CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 10/9/2026 2.a. Candidate or Committee Name: Mary Genung

2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____

4. Campaign Address: 1100 Lock 4 Road

City: Gallatin State: TN Zip Code: 37066 Phone: 615-4778562

5. Candidate Home Address: Same

City: _____ State: _____ Zip Code: _____ Phone: _____

Candidate Email Address: maryegenung@aol.com

6. Office Sought: (include district number, if applicable) Mayor of Gallatin

7. Name of Political Treasurer (may be candidate): Mary Genung

Political Treasurer Email Address: maryegenung@aol.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: 9/30/2026

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.

Mary E Genung 10-9-26
Candidate Signature Date

Mary E Genung 10-9-26
Political Treasurer Signature Date

John G Genung 10-9-26
Witness Signature Date

John G Genung 10-9-26
Witness Signature Date

12. Summary:

a.	Balance On Hand Last Report	$ 7,383.06
b.	Total Receipts This Period	$ 6,153.08
c.	Total Disbursements This Period	$ 2,468.10
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 11,068.04
e.	Total Loans Outstanding	$ 445.00
f.	Total Obligations Outstanding	$ 0

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AM PM
OCT 13 2026
SUMNER COUNTY
ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Mary Genung

14. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 1,239.31
(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) ..... $ 4,913.77

c. Loans Received This Reporting Period ..... $ 0

d. Interest Received This Reporting Period ..... $ 0

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ 6,153.08

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 2,468.10
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ 0

c. Total Obligation Payments Made This Period ..... $ 0

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ 2,468.10

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ 0

b. Itemized In-Kind Contributions Received This Period ..... $ 748.34

c. Total In-Kind Contributions Received This Period ..... $ 748.34

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/206

3. Total campaign contributions from preceding page (enter $0 if first page) $ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Lucille Middle Name: _____ Last Name: Koch

Address: 236 Gibbs Lane City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 1,000.00 Date of Contribution: 7/9/2026 Aggregate This Election: $ 1,000.00

Business or Organization Name: _____ OR

First Name: Mike Middle Name: _____ Last Name: Ray

Address: 929 Aqua Drive City: Gallatin State: TN Zip Code: 37066

Occupation: Self Employed Employer: _____

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

Amount of Contribution: $ 500.00 Date of Contribution: 7/11/2026 Aggregate This Election: $ 500.00

Business or Organization Name: _____ OR

First Name: Tracey Middle Name: _____ Last Name: Townsend

Address: 622 Neals Lane City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 1,000.00 Date of Contribution: 8/20/2026 Aggregate This Election: $ 1,000.00

Business or Organization Name: _____ OR

First Name: Martha Middle Name: _____ Last Name: Zanger

Address: 151 E. Morris Drive City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 200.00 Date of Contribution: 8/1/2026 Aggregate This Election: $ 200.00

Total Contributions: $ 2,700.00

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/206

3. Total campaign contributions from preceding page (enter $0 if first page) $ 2,700.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Mike Ray Campaign Fund **OR**

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

Address: 929 Aqua Drive City: Gallatin State: TN Zip Code: 37066

Occupation: Self Employed Employer: _____

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

Amount of Contribution: $ 388.77 Date of Contribution: 8/7/2026 Aggregate This Election: $ 388.77

Business or Organization Name: _____ **OR**

First Name: Clay Middle Name: _____ Last Name: Humphrys

Address: 335 Nichols Lane City: Gallatin State: TN Zip Code: 37066

Occupation: Nursery Employer: Self Employed

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

Amount of Contribution: $ 250.00 Date of Contribution: 8/22/2026 Aggregate This Election: $ 250.00

Business or Organization Name: _____ **OR**

First Name: Randy Middle Name: _____ Last Name: Barrett

Address: 311 Witherspoon Ave. City: Gallatin State: TN Zip Code: 37066

Occupation: Vegetable Market Employer: Self Employed

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

Amount of Contribution: $ 500.00 Date of Contribution: 8/25/2026 Aggregate This Election: $ 500.00

Business or Organization Name: _____ **OR**

First Name: Gary Middle Name: _____ Last Name: Pryor

Address: 1063 Lakeshore Drive City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 350.00 Date of Contribution: 8/18/2026 Aggregate This Election: $ 350.00

Total Contributions: $ 4188.77

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/206

3. Total campaign contributions from preceding page (enter $0 if first page) $ 4,188.77

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Wes Middle Name: _____ Last Name: Bransford

Address: 664 Fredericksburg Drive City: Gallatin State: TN Zip Code: 37066

Occupation: CFO Employer: _____

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

Amount of Contribution: $ 100.00 Date of Contribution: 8/21/2026 Aggregate This Election: $ 200.00

