

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION VOTES ACTION PAC

ADDRESS (number and street)

P.O. BOX 17149

Check if different
than previously
reported. (ACC)

NASHVILLE

TN

37217

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00816173

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☒ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y
08 06 2026in the
State of

TN

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2026

through

M M M / D D D / Y Y Y Y Y Y
07 17 2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kilgore, Cara Doidge, , ,

Signature of Treasurer

Kilgore, Cara Doidge, , ,

Date

M M M / D D D / Y Y Y Y Y Y
07 25 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION VOTES ACTION PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2026 To: MM / DD / YYYY 07 / 17 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		66137.17
(b) Cash on Hand at Beginning of Reporting Period.....	19.29	
(c) Total Receipts (from Line 19)	0.00	68.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	19.29	66205.17
7. Total Disbursements (from Line 31)	0.00	66185.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19.29	19.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION VOTES ACTION PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2026

To:

M M / D D / Y Y Y Y
07 17 2026**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

0.00

68.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

68.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

0.00

68.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

0.00

68.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

0.00

68.00

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	- 17628.00	48557.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	- 17628.00	48557.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	17628.00	17628.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	66185.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	66185.88

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	68.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	68.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	- 17628.00	48557.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	- 17628.00	48557.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION VOTES ACTION PAC

Full Name (Last, First, Middle Initial)

A. TIRRC Votes

Mailing Address 3310 Ezell Rd

City
NashvilleState
TNZip Code
37211

Purpose of Disbursement

See Schedule E - Canvassing & Staff Time

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7			2	0	2	6		

FEC Identification Number

C**Transaction ID : SB21B.4459**

Amount of Each Disbursement this Period

- 17628.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

- 17628.00

- 17628.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 7
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION VOTES ACTION PAC		FEC IDENTIFICATION NUMBER ▼ CC00816173	
Check if ☐ 24-hour report ☐ 48-hour report		New report ☐ Amends report filed on MM / DD / YYYY / / MM / DD / YYYY / /	
Full Name of Payee TIRRC Votes ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 17 / 2026 MM / DD / YYYY / /	
Mailing Address 3310 Ezell Rd		Amount MM / DD / YYYY / / 17628.00	
City Nashville	State TN	Zip Code 37211	Transaction ID : SE.4460 Date of Disbursement or Obligation MM / DD / YYYY 07 / 17 / 2026 MM / DD / YYYY / /
Purpose of Expenditure Canvassing & Staff Time		Category/ Type MM / DD / YYYY / / / /	
Name of Federal Candidate: PEARSON, JUSTIN J., ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate ☐ President ☐ Senate District: 09 State: TN	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY / / MM / DD / YYYY / /	
Mailing Address		Amount MM / DD / YYYY / / / /	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY / / MM / DD / YYYY / /
Purpose of Expenditure		Category/ Type MM / DD / YYYY / / / /	
Name of Federal Candidate:		☐ Support ☐ Oppose Office Sought: ☐ House ☐ Senate ☐ President ☐ Senate District: State:	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		MM / DD / YYYY / / 17628.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		MM / DD / YYYY / / / /	
(c) TOTAL Independent Expenditures		MM / DD / YYYY / / 17628.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Kilgore, Cara Doidge, , ,		Date MM / DD / YYYY 07 / 25 / 2026 MM / DD / YYYY / /	