CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/7/2026 2.a. Candidate or Committee Name: Aaron Smith

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: 1036 Pine Creek Dr

City: Arrington State: TN Zip Code: 37014 Phone: _____

5. Candidate Home Address: 1036 Pine Creek Drive

City: Arrington State: TN Zip Code: 37014 Phone: 6152934623

Candidate Email Address: adsmith411@gmail.com

6. Office Sought: (include district number, if applicable) County Commissioner - Dist 05

7. Name of Political Treasurer (may be candidate): Aaron Smith

Political Treasurer Email Address: adsmith411@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	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

-2470-447E-B80E-9539
07/07/26 - 11:19 PM

12. Summary:

a.	Balance On Hand Last Report	$ $3,042.48
b.	Total Receipts This Period	$ $6,603.49
c.	Total Disbursements This Period	$ $1,933.74
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $7,712.23
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Aaron Smith

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) ..... $ $6,603.49

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.) ..... $ $6,603.49

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,933.74
(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.)..... $ $1,933.74

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: Aaron Smith

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: Elaine Middle Name: _____ Last Name: Ganick

Address: 209 Bent Creek Trace City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $25.00 Date of Contribution: 4/29/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Hartwell

Address: 4965 Maxwell Landing Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/30/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Bethany Middle Name: _____ Last Name: Hays

Address: 1617 Dandelion Court City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Trisha Middle Name: _____ Last Name: Zeringue

Address: 2712 Cortlandt Lane City: Nolensville State: TN Zip Code: 37135

Occupation: Teacher Employer: Williamson County Schools

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $10.00

Total Contributions: $ $145.00

(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: Aaron Smith

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) $ $145.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Trisha Middle Name: _____ Last Name: Madsen

Address: 325 Baronswood Dr City: Nolensville State: TN Zip Code: 37135

Occupation: QA Manager Employer: Artists Outlaws Agency

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Julie Middle Name: _____ Last Name: Gossett

Address: 8358 Patterson road City: College Grove State: TN Zip Code: 37046

Occupation: Marketing Director Employer: Consumer Attorneys of California

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Scott A Middle Name: _____ Last Name: Peek

Address: 1701 Muirwood Blvd City: Murfreesboro State: TN Zip Code: 37128

Occupation: Corporation communications Employer: Optum

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

Amount of Contribution: $ $20.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Simonovich

Address: 7105 Newfields Court City: College Grove State: TN Zip Code: 37046

Occupation: University Employer: University

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

Amount of Contribution: $ $25.00 Date of Contribution: 5/3/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $290.00

(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: Aaron Smith

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) $ $290.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Terri Middle Name: _____ Last Name: Fitzgerald

Address: 330 THETAHILL RD City: Murfreesboro State: TN Zip Code: 37130

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $8.56 Date of Contribution: 5/3/2026 Aggregate This Election: $ $8.56

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Spinner

Address: 1294 Galloping Hill Way City: Arrington State: TN Zip Code: 37014

Occupation: Freelance Copywriter and Editor Employer: Self-employed

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

Amount of Contribution: $ $17.12 Date of Contribution: 5/3/2026 Aggregate This Election: $ $17.12

Business or Organization Name: _____ **OR**

First Name: Mary Ellen Middle Name: _____ Last Name: McLeod

Address: 1403 Chamber St. City: Rogersville State: TN Zip Code: 37857

Occupation: Retired Attorney Employer: Not Employed

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

Amount of Contribution: $ $8.56 Date of Contribution: 5/3/2026 Aggregate This Election: $ $8.56

Business or Organization Name: _____ **OR**

First Name: Kimbre Middle Name: _____ Last Name: Birdwell

Address: 3768 Mealer Rd City: Chapel Hill State: TN Zip Code: 37034

Occupation: Teacher Employer: Williamson County Schools

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

Amount of Contribution: $ $8.54 Date of Contribution: 5/3/2026 Aggregate This Election: $ $8.54

Total Contributions: $ $332.78

(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: Aaron Smith

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) $ $332.78

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kelsey Middle Name: _____ Last Name: Down

Address: 4601 Robin Lane City: Nolensville State: TN Zip Code: 37135

Occupation: Technical Editor Employer: Apple

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

Amount of Contribution: $ $8.73 Date of Contribution: 5/4/2026 Aggregate This Election: $ $8.73

