



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/30/2026 2.a. Candidate or Committee Name: Marcy Ingram
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: PO Box 122
City: Collierville State: TN Zip Code: 38017 Phone: 9014826134
5. Candidate Home Address: 210 Seabiscuit Dr
City: Collierville State: TN Zip Code: 38120 Phone: 9014826134
Candidate Email Address: judgemarcygram@keepjudgeingram.com
6. Office Sought: (include district number, if applicable) Gen. Sess. Civil Ct. Judge, Div. 2
7. Name of Political Treasurer (may be candidate): Diane Lamar Withers
Political Treasurer Email Address: diannewithers@keepjudgeingram.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>\$5,746.69</u>
b. Total Receipts This Period	\$ <u>\$20,292.31</u>
c. Total Disbursements This Period	\$ <u>\$24,253.77</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,785.23</u>
e. Total Loans Outstanding	\$ <u>\$70,008.72</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Marcy Ingram

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) \$ \$2,150.00
- c. Loans Received This Reporting Period..... \$ \$18,142.31
- 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.) \$ \$20,292.31

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$24,253.77
(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.)..... \$ \$24,253.77

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: Marcy Ingram
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: Derek Middle Name: _____ Last Name: Whitlock

Address: 322 Shady Woods City: Memphis State: TN Zip Code: 38120

Occupation: Attorney Employer: Whitlock Firm

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 7/6/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Robert Middle Name: _____ Last Name: Hill

Address: 855 Bluebird Rd City: Memphis State: TN Zip Code: 38116

Occupation: Executive Director Employer: Friends After 5

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/6/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: Parcou, LLC **OR**

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

Address: 7965 Veterans Pkwy City: Millington State: TN Zip Code: 38053

Occupation: _____ Employer: _____

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 7/14/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: Calandrea Middle Name: _____ Last Name: Johnson

Address: 12748 Steadman Farms City: Keller State: TX Zip Code: 76244

Occupation: Owner Employer: Ente

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/22/2026 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$1,650.00

(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: Marcy Ingram
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) \$ \$1,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Chandell Middle Name: _____ Last Name: Ryan

Address: 57 W Georgia Ave #105 City: Memphis State: TN Zip Code: 38103

Occupation: Government Employer: State of TN

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 7/23/2026 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: \$ \$2,150.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Marcy Ingram
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: directFX **OR**

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

Address: 601 N 3rd St City: Memphis State: TN Zip Code: 38107

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$1,311.29 Date of Expenditure: \$ 7/8/2026

Business or Organization Name: DWASHI **OR**

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

Address: PO Box 1811 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$492.68 Date of Expenditure: \$ 7/8/2026

Business or Organization Name: Anedot **OR**

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

Address: 1340 Poydras St Ste 1770 City: New Orleans State: LA Zip Code: 70112

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$16.60 Date of Expenditure: \$ 7/8/2026

Business or Organization Name: DWASHI **OR**

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

Address: PO Box 1811 City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$104.14 Date of Expenditure: \$ 7/9/2026

Business or Organization Name: Home Depot **OR**

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

Address: 3469 Riverdale Rd City: Memphis State: TN Zip Code: 38115

Purpose of Expenditure: Supplies

Amount of Expenditure: \$ \$231.92 Date of Expenditure: \$ 7/10/2026

Total Expenditures: \$ \$2,156.63

(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: Marcy Ingram
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) \$ \$2,156.63

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: Home Depot **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3469 Riverdale Rd City: Memphis State: TN Zip Code: 38115
Purpose of Expenditure: Supplies
Amount of Expenditure: \$ \$488.54 Date of Expenditure: \$ 7/10/2026

Business or Organization Name: directFX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 601 N 3rd St City: Memphis State: TN Zip Code: 38107
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$2,826.04 Date of Expenditure: \$ 7/9/2026

Business or Organization Name: directFX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 601 N 3rd St City: Memphis State: TN Zip Code: 38107
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$2,758.94 Date of Expenditure: \$ 7/10/2026

Business or Organization Name: Google **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1600 Amphitheatre Pkwy City: Mountain View State: VA Zip Code: 94043
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$16.45 Date of Expenditure: \$ 7/15/2026

Business or Organization Name: _____ **OR**
First Name: Darrick Middle Name: _____ Last Name: Harris
Address: PO Box 1811 City: Memphis State: TN Zip Code: 38101
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 7/17/2026

Total Expenditures: \$ \$8,446.60

(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: Marcy Ingram
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) \$ \$8,446.60

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: _____ **OR**
First Name: Francia Middle Name: _____ Last Name: Elkins
Address: 8552 Blue Creek Circle Apt 106 City: Millington State: TN Zip Code: 38053
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Toddrick Middle Name: _____ Last Name: Edwards
Address: 3756 Skylark Dr City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Harold Middle Name: _____ Last Name: Lee
Address: 1089 Peabody Ave #201 City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Leroy Middle Name: _____ Last Name: Gatlin
Address: 3756 Skylark Dr City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Dakiarrionha Middle Name: _____ Last Name: Laury
Address: 5139 Corkwood Dr City: Memphis State: TN Zip Code: 38127
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Total Expenditures: \$ \$9,796.60

