



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/7/2026 a. Candidate or Committee Name: Kathy Stuart for School Board

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

4. Campaign Address: 1116B Littleton Ranch Rd
City: Castalian Springs State: TN Zip Code: 37031 Phone: 985-768-6178

5. Candidate Home Address: Same as above
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: _____

6. Office Sought: (include district number, if applicable) School Board District 9

7. Name of Political Treasurer (may be candidate): Christopher Alexander
Political Treasurer Email Address: C.ALEXANDER082485@GMAIL.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: 4/26/2026 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: Kathy Stuart Date: 7/7/2026
Political Treasurer Signature: Chris Alex Date: 7/7/26
Witness Signature: Holly Alexander Date: 7/7/26
Witness Signature: Ben Van Date: 7/7/26

12. Summary:

a. Balance On Hand Last Report	\$ <u>390.00</u>
b. Total Receipts This Period	\$ <u>2,840.00</u>
c. Total Disbursements This Period	\$ <u>2,581.17</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>648.83</u>
e. Total Loans Outstanding	\$ <u>0</u>
f. Total Obligations Outstanding	\$ <u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: KATHY STUART

14. Reporting Period: Start Date: 4/26/20 End Date: 6/30/20

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 0
(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) \$ 0
- 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.) \$ 2,840.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 2,581.17
(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.)..... \$ 2,581.17

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: KATHY STARR
2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26
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: JAMES Middle Name: _____ Last Name: ROHNKOHL
Address: 434 REMINGTON AVE City: GALLATIN State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/27/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: JOHN Middle Name: _____ Last Name: BREINIG
Address: 1025 FORT ROSE DR City: GALLATIN State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/27/26 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: MARSHALL Middle Name: _____ Last Name: WRIGHT
Address: 2571 HWY 31 E City: GALLATIN State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: 4/27/26 Aggregate This Election: \$ 150.00

Business or Organization Name: _____ OR
First Name: DENNIS Middle Name: _____ Last Name: CAVAN
Address: 1167 PLANTATION PASS City: GALLATIN State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 4/27/26 Aggregate This Election: \$ 200.00

Total Contributions: \$ 550.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: KATHY STUART
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 550.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: AJAN Middle Name: _____ Last Name: ISSA
Address: 1065 ROBERTSON RD City: CHATTW State: TN Zip Code: 37046
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/21/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: SHIRLEY Middle Name: _____ Last Name: SMITH
Address: 112 STRATHMORE WAY City: CHATTW State: TN Zip Code: 37075
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 75.00 Date of Contribution: 4/27/24 Aggregate This Election: \$ 75.00

Business or Organization Name: _____ OR
First Name: ALAN Middle Name: _____ Last Name: DRIVER
Address: 135 Mt. Vernon Rd City: BETHPAGE State: TN Zip Code: 37022
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 4/27/24 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ OR
First Name: MART WILKINSON Middle Name: _____ Last Name: WILKINSON
Address: 1036 SUNSET DOWNS City: HENDERSONVILLE State: TN Zip Code: 37075
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/27/24 Aggregate This Election: \$ 100.00

Total Contributions: \$ 1,075.00

(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: KATHY STUART
2. Reporting Period: Start Date: 4/24/24 End Date: 6/30/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,075.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: DARREN Middle Name: H. Last Name: CASEN
Address: PO Box 2121 City: CASALIA SPRINGS State: TN Zip Code: 37081
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/21/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: STEVE Middle Name: _____ Last Name: BAKES
Address: 100 ESTELL CIRCLE City: PORTLAND State: TN Zip Code: 37148
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/21/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: ARLON Middle Name: _____ Last Name: CUNNINGHAM
Address: 344 GREAT BELT RIVER BLVD City: GALLATIN State: TN Zip Code: 37064
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/21/24 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: DARREN Middle Name: _____ Last Name: CASEN
Address: 1112 LITTLETON RANCH RD City: CASALIA SPRINGS State: TN Zip Code: 37081
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 15.00 Date of Contribution: 4/21/24 Aggregate This Election: \$ 115.00

Total Contributions: \$ 1,490.00

(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: KATHY STARK
2. Reporting Period: Start Date: 4/26/24 End Date: 6/30/24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,490.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: K-CORP SERVICES OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 13018 HAWKWOOD RD City: BOBALUSA State: LA Zip Code: 70127
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/27/20 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ OR
First Name: JIMMY Middle Name: _____ Last Name: OVERTON
Address: 901 LAKEVIEW CT City: GALLATIN State: TN Zip Code: 37066
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 5/24/20 Aggregate This Election: \$ 500.00

Business or Organization Name: LAMBERTH DAC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 812 City: ROZMAN State: TN Zip Code: 37148
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 6/11/20 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ OR
First Name: REN Middle Name: _____ Last Name: HARRIS
Address: 1051 EDGEWATER CIRCLE City: GALLATIN State: TN Zip Code: 37064
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 6/22/24 Aggregate This Election: \$ 250.00

Total Contributions: \$ 2,840.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: KARLY STURT
2. Reporting Period: Start Date: 4/26/24 End Date: 6/30/24
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: CHICK-FIL-A OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 101 N. BELVEDERE DR City: GALLATIN State: TN Zip Code: 37060
Purpose of Expenditure: FEEDING VOLUNTEERS
Amount of Expenditure: \$ 238.14 Date of Expenditure: \$ 5/8/24

Business or Organization Name: ULINE OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 88741 City: CHICAGO State: IL Zip Code: 60680
Purpose of Expenditure: Labels
Amount of Expenditure: \$ 376.66 Date of Expenditure: \$ 5/28/24

Business or Organization Name: 4 All Promos OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 20 Research Pkwy City: Old Saybrook State: CT Zip Code: 06475
Purpose of Expenditure: Door Hangers
Amount of Expenditure: \$ 737.46 Date of Expenditure: \$ 5/24/24

Business or Organization Name: ULINE OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 88741 City: CHICAGO State: IL Zip Code: 60680
Purpose of Expenditure: PUSH CARDS
Amount of Expenditure: \$ 247.40 Date of Expenditure: \$ 6/13/24

Business or Organization Name: ZAZZLE OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1200 Chestnut St City: MENLO PARK State: CA Zip Code: 94025
Purpose of Expenditure: CAR MAGNETS
Amount of Expenditure: \$ 178.39 Date of Expenditure: \$ 6/18/24

Total Expenditures: \$ 1,778.67

(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: KATHY SWARTZ
2. Reporting Period: Start Date: 4/24/20 End Date: 6/30/24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,778.07

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: ASAP PRINTING OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 116 IMPERIAL BLVD City: HENDERSONVILLE State: TN Zip Code: 37075
Purpose of Expenditure: PUSH CARDS
Amount of Expenditure: \$ 480.21 Date of Expenditure: \$ 6/15/24

Business or Organization Name: MR. SIGON MAN OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 129 Commerce Dr City: HENDERSONVILLE State: TN Zip Code: 37075
Purpose of Expenditure: YARD SIGNS
Amount of Expenditure: \$ 322.39 Date of Expenditure: \$ 6/21/24

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: \$ 2,581.17

(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.)