Business or Organization Name: _____ **OR**

First Name: Elaine Middle Name: _____ Last Name: Ganick

Address: 209 Bent Creek Trace City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $25.00 Date of Contribution: 5/4/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Liza Middle Name: _____ Last Name: Emch

Address: 7200 Ellaby court City: College Grove State: TN Zip Code: 37046

Occupation: NP Employer: Na

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/4/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Mary Beth Middle Name: _____ Last Name: Hershey

Address: 3001 lilybelle court City: Arrington State: TN Zip Code: 37014

Occupation: Care coordinator Employer: Gentiva

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

Amount of Contribution: $ $20.00 Date of Contribution: 5/4/2026 Aggregate This Election: $ $20.00

Total Contributions: $ $396.51

(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: Aaron Smith

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) $ $396.51

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Megan Middle Name: _____ Last Name: Corlew

Address: 4686 Sawmill Place City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $25.00 Date of Contribution: 5/4/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Ashley Middle Name: _____ Last Name: Jeffrey

Address: 1202 Creekside Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Nurse Employer: Vanderbilt

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/5/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Caroline Middle Name: _____ Last Name: Campbell

Address: 760 Cowan Drive City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $25.00 Date of Contribution: 5/6/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: April Middle Name: _____ Last Name: Garza-Wight

Address: 1509 Passion Flower Ct City: Nolensville State: TN Zip Code: 37135

Occupation: Nurse Practitioner Employer: N/A

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

Amount of Contribution: $ $20.00 Date of Contribution: 5/6/2026 Aggregate This Election: $ $20.00

Total Contributions: $ $476.51

(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: Aaron Smith

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) $ $476.51

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Stults

Address: 2525 Carmine St City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/6/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Kimberly Middle Name: L Last Name: Harper

Address: 815 Colfax Dr City: Nashville State: TN Zip Code: 37214

Occupation: Healthcare Management Employer: Women OB

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

Amount of Contribution: $ $8.73 Date of Contribution: 5/7/2026 Aggregate This Election: $ $8.73

Business or Organization Name: _____ **OR**

First Name: Bridgett Middle Name: _____ Last Name: Wilson

Address: 1275 Countryside Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Property manager Employer: Self employees

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/8/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Laurie Middle Name: _____ Last Name: Bostelman

Address: 5954 Fishing Creek Road City: Nolensville State: TN Zip Code: 37135

Occupation: Design and Development Manag Employer: R1 RCM

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/8/2026 Aggregate This Election: $ $50.00

Total Contributions: $ $595.24

(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: Aaron Smith

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) $ $595.24

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: McLean

Address: 4876 Powder Spring Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Nurse Practitioner Employer: Complete Womens Care

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

Amount of Contribution: $$10.00 Date of Contribution: 5/8/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: Steele Last Name: Hutzel

Address: 2137 Sugar Mill Drive City: Nolensville State: TN Zip Code: 37135

Occupation: Music Industry Employer: O'Neil Hagaman LLC

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

Amount of Contribution: $$50.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Hamilton

Address: 3045 Ballenger Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Self Employed Employer: Self Employed

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

Amount of Contribution: $$15.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $15.00

Business or Organization Name: _____ **OR**

First Name: Maggie Middle Name: _____ Last Name: Gruening

Address: 3061 Ballenger Dr City: Nolensville State: TN Zip Code: 37135

Occupation: CSM Employer: Platform Science

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

Amount of Contribution: $$25.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $695.24

(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: Aaron Smith

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) $ $695.24

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kimberly Middle Name: _____ Last Name: Roma

Address: 500 Clemente Ave City: Nolensville State: TN Zip Code: 37135

Occupation: Sales Employer: Nuvei

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

Amount of Contribution: $$10.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Lindsey Middle Name: _____ Last Name: Hinds-Brown

Address: 309Baronswood Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Teacher Employer: Wcs

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

Amount of Contribution: $$10.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Kate Middle Name: _____ Last Name: Kennedy

Address: 1120 Oak Creek Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Communications Employer: YMCA

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

Amount of Contribution: $$10.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Amy Middle Name: _____ Last Name: Cooke