(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: Marcy Ingram
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) \$ \$9,796.60

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: _____ **OR**
First Name: John Middle Name: _____ Last Name: Johnson
Address: 4940 Foxhall Drive City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Bessie Middle Name: _____ Last Name: Davis
Address: 4385 Newton Drive City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Alicia Middle Name: _____ Last Name: Curry
Address: 3895 Lowin Cove City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Terrinika Middle Name: _____ Last Name: Miller
Address: 3783 Emerson Ave City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Linda Middle Name: _____ Last Name: Beard
Address: 627 S Main St City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/18/2026

Total Expenditures: \$ \$11,026.60

(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: Marcy Ingram
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) \$ \$11,026.60

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: _____ **OR**
First Name: Joyce Middle Name: _____ Last Name: Gills
Address: 99 N Main Street Apt 1005 City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Dolores Middle Name: _____ Last Name: Thompson
Address: 3622 Walnut Grove Rd City: Memphis State: TN Zip Code: 38111
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Andrea Middle Name: _____ Last Name: Irvins
Address: 1016 Linwood Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: _____ **OR**
First Name: Sharon Middle Name: _____ Last Name: Hunt
Address: 761 Marianna St City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$270.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: directFX **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 601 N 3rd St City: Memphis State: TN Zip Code: 38107
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$2,060.00 Date of Expenditure: \$ 7/22/2026

Total Expenditures: \$ \$14,076.60

(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: Marcy Ingram
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) \$ \$14,076.60

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: _____ **OR**
First Name: Darrick Middle Name: _____ Last Name: Harris
Address: PO Box 1811 City: Memphis State: TN Zip Code: 38101
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$700.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Bessie Middle Name: _____ Last Name: Davis
Address: 4385 Newton Drive City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Dakiarrionha Middle Name: _____ Last Name: Laury
Address: 5139 Corkwood Dr City: Memphis State: TN Zip Code: 38127
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Harold Middle Name: _____ Last Name: Lee
Address: 1089 Peabody Ave #201 City: Memphis State: TN Zip Code: 38104
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Alicia Middle Name: _____ Last Name: Curry
Address: 3895 Lowin Cove City: Memphis State: TN Zip Code: 38128
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Total Expenditures: \$ \$18,256.60

(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: Marcy Ingram
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) \$ \$18,256.60

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: _____ **OR**
First Name: Carolyn Middle Name: _____ Last Name: Nichols
Address: 256 Elder Rd City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$720.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Leroy Middle Name: _____ Last Name: Gatlin
Address: 208 Radar Rd City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Toddrick Middle Name: _____ Last Name: Edwards
Address: 3756 Skylark Dr City: Memphis State: TN Zip Code: 38109
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Sharron Middle Name: _____ Last Name: Hunt
Address: 761 Marianna St City: Memphis State: TN Zip Code: 38114
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$240.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: John Middle Name: _____ Last Name: Johnson
Address: 4940 Foxhall Drive City: Memphis State: TN Zip Code: 38118
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 7/24/2026

Total Expenditures: \$ \$20,536.60

(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: Marcy Ingram
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) \$ \$20,536.60

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: _____ **OR**
First Name: Francis Middle Name: _____ Last Name: Elkins
Address: 8552 Blue Creek Circle Apt 106 City: Millington State: TN Zip Code: 38053
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Linda Middle Name: _____ Last Name: Beard
Address: 627 S Main St City: Memphis State: TN Zip Code: 38103
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$870.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: Andrea Middle Name: _____ Last Name: Irvins
Address: 1016 Linwood Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$900.00 Date of Expenditure: \$ 7/24/2026

Business or Organization Name: _____ **OR**
First Name: T L Middle Name: _____ Last Name: Harris
Address: 3821 S Galloway Dr City: Memphis State: TN Zip Code: 38111
Purpose of Expenditure: Poll Worker
Amount of Expenditure: \$ \$1,800.00 Date of Expenditure: \$ 7/25/2026

Business or Organization Name: Home Depot **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3469 Riverdale Rd City: Memphis State: TN Zip Code: 38115
Purpose of Expenditure: Refund of Expense
Amount of Expenditure: \$ (\$310.61) Date of Expenditure: \$ 7/10/2026

Total Expenditures: \$ \$24,665.99

(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: Marcy Ingram
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) \$ \$24,665.99

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: Tractor Supply **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 240 US-72 City: Collierville State: TN Zip Code: 38017
Purpose of Expenditure: Refund - Campaign Supplies
Amount of Expenditure: \$ (\$412.22) Date of Expenditure: \$ 7/15/2026

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: \$ \$24,253.77

(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: Marcy Ingram
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: Marcy Middle Name: _____ Last Name: Ingram

Address: 210 Seabiscuit Dr City: Collierville State: TN Zip Code: 38120

Outstanding Loan Balance (Beginning) \$ \$51,866.41

Loans Received \$ \$18,142.31

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$70,008.72

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

Date of Loan: 7/27/2026

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: \$ _____

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) \$ \$51,866.41

Loans Received \$ \$18,142.31

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$70,008.72