



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/27/2026 2.a. Candidate or Committee Name: Carl Bruce Boyd
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 105 Glen Echo Drive, Smyrna, TN 37167
City: Smyrna State: TN Zip Code: 37167 Phone: 6152023299
5. Candidate Home Address: 105 Glen Echo Drive, Smyrna, TN 37167
City: Smyrna State: TN Zip Code: 37167 Phone: 6152023299
Candidate Email Address: carlboyd1959@yahoo.com
6. Office Sought: (include district number, if applicable) County Commission District #12
7. Name of Political Treasurer (may be candidate): Adam Boyd
Political Treasurer Email Address: adam.boyd10@yahoo.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: 4/1/2026 End Date: 4/25/2026
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>\$863.60</u> |
| b. Total Receipts This Period | \$ <u>\$7,550.00</u> |
| c. Total Disbursements This Period | \$ <u>\$274.38</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$8,139.22</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: Carl Bruce Boyd

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) \$ \$7,550.00
- 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.) \$ \$7,550.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$274.38
(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.)..... \$ \$274.38

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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Christie Middle Name: _____ Last Name: Taylor
Address: 6901 Dismal Hollow City: Christiana State: TN Zip Code: 37037
Occupation: best effort Employer: best effort
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,500.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$1,500.00

Business or Organization Name: _____ **OR**
First Name: Jami Middle Name: _____ Last Name: Reed
Address: 11511 Independent Hill Road City: Arrington State: TN Zip Code: 37014
Occupation: best effort Employer: best effort
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,500.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$1,500.00

Business or Organization Name: _____ **OR**
First Name: Craig Middle Name: _____ Last Name: Harris
Address: 1470 Avellino Circle City: Murfreesboro State: TN Zip Code: 37130
Occupation: Business owner Employer: self employed
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: Sallie Middle Name: _____ Last Name: Zettwoch
Address: 116 Glen Echo Drive City: SMYRNA State: TN Zip Code: 37167
Occupation: Retired Employer: Retired
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$3,200.00
(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Timothy Middle Name: _____ Last Name: Piansay

Address: 401 S. Mt. Juliet Road City: Mount Juliet State: TN Zip Code: 37122-340

Occupation: best effort Employer: best effort

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Austin Middle Name: _____ Last Name: Maxwell

Address: 1503 S.E. Broad Street City: Murfreesboro State: TN Zip Code: 37130

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Ginny Middle Name: _____ Last Name: Williams

Address: 7681 West Jefferson Pike City: SMYRNA State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Ed Middle Name: _____ Last Name: Elam

Address: 1933 Central Valley Road City: Murfreesboro State: TN Zip Code: 37129

Occupation: Benefits Director Employer: Rutherford County

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,150.00

(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,150.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Lance Middle Name: _____ Last Name: Lee

Address: 266 Chaney Road City: Laverne State: TN Zip Code: 37086

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Bill Middle Name: _____ Last Name: Lee

Address: Bane Drive City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: _____ Last Name: Spence

Address: 7309 Midland Road City: Christiana State: TN Zip Code: 37037

Occupation: Dep.Sheriff Employer: Rutherford County

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Bill Middle Name: _____ Last Name: Norman

Address: 107 Glen Echo Drive City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,500.00

(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mark Middle Name: _____ Last Name: Brown

Address: 1332 Charleston Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Kerry Middle Name: _____ Last Name: Todd

Address: 119 Gwendolyn Ct. City: Lavergne State: TN Zip Code: 37086

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Marc Middle Name: _____ Last Name: Adkins

Address: 407 Liberty Drive City: Smyrna State: TN Zip Code: 37167

Occupation: Realtor Employer: Onward

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Gary Middle Name: _____ Last Name: O'neal

Address: 304 Orpha Drive City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$4,800.00

(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Gerry Middle Name: _____ Last Name: Short

Address: 7790 W. Jefferson Pike City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Stephen Middle Name: _____ Last Name: Barnett

Address: 103 Anna Belle Ct. City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Mike Middle Name: _____ Last Name: Woods

Address: 108 Glen Echo drive City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Regina Middle Name: _____ Last Name: Medlin

Address: 1010 Rosemont Terrace City: Smyrna State: TN Zip Code: 37167

Occupation: Branch Manager Employer: First Bank

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/17/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$7,000.00

(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Rufus Middle Name: _____ Last Name: Johns
Address: 69 North Lowry Street City: Smyrna State: TN Zip Code: 37167
Occupation: Business owner Employer: self employeeed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/17/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Bill Middle Name: _____ Last Name: Brown
Address: 107 Airview Drive City: Smyrna State: TN Zip Code: 37167
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/16/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Ed Middle Name: _____ Last Name: Davenport
Address: 110 Glen Echo Drive City: Smyrna State: TN Zip Code: 37167
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/16/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Marks Middle Name: _____ Last Name: Lee
Address: 3382 Valley Wood Cove City: Murfreesboro State: TN Zip Code: 37129
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/16/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$7,500.00
(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Barbara Middle Name: _____ Last Name: Peck

Address: 114 Glen Echo Drive City: Smyrna State: TN Zip Code: 37167

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/23/2026 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: \$ _____

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: \$ \$7,550.00

(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: Carl Bruce Boyd
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Barbara Potter Photography **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 612 Excalibur Court City: Smyrna State: TN Zip Code: 37167
Purpose of Expenditure: Campaign Photo Shoot
Amount of Expenditure: \$ \$274.38 Date of Expenditure: \$ 4/10/2026

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: \$ _____

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: \$ \$274.38

(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.)