



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/4/2026 2.a. Candidate or Committee Name: SEAN GILLILAND
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 1011 Whitehall Rd
City: Murfreesboro State: TN Zip Code: 37130 Phone: _____
5. Candidate Home Address: 1011 Whitehall Rd
City: Murfreesboro State: TN Zip Code: 37130 Phone: _____
Candidate Email Address: mollygilliland@bellsouth.net
6. Office Sought: (include district number, if applicable) County Commission District #17
7. Name of Political Treasurer (may be candidate): Molly Gilliland
Political Treasurer Email Address: mollygilliland@bellsouth.net
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: 4/26/2026 End Date: 6/30/2026
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>\$5,935.19</u>
b. Total Receipts This Period	\$ <u>\$11,822.32</u>
c. Total Disbursements This Period	\$ <u>\$4,399.29</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$13,358.22</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: SEAN GILLILAND

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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) \$ \$11,822.32
- 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.) \$ \$11,822.32

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,399.29
(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.)..... \$ \$4,399.29

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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Sean Middle Name: _____ Last Name: Gilliland

Address: 1011 Whitehall Road City: Murfreesboro State: TN Zip Code: 37130

Occupation: CIO Employer: Primary Care & Hope Clinic

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

Amount of Contribution: \$ \$1.38 Date of Contribution: 5/12/2026 Aggregate This Election: \$ \$1.38

Business or Organization Name: _____ **OR**

First Name: Melinda Middle Name: _____ Last Name: Haines

Address: 119 Cherry Lane 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: \$ \$260.60 Date of Contribution: 5/24/2026 Aggregate This Election: \$ \$260.60

Business or Organization Name: _____ **OR**

First Name: Robbie Middle Name: _____ Last Name: Hooper

Address: 2321 Pitts Lane 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: \$ \$500.00 Date of Contribution: 5/25/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Mike Middle Name: _____ Last Name: Williams

Address: 810 School St City: Columbia State: TN Zip Code: 38401

Occupation: Retired Employer: Self

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

Amount of Contribution: \$ \$520.88 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$520.88

Total Contributions: \$ \$1,282.86

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,282.86

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Clardy

Address: 710 Shady Grove Dr City: Murfreesboro State: TN Zip Code: 37128

Occupation: Pastor Employer: St. Mark's UMC

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: J.D. Middle Name: _____ Last Name: Witherspoon

Address: 2127 Shannon Dr 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: 5/26/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Hamby

Address: 1202 Bayard Ave City: Murfreesboro State: TN Zip Code: 37130

Occupation: Senior Director Employer: Asurion

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Phyllis Middle Name: _____ Last Name: Kittle

Address: 1210 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: \$ \$250.00 Date of Contribution: 5/26/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$2,382.86

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,382.86

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Van Patten

Address: 2718 Jim Houston Ct City: Murfreesboro State: TN Zip Code: 37129

Occupation: Realtor Employer: Compass Realty

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Andy Middle Name: _____ Last Name: Womack

Address: 1535 W Northfield Suite 5 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: \$ \$250.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Sherrie Middle Name: _____ Last Name: Gilliam

Address: 615 Sunset Ave 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: \$ \$150.00 Date of Contribution: 5/27/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Tim Middle Name: _____ Last Name: Tipps

Address: 2111 Prestwick Drive City: Murfreesboro State: TN Zip Code: 37130

Occupation: VP of Residential Lending Employer: Wilson Bank and Trust

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

Amount of Contribution: \$ \$260.60 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$260.60

Total Contributions: \$ \$3,193.46

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,193.46

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Julie Middle Name: _____ Last Name: Eubank
Address: 910 M Street Northwest #807 City: Washington State: DC Zip Code: 20001
Occupation: Deputy Director Office of Congre Employer: National Academy of Sciences
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Elizabeth Middle Name: _____ Last Name: Chappell
Address: 2115 Windsor St 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: \$ \$500.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Fred Middle Name: _____ Last Name: Hembree
Address: 2023 Alexander 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: \$ \$75.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**
First Name: John Mack Middle Name: _____ Last Name: Green
Address: 614 Shawnee Dr City: Murfreesboro State: TN Zip Code: 37130
Occupation: Attorney Employer: Self employed
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$3,918.46
(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,918.46

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Judi Middle Name: _____ Last Name: Medford

