



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/9/2026 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: judgemarcy@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: 4/1/2026 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

190D-4D91-89B1-BADE
07/09/26 - 1:08 PM

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$35,636.69</u>
b. Total Receipts This Period	\$ <u>\$4,076.55</u>
c. Total Disbursements This Period	\$ <u>\$33,966.55</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$5,746.69</u>
e. Total Loans Outstanding	\$ <u>\$51,866.41</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: 4/1/2026 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) \$ \$2,425.00
- c. Loans Received This Reporting Period..... \$ \$1,651.55
- 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.) \$ \$4,076.55

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$33,966.55
(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.)..... \$ \$33,966.55

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$310.00
- c. Total In-Kind Contributions Received This Period \$ \$310.00

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: 4/1/2026 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: Markeisha Middle Name: _____ Last Name: Savage

Address: 5190 Silver Peak Ln City: Memphis State: TN Zip Code: 38125

Occupation: Attorney Employer: Government

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Gerald Middle Name: _____ Last Name: Thornton

Address: 8866 Classic Dr City: Memphis State: TN Zip Code: 38125

Occupation: Attorney Employer: Government

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Beard

Address: 627 N Main St City: Memphis State: TN Zip Code: 38103

Occupation: Teacher Employer: Government

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/18/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Hicks

Address: 6873 Tawny Cove City: Memphis State: TN Zip Code: 38115

Occupation: Supervisor Employer: Vanderbilt University Medical Center

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/7/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$700.00

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$700.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Marlinee Middle Name: _____ Last Name: Iverson

Address: 2277 Thornwood Ln City: Memphis State: TN Zip Code: 38119

Occupation: Attorney Employer: Government

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Bethany Middle Name: K. Last Name: Wilkes

Address: 375 Dogwood Valley City: Collierville State: TN Zip Code: 38017

Occupation: Best Efforts Employer: Best Efforts

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Barry Middle Name: F. Last Name: Myers

Address: 7520 Forrest Shadow City: Arlington State: TN Zip Code: 38002

Occupation: Consultant Employer: Self-Employed

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/8/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: Monika Middle Name: _____ Last Name: Johnson

Address: 7894 Winchester City: Memphis State: TN Zip Code: 38125

Occupation: Attorney Employer: Legacy Lawyers

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$2,000.00

(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: Marcy Ingram
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Ursula Middle Name: _____ Last Name: Woods

Address: 7894 Winchester City: Memphis State: TN Zip Code: 38125

Occupation: Attorney Employer: Legacy Lawyers

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Walter Middle Name: _____ Last Name: Evans II

Address: 756 Velma St City: Memphis State: TN Zip Code: 38104

Occupation: Attorney Employer: Self-Employed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Debra Middle Name: _____ Last Name: Fessenden

Address: 1927 Central City: Memphis State: TN Zip Code: 38104

Occupation: Attorney Employer: Government

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 6/25/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

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

Total Contributions: \$ \$2,425.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Marcy Ingram
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: \$ \$310.00 In-Kind Contribution Date: 6/3/2026 Aggregate This Election: \$ \$310.00

Description of In-Kind Contribution: Printing Services

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ \$310.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind 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: 4/1/2026 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: 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: \$ \$1.10 Date of Expenditure: \$ 4/2/2026

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: \$ \$10.30 Date of Expenditure: \$ 4/3/2026

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

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Democrat Event

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 4/8/2026

Business or Organization Name: Sapphire Golf Tour **OR**

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

Address: 1346 4th St SE City: Washington State: DC Zip Code: 20003

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$77.25 Date of Expenditure: \$ 4/9/2026

Business or Organization Name: Marketality LLC **OR**

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

Address: 100 Powell PI # 1482 City: Nashville State: TN Zip Code: 37204

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 4/9/2026

Total Expenditures: \$ \$538.65

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$538.65

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: ActBlue **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Democrat Event

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 4/8/2026

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: \$ \$10.30 Date of Expenditure: \$ 4/20/2026

Business or Organization Name: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$1,014.30 Date of Expenditure: \$ 4/20/2026

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: \$ \$4.30 Date of Expenditure: \$ 4/22/2026

Business or Organization Name: AI Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$455.87 Date of Expenditure: \$ 4/27/2026