Address: 1012 Bitticks Creek City: Nolensville State: TN Zip Code: 37135

Occupation: SLP Employer: Enhabit

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

Amount of Contribution: $$10.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ $10.00

Total Contributions: $ $735.24

(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: Aaron Smith

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) $ $735.24

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Andrea Middle Name: _____ Last Name: Madison

Address: 1247 Creekside Drive City: Nolensville State: TN Zip Code: 37135

Occupation: HRIS Manager Employer: Bridgestone

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

Amount of Contribution: $$50.00 Date of Contribution: 5/10/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Reba Middle Name: _____ Last Name: Wright

Address: 3236 Locust Hollow City: Nolensville State: TN Zip Code: 37135

Occupation: VP sales and marketing Employer: CP Rigging/LaborLinc

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

Amount of Contribution: $$50.00 Date of Contribution: 5/11/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Stults

Address: 2525 Carmine St City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $$8.54 Date of Contribution: 5/12/2026 Aggregate This Election: $ $8.54

Business or Organization Name: _____ **OR**

First Name: Gretchen Middle Name: _____ Last Name: James

Address: 1853 Looking Glass Lane City: Nolensville State: TN Zip Code: 37135

Occupation: Fundraiser Employer: NCT

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

Amount of Contribution: $$25.00 Date of Contribution: 5/12/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $868.78

(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: Aaron Smith

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) $ $868.78

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Anne Middle Name: _____ Last Name: McGraw

Address: 213 Gilchrist South Circle City: Nolensville State: TN Zip Code: 37135

Occupation: Marketing Consultant Employer: Corta Consulting

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/13/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Becca Middle Name: _____ Last Name: Ripley

Address: 2775 Hillsboro Rd City: Brentwood State: TN Zip Code: 37027

Occupation: Business Owner Employer: Globe Trotter Properties

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/13/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Indya Middle Name: _____ Last Name: Furlong

Address: 321 Baronswood Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Teacher Employer: Wcs

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

Amount of Contribution: $ $20.00 Date of Contribution: 5/14/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Doug Middle Name: _____ Last Name: Barnes

Address: 176 Lodge Hall Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Engineer Employer: Enbridge

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

Amount of Contribution: $ $100.00 Date of Contribution: 5/16/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $1,088.78

(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: Aaron Smith

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) $ $1,088.78

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Peggy Middle Name: _____ Last Name: Zukas

Address: 6606 eudailey covington rd City: College Grove State: TN Zip Code: 37046

Occupation: Nursery Employer: Metrolina

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/16/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Caryn Middle Name: _____ Last Name: Miller

Address: 818 Stonebrook Blvd City: Nolensville State: TN Zip Code: 37135

Occupation: Teacher Employer: Bedford county schools

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

Amount of Contribution: $ $10.00 Date of Contribution: 5/17/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Michele Middle Name: _____ Last Name: Tamene

Address: 2001 Bocage Circle City: Nolensville State: TN Zip Code: 37135

Occupation: Chief Legal Officer Employer: American Addiction Centers Inc

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

Amount of Contribution: $ $25.00 Date of Contribution: 5/19/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Jennaca Middle Name: _____ Last Name: harris

Address: 1221 Creekside Drive City: Nolensville State: TN Zip Code: 37135

Occupation: IT Employer: State

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/19/2026 Aggregate This Election: $ $50.00

Total Contributions: $ $1,223.78

(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: Aaron Smith

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) $ $1,223.78

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Simmons

Address: 4836 Manassas Dr City: Brentwood State: TN Zip Code: 37027

Occupation: Sales Rep Employer: Magnolia Title

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

Amount of Contribution: $$50.00 Date of Contribution: 5/20/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Walker

Address: 1364 Creekside Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Marketing Manager Employer: Scholastic

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

Amount of Contribution: $$25.00 Date of Contribution: 5/20/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Hartwell

Address: 4965 Maxwell Landing Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $$8.71 Date of Contribution: 5/20/2026 Aggregate This Election: $ $8.71

Business or Organization Name: _____ **OR**

First Name: Cheryl Middle Name: _____ Last Name: Sachan

Address: 9115 Concord Hunt Circle City: Brentwood State: TN Zip Code: 37027

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $$10.00 Date of Contribution: 5/21/2026 Aggregate This Election: $ $10.00