Address: 108 Abbottsford City: Nashville State: TN Zip Code: 37215

Occupation: retired Employer: Retired

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

Amount of Contribution: \$ \$78.40 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$78.40

Business or Organization Name: _____ **OR**

First Name: Lana Middle Name: _____ Last Name: Seivers

Address: 2026 Alexander Boulevard 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: 5/29/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Akins

Address: 1606 Georgetown Ln 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: \$ \$208.54 Date of Contribution: 5/29/2026 Aggregate This Election: \$ \$208.54

Business or Organization Name: _____ **OR**

First Name: Karen Middle Name: _____ Last Name: Garner

Address: 2210 Oakhaven Drive 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: \$ \$150.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$4,455.40

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,455.40

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Anne Middle Name: _____ Last Name: Taylor

Address: 1107 Whitehall Rd 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: \$ \$150.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Louis Middle Name: _____ Last Name: Finkel

Address: 5724 7th Street North City: Arlington State: VA Zip Code: 22205

Occupation: SVP Employer: NRECA

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

Amount of Contribution: \$ \$520.88 Date of Contribution: 5/31/2026 Aggregate This Election: \$ \$520.88

Business or Organization Name: _____ **OR**

First Name: Rhonda Middle Name: _____ Last Name: Johnson

Address: 1114 Scotland Drive City: Murfreesboro State: TN Zip Code: 37130

Occupation: Psychotherapist Employer: Self

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

Amount of Contribution: \$ \$104.43 Date of Contribution: 5/31/2026 Aggregate This Election: \$ \$104.43

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Sevier

Address: 138 Cherry Ln City: Murfreesboro State: TN Zip Code: 37130

Occupation: Capstone Project Coordinator Employer: Lipscomb University

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/31/2026 Aggregate This Election: \$ \$25.00

Total Contributions: \$ \$5,255.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,255.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Judy Middle Name: _____ Last Name: Whitehill

Address: 1704 Keeneland Ct City: Murfreesboro State: TN Zip Code: 37127

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$75.00 Date of Contribution: 6/1/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**

First Name: Tab Middle Name: _____ Last Name: Talbott

Address: 243 Flag Ct City: Murfreesboro State: TN Zip Code: 37127

Occupation: Attorney Employer: Talbot Legal

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Kaplan

Address: 1010 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Professor Employer: MTSU

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Dana Middle Name: _____ Last Name: Womack

Address: 906 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Agent Employer: State Farm

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$5,730.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,730.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Gloria Middle Name: _____ Last Name: Bonner

Address: 1423 Wall St 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: \$ \$300.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Kim Middle Name: _____ Last Name: Williams

Address: 7515 Chapin Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Director of Compliance Employer: Clover Health

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: William Middle Name: _____ Last Name: Morris

Address: 950 E Northfield 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: \$ \$750.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$750.00

Business or Organization Name: _____ **OR**

First Name: Chantho Middle Name: _____ Last Name: Sourinho

Address: 4300 Singleton Dr City: Murfreesboro State: TN Zip Code: 37127

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$7,430.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,430.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Dallas Middle Name: _____ Last Name: Caudle

Address: 1206 Raleigh Ct 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: \$ \$300.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Stephanie Middle Name: _____ Last Name: Treutlein

Address: 2026 Herring Crossing 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: 6/2/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Mike Middle Name: _____ Last Name: Waldrop

Address: 1019 Sheila Ct 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: 6/2/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Young

Address: 1610 Buckingham Dr 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: \$ \$150.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$8,080.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,080.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jeff Middle Name: _____ Last Name: Henry

Address: 2606 Loyd St 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: \$ \$200.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Hylan Middle Name: _____ Last Name: Pearce

Address: 2300 Alexander Blvd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Music Director Employer: St. Mark's UMC

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

Amount of Contribution: \$ \$75.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Bragg

Address: 2108 Shannon Dr 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: \$ \$250.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Teresa Middle Name: _____ Last Name: Shirley

Address: 503 Oakdale Dr City: Smyrna State: TN Zip Code: 37167

Occupation: Homemaker Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$8,705.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,705.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: LaRoche

Address: 2103 Shannon Dr 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: \$ \$500.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Patricia Middle Name: _____ Last Name: Sanders

Address: P.O. Box 1275 City: Murfreesboro State: TN Zip Code: 37133

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Wayne Middle Name: _____ Last Name: Murphy

Address: 2371 Pitts Ln 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: \$ \$150.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Fant Middle Name: _____ Last Name: Smith

