temika Middle Name: _____ Last Name: Gipson

Address: 8071 Chrysalis Cove City: Shelby County State: TN Zip Code: 38016

Occupation: Management Employer: City of Memphis

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

Amount of Contribution: \$ \$2.27 Date of Contribution: 7/2/2026 Aggregate This Election: \$ \$2.27

Total Contributions: \$ \$64.54

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$64.54

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Rob Middle Name: _____ Last Name: Ratton

Address: 3343 Central Ave City: Memphis State: TN Zip Code: 38112

Occupation: Attorney Employer: Fedex

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

Amount of Contribution: \$ \$2 28 Date of Contribution: 7/2/2026 Aggregate This Election: \$ \$2.28

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 Cremations

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

Amount of Contribution: \$ \$5 00 Date of Contribution: 7/3/2026 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Vella Puff

Address: 632 Freedom Place City: Nashville State: TN Zip Code: 37209

Occupation: Recruiter Employer: Self Employed

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

Amount of Contribution: \$ \$1 14 Date of Contribution: 7/5/2026 Aggregate This Election: \$ \$1 14

Business or Organization Name: _____ **OR**

First Name: Jill Middle Name: _____ Last Name: Obrebskey

Address: 3609 Knollwood Rd City: Nashville State: TN Zip Code: 37215

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$4 54 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$4 54

Total Contributions: \$ \$77.50

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$77.50

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Galeas

Address: 251 Summit Ridge Dr City: Nashville State: TN Zip Code: 37215

Occupation: CEO Employer: Family Center

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

Amount of Contribution: \$ \$2 27 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$2 27

Business or Organization Name: _____ **OR**

First Name: Cheryl Middle Name: _____ Last Name: Mayes

Address: 1632 Bridgecrest Dr City: Antioch State: TN Zip Code: 37013

Occupation: Consultant Employer: My Toolbox Consulting

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

Amount of Contribution: \$ \$2 27 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$2 27

Business or Organization Name: _____ **OR**

First Name: Catherine Middle Name: _____ Last Name: McMullan

Address: 1120 B N 5th St City: Nashville State: TN Zip Code: 37207

Occupation: Nurse Practitioner Employer: VUMC

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

Amount of Contribution: \$ \$2 27 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$2 27

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Henderson

Address: 3510 Lylewood Rd City: Woodlawn State: TN Zip Code: 39191

Occupation: Teacher Employer: Dodea

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

Amount of Contribution: \$ \$2 28 Date of Contribution: 7/7/2026 Aggregate This Election: \$ \$2 28

Total Contributions: \$ \$86.59

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$86.59

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: 7/12/2026 Aggregate This Election: \$ \$48.00

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: 7/13/2026 Aggregate This Election: \$ \$13.00

Business or Organization Name: _____ **OR**

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

Address: 2620 New Salem Hwy A107 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: 7/17/2026 Aggregate This Election: \$ \$70.00

Business or Organization Name: _____ **OR**

First Name: Elana Middle Name: _____ Last Name: Churchill

Address: 901 N Spring St City: Murfreesboro State: TN Zip Code: 37130

Occupation: Writer Employer: AIM Institute

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/18/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$166.59

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$166.59

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Margaret Middle Name: _____ Last Name: Swann

Address: 2002 Greenland Dr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Tutor Employer: M'Boro Homeschoolers

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/19/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Ferry

Address: 1501 Belle Oaks Dr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Postal Clerk Employer: MTSU

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/23/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Ogletree

Address: 3711 Idlewood Dr City: Murfreesboro State: TN Zip Code: 37130

Occupation: Program Mgr Employer: Collins Aerospace

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/25/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Luis Middle Name: _____ Last Name: Mata

Address: 465 Humphreys St Apt 303 City: Nashville State: TN Zip Code: 37203

Occupation: Comms DED Employer: TNDP

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/26/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$916.59

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$916.59

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: \$ \$400.00 Date of Contribution: 7/17/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$1,316.59

(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: Cathy Watts
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: \$ \$73.43 Date of Expenditure: \$ 7/8/2026

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: Software

Amount of Expenditure: \$ \$19.76 Date of Expenditure: \$ 7/13/2026

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: Postcard printing

Amount of Expenditure: \$ \$129.26 Date of Expenditure: \$ 7/16/2026

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: \$ \$137.19 Date of Expenditure: \$ 7/17/2026

Business or Organization Name: Walmart OR

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

Address: 2000 Old Fort Pky City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Snacks for Event

Amount of Expenditure: \$ \$25.62 Date of Expenditure: \$ 7/17/2026

Total Expenditures: \$ \$385.26

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$385.26

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: 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: \$ \$84.42 Date of Expenditure: \$ 7/17/2026

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: Thank you cards

Amount of Expenditure: \$ \$44.68 Date of Expenditure: \$ 7/22/2026

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

Purpose of Expenditure: Canvassing

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 7/26/2026

Business or Organization Name: _____ OR

First Name: Sarah Middle Name: _____ Last Name: Farnsworth

Address: 3215 Donnacona Ct City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Video editing

Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 7/26/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Way City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: advertising aggregate

Amount of Expenditure: \$ \$24.00 Date of Expenditure: \$ 7/27/2026

Total Expenditures: \$ \$653.36

(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: 7/1/2026 End Date: 7/27/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$653.36

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: 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: \$ \$12.30 Date of Expenditure: \$ 7/27/2026

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: \$ \$22.34 Date of Expenditure: \$ 7/27/2026

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: \$ _____

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: \$ \$688.00

(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: 7/1/2026 End Date: 7/27/2026
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: 10/31/2026

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) \$ \$100.00

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$100.00