Total Expenditures: \$ \$2,123.42

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,123.42

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: ActBlue **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Political Event

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Memphis Pizza **OR**

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

Address: 797 W Poplar City: Collierville State: TN Zip Code: 38116

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$117.79 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Marketality LLC **OR**

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

Address: 100 Powell PI # 1482 City: Nashville State: TN Zip Code: 37204

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$288.75 Date of Expenditure: \$ 4/29/2026

Business or Organization Name: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$1,766.47 Date of Expenditure: \$ 5/13/2026

Business or Organization Name: Marketality LLC **OR**

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

Address: 100 Powell PI # 1482 City: Nashville State: TN Zip Code: 37204

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 5/15/2026

Total Expenditures: \$ \$4,546.43

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,546.43

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: Lamar Advertising OR

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

Address: 1600 Centurn Center City: Memphis State: TN Zip Code: 38134

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$1,648.00 Date of Expenditure: \$ 5/20/2026

Business or Organization Name: iHeartMedia OR

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

Address: 20880 Stone Oak City: San Antonio State: TX Zip Code: 78258

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$2,502.70 Date of Expenditure: \$ 5/27/2026

Business or Organization Name: Four Way Restaurant OR

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

Address: 991 Mississippi Blvd City: Memphis State: TN Zip Code: 38126

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$67.52 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: Four Way Restaurant OR

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

Address: 991 Mississippi Blvd City: Memphis State: TN Zip Code: 38126

Purpose of Expenditure: Food and Beverage

Amount of Expenditure: \$ \$105.93 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: iHeartMedia OR

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

Address: 20880 Stone Oak City: San Antonio State: TX Zip Code: 78258

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$918.00 Date of Expenditure: \$ 5/29/2026

Total Expenditures: \$ \$9,788.58

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,788.58

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: PS&S **OR**

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

Address: PO Box 1811 City: Memphis State: TN Zip Code: 38148

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$700.00 Date of Expenditure: \$ 5/29/2026

Business or Organization Name: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$626.82 Date of Expenditure: \$ 6/1/2026

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

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

Address: 345 Market Blvd City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Campaign Supplies

Amount of Expenditure: \$ \$110.17 Date of Expenditure: \$ 6/1/2026

Business or Organization Name: Cordova Event **OR**

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

Address: 2988 Old Austin Peay City: Memphis State: TN Zip Code: 38128

Purpose of Expenditure: Cordova Day Party

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 6/1/2026

Business or Organization Name: Sidney Chism Picnic **OR**

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

Address: 5335 Bethune Cove City: Memphis State: TN Zip Code: 38109

Purpose of Expenditure: Sponsor

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 6/3/2026

Total Expenditures: \$ \$11,575.57

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$11,575.57

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: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$384.68 Date of Expenditure: \$ 6/3/2026

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: \$ \$1,020.68 Date of Expenditure: \$ 6/5/2026

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: \$ \$219.50 Date of Expenditure: \$ 6/5/2026

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: \$ \$301.81 Date of Expenditure: \$ 6/5/2026

Business or Organization Name: Ollies Bargain **OR**

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

Address: 7676 Polo GroundsBlvd City: Memphis State: TN Zip Code: 38125

Purpose of Expenditure: Campaign Supplies

Amount of Expenditure: \$ \$109.74 Date of Expenditure: \$ 6/9/2026

Total Expenditures: \$ \$13,611.98

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$13,611.98

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: \$ \$1,031.19 Date of Expenditure: \$ 6/9/2026

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: \$ \$219.50 Date of Expenditure: \$ 6/9/2026

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: \$ \$301.81 Date of Expenditure: \$ 6/9/2026

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: \$ \$4.30 Date of Expenditure: \$ 6/10/2026

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: \$ \$8,602.84 Date of Expenditure: \$ 6/10/2026

Total Expenditures: \$ \$23,771.62

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$23,771.62

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: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$384.68 Date of Expenditure: \$ 6/11/2026

Business or Organization Name: WLOK Radio **OR**

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

Address: 363 S. Second St City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 6/11/2026

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: \$ \$4.30 Date of Expenditure: \$ 6/16/2026