Address: 2223 Shannon Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Director of Business Developmer Employer: American Solutions for Business

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$9,605.71

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,605.71

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Marilyn Middle Name: _____ Last Name: Patterson

Address: 1215 Raleigh Ct 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: \$ \$50.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Jason Middle Name: _____ Last Name: Vance

Address: 1203 Whitehall Rd City: Murfreesboro State: TN Zip Code: 37130

Occupation: Librarian Employer: Middle Tennessee State University

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Lori Middle Name: _____ Last Name: Patterson

Address: 152 Brawley Circle City: Readyville State: TN Zip Code: 37149

Occupation: Registration Employer: Vanderbilt

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

Amount of Contribution: \$ \$78.40 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$78.40

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Marlatt

Address: 1731 Somerset Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Teacher Employer: Murfreesboro City Schools

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

Amount of Contribution: \$ \$104.43 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$104.43

Total Contributions: \$ \$9,938.54

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,938.54

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Reid Middle Name: _____ Last Name: Henderson

Address: 5010 Macarthur Avenue 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: \$ \$52.37 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$52.37

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Clement

Address: 2917 Chaucer Drive City: Murfreesboro State: TN Zip Code: 37129

Occupation: Pharmacist Employer: Primary Care & Hope Clinic

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

Amount of Contribution: \$ \$78.40 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$78.40

Business or Organization Name: _____ **OR**

First Name: Glenn Middle Name: _____ Last Name: Macbeth

Address: 1607 Greenway Dr City: Murfreesboro State: TN Zip Code: 37129

Occupation: Attorney Employer: Self employed

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

Amount of Contribution: \$ \$156.49 Date of Contribution: 6/2/2026 Aggregate This Election: \$ \$156.49

Business or Organization Name: _____ **OR**

First Name: Elizabeth Middle Name: _____ Last Name: LaRoche

Address: 2989 Sulphur Springs Road City: Murfreesboro State: TN Zip Code: 37129

Occupation: MD Employer: Self

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

Amount of Contribution: \$ \$104.43 Date of Contribution: 6/3/2026 Aggregate This Election: \$ \$104.43

Total Contributions: \$ \$10,330.23

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$10,330.23

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Buddy Middle Name: _____ Last Name: Howell

Address: 2004 Higgins Lane City: Murfreesboro State: TN Zip Code: 37130

Occupation: Business Administrator Employer: St. Mark's UMC

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

Amount of Contribution: \$ \$156.49 Date of Contribution: 6/3/2026 Aggregate This Election: \$ \$156.49

Business or Organization Name: _____ **OR**

First Name: Frank Middle Name: _____ Last Name: Jennings

Address: 706 Saratoga Dr 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: \$ \$150.00 Date of Contribution: 6/6/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Bragg

Address: 2814 Regency Park Dr 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: 6/10/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Shane Middle Name: _____ Last Name: Smith

Address: 5419 Sherrington Rd City: Murfreesboro State: TN Zip Code: 37128

Occupation: CFO Employer: Primary Care & Hope Clinic

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/12/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$10,836.72

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$10,836.72

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Trinace Middle Name: _____ Last Name: Campbell
Address: 819 Templeton Ln 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: \$ \$75.00 Date of Contribution: 6/14/2026 Aggregate This Election: \$ \$75.00

Business or Organization Name: _____ **OR**
First Name: Billy Middle Name: _____ Last Name: Smith
Address: 611 South Willow Ave Suite E City: Cookeville State: TN Zip Code: 38501
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 6/15/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: Robert Middle Name: _____ Last Name: Williams
Address: P.O. Box 612 City: Murfreesboro State: TN Zip Code: 37133
Occupation: Funeral Assistant Employer: Woodfins's Funeral Home
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/16/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Jeff Middle Name: _____ Last Name: Whorley
Address: 6827 West 96th Street City: Zionsville State: IN Zip Code: 46077
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$260.60 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$260.60

Total Contributions: \$ \$11,822.32
(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
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: Oaklands Mansion **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 900 N Maney Ave City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Facility Rental
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 4/28/2026

Business or Organization Name: PrintRunner **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8000 Haskell Ave City: Van Nuys State: CA Zip Code: 91406
Purpose of Expenditure: Stickers
Amount of Expenditure: \$ \$118.03 Date of Expenditure: \$ 5/7/2026