Total Contributions: $ $1,317.49

(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: Aaron Smith

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) $ $1,317.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Benjamin Middle Name: _____ Last Name: Leeper

Address: 1360 Creekside Drive City: Nolensville State: TN Zip Code: 37135

Occupation: Project Manager Employer: Scholastic

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

Amount of Contribution: $$10.00 Date of Contribution: 5/21/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Hartwell

Address: 4965 Maxwell Landing Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $$100.00 Date of Contribution: 5/30/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Eileen Middle Name: _____ Last Name: Wolf

Address: 204 Milner Court City: Nolensville State: TN Zip Code: 37135

Occupation: Exec asst Employer: Providence

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

Amount of Contribution: $$1,800.0 Date of Contribution: 5/31/2026 Aggregate This Election: $ $1,800.0

Business or Organization Name: _____ **OR**

First Name: Lucyellen Middle Name: _____ Last Name: Dahlgren

Address: 7380 Nolensville Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $$150.00 Date of Contribution: 6/1/2026 Aggregate This Election: $ $150.00

Total Contributions: $ $3,377.49

(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: Aaron Smith

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) $ $3,377.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Ruth Middle Name: _____ Last Name: Osburn

Address: 2832 McCanless Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $20.00 Date of Contribution: 6/1/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Penny Middle Name: _____ Last Name: Kemle

Address: 2954 Spanntown Rd City: Arrington State: TN Zip Code: 37014

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $ $20.00 Date of Contribution: 6/1/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Katharine Middle Name: _____ Last Name: Sparks

Address: 2500 Broome St City: Nolensville State: TN Zip Code: 37135

Occupation: Speech pathologist Employer: TN Rehab Center

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

Amount of Contribution: $ $20.00 Date of Contribution: 6/1/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Konyn

Address: 525 Antebellum Ct City: Franklin State: TN Zip Code: 37064

Occupation: Admissions Counselor Employer: Lipscomb University

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

Amount of Contribution: $ $47.00 Date of Contribution: 6/2/2026 Aggregate This Election: $ $47.00

Total Contributions: $ $3,484.49

(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: Aaron Smith

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) $ $3,484.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Simmons

Address: 4836 Manassas Dr City: Brentwood State: TN Zip Code: 37027

Occupation: Sales Rep Employer: Magnolia Title

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

Amount of Contribution: $$47.00 Date of Contribution: 6/2/2026 Aggregate This Election: $ $47.00

Business or Organization Name: _____ **OR**

First Name: Anita Middle Name: _____ Last Name: Fowler

Address: 2660 Benington Pl City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $$25.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Beth Middle Name: _____ Last Name: YOUNGINER

Address: 2545 Benington Place City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $$20.00 Date of Contribution: 6/7/2026 Aggregate This Election: $ $20.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Hartwell

Address: 4965 Maxwell Landing Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $$110.00 Date of Contribution: 6/9/2026 Aggregate This Election: $ $110.00

Total Contributions: $ $3,686.49

(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: Aaron Smith

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) $ $3,686.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kathryn Middle Name: _____ Last Name: Shyamsunder

Address: 205 Bent Creek Trace City: Nolensville State: TN Zip Code: 37135

Occupation: Special Education Teacher Employer: Williamson County Schools

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

Amount of Contribution: $ $47.00 Date of Contribution: 6/10/2026 Aggregate This Election: $ $47.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Dickinsom

Address: 1040 Oak Creek City: Norene State: TN Zip Code: 37136

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/15/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Anna Middle Name: _____ Last Name: Johnson

Address: 509 Mer Rouge Court City: Nolensville State: TN Zip Code: 37135

Occupation: Teacher Employer: Williamson County Schools

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

Amount of Contribution: $ $25.00 Date of Contribution: 6/15/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Kati Middle Name: _____ Last Name: Dickerson

Address: 2256 Dominick Drive City: Nolensville State: TN Zip Code: 37135

Occupation: Clinical research contract negotia Employer: ICON

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

Amount of Contribution: $ $25.00 Date of Contribution: 6/15/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $3,883.49

(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: Aaron Smith

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) $ $3,883.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Wolf