Business or Organization Name: _____ **OR**

First Name: J. Brent Middle Name: _____ Last Name: Graves

Address: 111 Robin Pt. City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 125.00 Date of Contribution: 9/5/2026 Aggregate This Election: $ 125.00

Business or Organization Name: _____ **OR**

First Name: Christopher Middle Name: _____ Last Name: Bishop

Address: 1032 Pittman Dr. City: Gallatin State: TN Zip Code: 37066

Occupation: Software Engineer Employer: _____

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

Amount of Contribution: $ 200.00 Date of Contribution: 9/16/2026 Aggregate This Election: $ 200.00

Business or Organization Name: _____ **OR**

First Name: Todd and Sherri Middle Name: _____ Last Name: Alexander

Address: 217 Strange Circle City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 200.00 Date of Contribution: 9/22/2026 Aggregate This Election: $ 700.00

Total Contributions: $ 4,813.77

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/206

3. Total campaign contributions from preceding page (enter $0 if first page) $ 4,813.77

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Cindy Middle Name: _____ Last Name: Lohrke

Address: 496 Dottie Drive City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer: _____

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

Amount of Contribution: $ 100.00 Date of Contribution: 9/22/2026 Aggregate This Election: $ 200.00

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: $ 4,913.77

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

3. Total in-kind contributions from preceding page (enter $0 if first page) $ 0

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: _____ **OR**

First Name: Pascal Middle Name: _____ Last Name: Jouvence

Address: 1335 Long Hollow Pike City: Gallatin State: TN Zip Code: 37066

Occupation: Pilot Employer: Southwest Airlines

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

In-Kind Contribution Value: $ 748.34 In-Kind Contribution Date: 8/4/2026 Aggregate This Election: $ 1,832.59

Description of In-Kind Contribution: signs and zipties

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: $ 784.34

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 0

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: Walmart **OR**

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

Address: 1112 Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Envelopes

Amount of Expenditure: $ 16.55 Date of Expenditure: $ 7/9/26

Business or Organization Name: AGE Graphics **OR**

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

Address: 678 Collins Road City: Little Hocking State: OH Zip Code: 45742

Purpose of Expenditure: Signs

Amount of Expenditure: $ 285.00 Date of Expenditure: $ 7/29/2026

Business or Organization Name: AGE Graphics **OR**

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

Address: 678 Collins Road City: Gallatin State: TN Zip Code: 45742

Purpose of Expenditure: Signs

Amount of Expenditure: $ 280.00 Date of Expenditure: $ 8/5/2026

Business or Organization Name: Walmart **OR**

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

Address: 1112 Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Envelopes

Amount of Expenditure: $ 28.75 Date of Expenditure: $ 8/5/2026

Business or Organization Name: Next Day Flyers **OR**

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

Address: _____ City: Van Nuys State: CA Zip Code: _____

Purpose of Expenditure: Postcards

Amount of Expenditure: $ 337.49 Date of Expenditure: $ 8/5/2026

Total Expenditures: $ 947.79

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 949.79

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: Walmart **OR**

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

Address: 1112 Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Clipboards

Amount of Expenditure: $ 16.02 Date of Expenditure: $ 8/19/26

Business or Organization Name: AGE Graphics **OR**

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

Address: 678 Collins Road City: Little Hocking State: OH Zip Code: 45742

Purpose of Expenditure: Signs

Amount of Expenditure: $ 570.00 Date of Expenditure: $ 8/17/2026

Business or Organization Name: AGE Graphics **OR**

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

Address: 678 Collins Road City: Gallatin State: TN Zip Code: 45742

Purpose of Expenditure: Signs

Amount of Expenditure: $ 395.00 Date of Expenditure: $ 9/18/2026

Business or Organization Name: Main Street Media of TN **OR**

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

Address: Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Digital Ad

Amount of Expenditure: $ 500.00 Date of Expenditure: $ 9/29/2026

Business or Organization Name: GoDaddy **OR**

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

Address: website City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: merchant services fees

Amount of Expenditure: $ 39.29 Date of Expenditure: $ Q3 2026

Total Expenditures: $ 2468.10

(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: Mary Genung

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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: Mary Middle Name: _____ Last Name: Genung

Address: 1100 Lock 4 Road City: Gallatin State: TN Zip Code: 37066

Outstanding Loan Balance (Beginning) ..... $ 445.00

Loans Received ..... $ 0

Loan Payments ..... $ 0

Outstanding Loan (End) ..... $ 445.00

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

Date of Loan: 2/24/2026

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) ..... $ 445.00

Loans Received ..... $ 0

Loan Payments ..... $ 0

Outstanding Loan (End) ..... $ 445.00