Business or Organization Name: Staples **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1740 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Printing
Amount of Expenditure: \$ \$34.01 Date of Expenditure: \$ 5/15/2026

Business or Organization Name: USPS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2255 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Stamps
Amount of Expenditure: \$ \$156.00 Date of Expenditure: \$ 5/19/2026

Business or Organization Name: Staples **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1740 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Printing
Amount of Expenditure: \$ \$98.76 Date of Expenditure: \$ 5/26/2026

Total Expenditures: \$ \$906.80

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$906.80

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: Costco **OR**

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

Address: 1524 Beasie Rd City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: Fundraiser Supplies

Amount of Expenditure: \$ \$75.47 Date of Expenditure: \$ 6/1/2026

Business or Organization Name: USPS **OR**

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

Address: 2255 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Stamps

Amount of Expenditure: \$ \$156.00 Date of Expenditure: \$ 6/1/2026

Business or Organization Name: Trader Joe's **OR**

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

Address: 2305 Medical Center Pkwy City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Fundraiser Supplies

Amount of Expenditure: \$ \$36.15 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: Walmart **OR**

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

Address: 2012 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Fundraiser Supplies

Amount of Expenditure: \$ \$44.05 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: Kroger **OR**

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

Address: 2050 Lascassas Pk City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Fundraiser Supplies

Amount of Expenditure: \$ \$84.58 Date of Expenditure: \$ 6/2/2026

Total Expenditures: \$ \$1,303.05

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,303.05

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: Daniel Middle Name: _____ Last Name: Kuk
Address: 1301 E Main St City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Fundraiser Entertainment
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: _____ **OR**
First Name: Jennifer Middle Name: _____ Last Name: Stanley
Address: 1431 Ashlawn Dr City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Fundraiser Decorations
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: The Blue Porch **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 809 N Church St City: Murfreesboro State: TN Zip Code: 37130
Purpose of Expenditure: Fundraiser Catering
Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: Walmart **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2012 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129
Purpose of Expenditure: Fundraiser Supplies
Amount of Expenditure: \$ \$21.92 Date of Expenditure: \$ 6/3/2026

Business or Organization Name: DonorBox **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1520 Belle View Blvd #4106 City: Alexandria State: VA Zip Code: 22307
Purpose of Expenditure: Fundraising Platform Upgrade
Amount of Expenditure: \$ \$62.85 Date of Expenditure: \$ 6/4/2026

Total Expenditures: \$ \$2,637.82

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,637.82

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: Cedar Glade **OR**

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

Address: 906 Ridgely Rd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Fundraiser Supplies

Amount of Expenditure: \$ \$74.08 Date of Expenditure: \$ 6/4/2026

Business or Organization Name: RR Donnelley **OR**

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

Address: 1 Courier Pl City: Smyrna State: TN Zip Code: 37167

Purpose of Expenditure: Palm Card printing

Amount of Expenditure: \$ \$1,031.00 Date of Expenditure: \$ 6/10/2026

Business or Organization Name: Kroger **OR**

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

Address: 2050 Lascassas Pk City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Campaign volunteer booth supplies

Amount of Expenditure: \$ \$25.92 Date of Expenditure: \$ 6/15/2026

Business or Organization Name: Staples **OR**

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

Address: 1740 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$120.71 Date of Expenditure: \$ 6/15/2026

Business or Organization Name: USPS **OR**

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

Address: 2255 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Stamps

Amount of Expenditure: \$ \$15.60 Date of Expenditure: \$ 6/26/2026

Total Expenditures: \$ \$3,905.13

(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: SEAN GILLILAND
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,905.13

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: USPS **OR**

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

Address: 2255 Memorial Blvd City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Stamps

Amount of Expenditure: \$ \$307.75 Date of Expenditure: \$ 6/29/2026

Business or Organization Name: DonorBox **OR**

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

Address: 1520 Belle View Blvd #4106 City: Alexandria State: VA Zip Code: 22307

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$66.49 Date of Expenditure: \$ 6/30/2026

Business or Organization Name: Act Blue **OR**

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

Address: P.O. Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$1.05 Date of Expenditure: \$ 6/30/2026

Business or Organization Name: Stripe **OR**

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

Address: 354 Oyster Point Blvd City: South San Francisc State: CA Zip Code: 94080

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$118.87 Date of Expenditure: \$ 6/30/2026

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: \$ \$4,399.29

(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.)