Business or Organization Name: Goldstar Market **OR**

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

Address: 974 Murfreesboro Pike City: Nashville State: TN Zip Code: 37217

Purpose of Expenditure: Campaign Expenses

Amount of Expenditure: \$ \$40.00 Date of Expenditure: \$ 6/16/2026

Business or Organization Name: A1 Printing Services **OR**

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

Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$2,119.77 Date of Expenditure: \$ 6/17/2026

Total Expenditures: \$ \$27,320.37

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$27,320.37

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: 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: \$ \$18.90 Date of Expenditure: \$ 6/17/2026

Business or Organization Name: Your Shirts Ink'd **OR**

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

Address: 5948 Mt Moriah Rd City: Memphis State: TN Zip Code: 38115

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$257.91 Date of Expenditure: \$ 6/18/2026

Business or Organization Name: First Horizon Bank **OR**

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

Address: 165 Madison Ave City: Memphis State: TN Zip Code: 38103

Purpose of Expenditure: Bank fees

Amount of Expenditure: \$ \$3.00 Date of Expenditure: \$ 6/22/2026

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: Campaign Supplies

Amount of Expenditure: \$ \$412.22 Date of Expenditure: \$ 6/22/2026

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

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

Address: 345 Market Blvd City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Campaign Supplies

Amount of Expenditure: \$ \$19.37 Date of Expenditure: \$ 6/22/2026

Total Expenditures: \$ \$28,031.77

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Marcy Ingram
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$28,031.77

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: 345 Market Blvd City: Collierville State: TN Zip Code: 38017

Purpose of Expenditure: Campaign Supplies

Amount of Expenditure: \$ \$327.87 Date of Expenditure: \$ 6/22/2026

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: \$ \$1.30 Date of Expenditure: \$ 6/22/2026

Business or Organization Name: FedEx **OR**

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

Address: 6450 Poplar Ave #123 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Service Fees

Amount of Expenditure: \$ \$12.75 Date of Expenditure: \$ 6/23/2026

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: \$ \$493.88 Date of Expenditure: \$ 6/25/2026

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: \$ \$11.30 Date of Expenditure: \$ 6/29/2026

Total Expenditures: \$ \$28,878.87

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$28,878.87

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: PS&S **OR**

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

Address: PO Box 1811 City: Memphis State: TN Zip Code: 38148

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 6/29/2026

Business or Organization Name: Sports and Bar Radio **OR**

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

Address: 3327 Barbwood Dr City: Memphis State: TN Zip Code: 38118

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 6/30/2026

Business or Organization Name: Watkins Uiberall PLLC **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Accounting

Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 5/19/2026

Business or Organization Name: Watkins Uiberall PLLC **OR**

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

Address: 1661 Aaron Brenner Dr Ste 300 City: Memphis State: TN Zip Code: 38120

Purpose of Expenditure: Accounting

Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 6/29/2026

Business or Organization Name: Telisa Franklin Media **OR**

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

Address: 2988 Old Austin Peay City: Memphis State: TN Zip Code: 38128

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$3,000.00 Date of Expenditure: \$ 6/5/2026

Total Expenditures: \$ \$33,378.87

(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: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$33,378.87

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: A1 Printing Services **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 810 E Brooks Rd City: Memphis State: TN Zip Code: 38116
Purpose of Expenditure: Printing
Amount of Expenditure: \$ \$74.68 Date of Expenditure: \$ 6/3/2026

Business or Organization Name: _____ **OR**
First Name: Barry Middle Name: _____ Last Name: Myers
Address: 7520 Forrest Shadow City: Arlington State: TN Zip Code: 38002
Purpose of Expenditure: Campaian Worker
Amount of Expenditure: \$ \$513.00 Date of Expenditure: \$ 6/22/2026

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$33,966.55

(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: 4/1/2026 End Date: 6/30/2026
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) \$ \$50,214.86

Loans Received \$ \$1,651.55

Loan Payments..... \$ \$0.00

Outstanding Loan (End)..... \$ \$51,866.41

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

Date of Loan: 6/3/2026

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) \$ \$50,214.86

Loans Received \$ \$1,651.55

Loan Payments..... \$ \$0.00

Outstanding Loan (End)..... \$ \$51,866.41