Address: 204 Milner Court City: Nolensville State: TN Zip Code: 37135

Occupation: CPA Employer: Wolf Consulting PC

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

Amount of Contribution: $ $1,900.0 Date of Contribution: 6/19/2026 Aggregate This Election: $ $1,900.0

Business or Organization Name: _____ **OR**

First Name: Cheryl Middle Name: _____ Last Name: Sachan

Address: 9115 Concord Hunt Circle City: Brentwood State: TN Zip Code: 37027

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $ $10.00 Date of Contribution: 6/21/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Fuson

Address: 8060 Warren Drive City: Nolensville State: TN Zip Code: 37135

Occupation: Librarian Employer: Belmont University

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

Amount of Contribution: $ $25.00 Date of Contribution: 6/22/2026 Aggregate This Election: $ $25.00

Business or Organization Name: _____ **OR**

First Name: Laura Middle Name: _____ Last Name: Lambrecht

Address: 1401 Jersey Farm Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Manager Employer: Informa

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

Amount of Contribution: $ $50.00 Date of Contribution: 6/23/2026 Aggregate This Election: $ $50.00

Total Contributions: $ $5,868.49

(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: Aaron Smith

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) $ $5,868.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Ruth Middle Name: _____ Last Name: Osburn

Address: 2832 McCanless Rd City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $10.00 Date of Contribution: 6/25/2026 Aggregate This Election: $ $10.00

Business or Organization Name: _____ **OR**

First Name: Shelby Middle Name: _____ Last Name: Slowey

Address: 1013 Dortch Lane City: Nolensville State: TN Zip Code: 37135

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/27/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Terrence Middle Name: _____ Last Name: Mahnken

Address: 255 Croft Way City: Mount Juliet State: TN Zip Code: 37122

Occupation: Software Engineer Employer: CoStar Group

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/27/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Amanda Middle Name: _____ Last Name: Hiers

Address: 106 Mill Creek Lane City: Nolensville State: TN Zip Code: 37135

Occupation: QA Manager Employer: Hubsync

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

Amount of Contribution: $ $50.00 Date of Contribution: 6/29/2026 Aggregate This Election: $ $50.00

Total Contributions: $ $6,128.49

(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: Aaron Smith

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) $ $6,128.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Johnson

Address: 4103 Old Light Circle City: Arrington State: TN Zip Code: 37014

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $250.00 Date of Contribution: 6/29/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Lynn Middle Name: _____ Last Name: Meurer

Address: 1001 Orchard Hill Court City: Arrington State: TN Zip Code: 37014

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/29/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Therese Middle Name: _____ Last Name: Hartwell

Address: 4965 Maxwell Landing Dr City: Nolensville State: TN Zip Code: 37135

Occupation: Not employed Employer: Not employed

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/30/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: _____ Last Name: Irving

Address: 1001 Ochard Hill Court City: Arrington State: TN Zip Code: 37014

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ $25.00 Date of Contribution: 6/30/2026 Aggregate This Election: $ $25.00

Total Contributions: $ $6,603.49

(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: Aaron Smith

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: Printing Etc. **OR**

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

Address: 1411 South Dickerson Rd City: Goodlettsville State: TN Zip Code: 37072

Purpose of Expenditure: Yard Signs

Amount of Expenditure: $ $444.49 Date of Expenditure: $ 4/28/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 4/29/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 4/30/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/3/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/3/2026

Total Expenditures: $ $450.14

(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: Aaron Smith

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) $ $450.14

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/3/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/3/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.88 Date of Expenditure: $ 5/3/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/3/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/4/2026

Total Expenditures: $ $456.84

(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: Aaron Smith

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) $ $456.84

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/4/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.88 Date of Expenditure: $ 5/4/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/4/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/5/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/6/2026

Total Expenditures: $ $460.94

(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: Aaron Smith

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) $ $460.94

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.88 Date of Expenditure: $ 5/6/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/6/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/8/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/8/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/8/2026

Total Expenditures: $ $466.66

(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: Aaron Smith

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) $ $466.66

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.72 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/9/2026

Total Expenditures: $ $471.41

(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: Aaron Smith

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) $ $471.41

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/9/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/10/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/11/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/12/2026

Total Expenditures: $ $477.30

(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: Aaron Smith

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) $ $477.30

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/13/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/13/2026

Business or Organization Name: PC Signs **OR**

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

Address: 2534 Commerce Blvd City: Cincinnati State: OH Zip Code: 45241

Purpose of Expenditure: Yard Signs

Amount of Expenditure: $ $732.77 Date of Expenditure: $ 5/14/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.88 Date of Expenditure: $ 5/14/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 5/16/2026

Total Expenditures: $ $1,218.15

(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: Aaron Smith

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) $ $1,218.15

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/16/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/17/2026

Business or Organization Name: KEP Photography **OR**

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

Address: 1031 Crisp Springs Dr City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Photos

Amount of Expenditure: $ $50.00 Date of Expenditure: $ 5/18/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/19/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/19/2026

Total Expenditures: $ $1,273.48

(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: Aaron Smith

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) $ $1,273.48

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: Bonfire **OR**

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

Address: 3420 Pump Rd City: Henrico State: VA Zip Code: 23233

Purpose of Expenditure: Campaign T-shirts

Amount of Expenditure: $ $53.33 Date of Expenditure: $ 5/20/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 5/20/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 5/20/2026

Business or Organization Name: Bonfire **OR**

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

Address: 3420 Pump Rd City: Henrico State: VA Zip Code: 23233

Purpose of Expenditure: Campaign T-shirts

Amount of Expenditure: $ $28.85 Date of Expenditure: $ 5/21/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/21/2026

Total Expenditures: $ $1,359.13

(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: Aaron Smith

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) $ $1,359.13

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 5/21/2026

Business or Organization Name: Wix **OR**

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

Address: 100 Gansevoort Street City: New York State: NY Zip Code: 10014

Purpose of Expenditure: Website & domain

Amount of Expenditure: $ $35.55 Date of Expenditure: $ 5/22/2026

Business or Organization Name: Printing Etc. **OR**

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

Address: 1411 South Dickerson Rd City: Goodlettsville State: TN Zip Code: 37072

Purpose of Expenditure: Yard Signs

Amount of Expenditure: $ $214.01 Date of Expenditure: $ 5/28/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 5/30/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $58.73 Date of Expenditure: $ 5/31/2026

Total Expenditures: $ $1,671.46

(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: Aaron Smith

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) $ $1,671.46

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.76 Date of Expenditure: $ 6/2/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.76 Date of Expenditure: $ 6/2/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 6/5/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.88 Date of Expenditure: $ 6/7/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.81 Date of Expenditure: $ 6/9/2026

Total Expenditures: $ $1,680.72

(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: Aaron Smith

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) $ $1,680.72

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.76 Date of Expenditure: $ 6/10/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 6/15/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 6/15/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 6/15/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $61.98 Date of Expenditure: $ 6/19/2026

Total Expenditures: $ $1,750.04

(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: Aaron Smith

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) $ $1,750.04

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 6/21/2026

Business or Organization Name: EventPassHero **OR**

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

Address: 136 Forum Dr Ste 4 PMB 2010 City: Columbia State: SC Zip Code: 29229

Purpose of Expenditure: Nolensville Juneteenth Donation

Amount of Expenditure: $ $118.93 Date of Expenditure: $ 6/22/2026

Business or Organization Name: Wix **OR**

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

Address: 100 Gansevoort Street City: New York State: NY Zip Code: 10014

Purpose of Expenditure: Website & domain

Amount of Expenditure: $ $35.55 Date of Expenditure: $ 6/22/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 Date of Expenditure: $ 6/22/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 6/23/2026

Total Expenditures: $ $1,907.99

(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: Aaron Smith

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) $ $1,907.99

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $0.56 Date of Expenditure: $ 6/25/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 6/27/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 6/27/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.86 Date of Expenditure: $ 6/29/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $8.36 Date of Expenditure: $ 6/29/2026

Total Expenditures: $ $1,925.73

(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: Aaron Smith

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) $ $1,925.73

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: Act Blue **OR**

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 6/29/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $3.48 Date of Expenditure: $ 6/30/2026

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

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

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

Purpose of Expenditure: Fee & Stripe Fee

Amount of Expenditure: $ $1.05 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: $ _____

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: $ $1,933.74

(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.)