



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Nick McBride
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: P.O. Box 531
City: Knoxville State: TN Zip Code: 37901 Phone: _____
5. Candidate Home Address: 712 Sunnydale Rd
City: Knoxville State: TN Zip Code: 37923 Phone: _____
Candidate Email Address: electnickmcbride@gmail.com
6. Office Sought: (include district number, if applicable) County Trustee
7. Name of Political Treasurer (may be candidate): K Ray Pinkstaff
Political Treasurer Email Address: ray@pinkstafflaw.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

ABD6-415C-9918-0A22
07/10/26 - 3:49 PM

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$6,812.62</u>
b. Total Receipts This Period	\$ <u>\$5,600.00</u>
c. Total Disbursements This Period	\$ <u>\$5,798.26</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$6,614.36</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Nick McBride

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) \$ \$5,600.00
- 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.) \$ \$5,600.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$5,798.26
(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.)..... \$ \$5,798.26

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: Nick McBride
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: Ujesh Middle Name: _____ Last Name: Patel
Address: 430 Chapel Grove Ln City: Knoxville State: TN Zip Code: 37934
Occupation: Owner Employer: Sai Hotel Group
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 4/26/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Chris Middle Name: _____ Last Name: Knight
Address: 1717 Winston Rd City: Knoxville State: TN Zip Code: 37919
Occupation: President Employer: William Knight Insurance
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 4/28/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Halls Republican Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 119 Dry Gap Pike City: Knoxville State: TN Zip Code: 37918
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 5/18/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Kristi Middle Name: _____ Last Name: Wilder-Maddox
Address: 13190 Razell Way City: Knoxville State: TN Zip Code: 37932
Occupation: Owner Employer: First Priority Title Co Inc
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/8/2026 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$1,750.00
(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: Nick McBride
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) \$ \$1,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Volunteer REP Womens Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 150 Fox Rd City: Knoxville State: TN Zip Code: 37922
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/25/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Rutu Middle Name: _____ Last Name: Patel
Address: 8602 Yellow Aster Rd City: Knoxville State: TN Zip Code: 37931
Occupation: Business Owner Employer: Self
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Dipan Middle Name: _____ Last Name: Patel
Address: 7328 Coatbridge Ln City: Knoxville State: TN Zip Code: 37924
Occupation: Business Owner Employer: Self
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$750.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$750.00

Business or Organization Name: _____ **OR**
First Name: Hitesh Middle Name: _____ Last Name: Patidar
Address: 2924 Boyds Creek Hwy City: Sevierville State: TN Zip Code: 37876
Occupation: Business Owner Employer: Self
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$4,500.00
(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: Nick McBride
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) \$ \$4,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Parthkumar Middle Name: _____ Last Name: Patel
Address: 12236 Bethel Hollow Dr City: Knoxville State: TN Zip Code: 37932
Occupation: Business Owner Employer: Self
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: West Knox Republican Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9437 Ridges Meadow Ln City: Knoxville State: TN Zip Code: 37931
Occupation: N/A Employer: N/A
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: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$5,600.00

(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: Nick McBride
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: Canva **OR**

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

Address: 3212 E Cesar Chavez St City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$213.04 Date of Expenditure: \$ 4/26/2026

Business or Organization Name: Colby Photo **OR**

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

Address: 445 S Gay St #310 City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Photo

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 4/28/2026

Business or Organization Name: Tractor Supply **OR**

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

Address: 101 N Seven Oaks City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Sign Supplies

Amount of Expenditure: \$ \$61.15 Date of Expenditure: \$ 4/28/2026

Business or Organization Name: USAT Media Company **OR**

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

Address: 2332 News Sentinel Dr City: Knoxville State: TN Zip Code: 37921

Purpose of Expenditure: Subscription

Amount of Expenditure: \$ \$149.00 Date of Expenditure: \$ 5/3/2026

Business or Organization Name: Sams **OR**

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

Address: 8435 Walbrook City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Fuel

Amount of Expenditure: \$ \$73.76 Date of Expenditure: \$ 5/3/2026

Total Expenditures: \$ \$696.95

(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: Nick McBride
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) \$ \$696.95

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: Elders OR

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

Address: 150 N Forrest Park City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Sign Supplies

Amount of Expenditure: \$ \$35.82 Date of Expenditure: \$ 5/3/2026

Business or Organization Name: Don Gallo OR

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

Address: 10681 Hardin Valley City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Sign Supplies

Amount of Expenditure: \$ \$97.78 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Way City: Mento Park State: CA Zip Code: 94025

Purpose of Expenditure: AD

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Farragut Pres OR

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

Address: 11863 Kingston Pike City: Knoxville State: TN Zip Code: 37934

Purpose of Expenditure: AD

Amount of Expenditure: \$ \$590.00 Date of Expenditure: \$ 4/29/2026

Business or Organization Name: Tractor Supply OR

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

Address: 101 N Seven Oaks City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$10.91 Date of Expenditure: \$ 5/4/2026

Total Expenditures: \$ \$1,631.46

(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: Nick McBride
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) \$ \$1,631.46

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: Sams **OR**

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

Address: 8435 Walbrook City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Supplies for Election Day

Amount of Expenditure: \$ \$281.47 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Calhouns **OR**

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

Address: 6515 Kingston Pike City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Food Volunteers

Amount of Expenditure: \$ \$78.06 Date of Expenditure: \$ 5/5/2026

Business or Organization Name: Embassey Suites **OR**

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

Address: 507 S Gay City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Election Night

Amount of Expenditure: \$ \$69.77 Date of Expenditure: \$ 5/6/2026

Business or Organization Name: Don Gallo **OR**

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

Address: 10681 Hardin Valley City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Food Volunteers

Amount of Expenditure: \$ \$57.27 Date of Expenditure: \$ 5/6/2026

Business or Organization Name: Sams **OR**

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

Address: 8435 Walbrook City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Fuel

Amount of Expenditure: \$ \$91.29 Date of Expenditure: \$ 5/7/2026

Total Expenditures: \$ \$2,209.32

(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: Nick McBride
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) \$ \$2,209.32

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: Sams **OR**

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

Address: 8435 Walbrook City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Fuel

Amount of Expenditure: \$ \$90.39 Date of Expenditure: \$ 5/8/2026

Business or Organization Name: Enterprise **OR**

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

Address: 9616 Parkside Dr City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Sians

Amount of Expenditure: \$ \$444.05 Date of Expenditure: \$ 5/10/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Way City: Mento Park State: CA Zip Code: 94025

Purpose of Expenditure: AD

Amount of Expenditure: \$ \$149.94 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Bacon & Company **OR**

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

Address: 200 W Summit Hill Dr City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Printing - Tee Shirts

Amount of Expenditure: \$ \$516.21 Date of Expenditure: \$ 5/1/2026

Business or Organization Name: Parrot Printing **OR**

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

Address: 2007 Riverside Dr City: Knoxville State: TN Zip Code: 37915

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$125.64 Date of Expenditure: \$ 5/4/2026

Total Expenditures: \$ \$3,535.55

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Nick McBride
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) \$ \$3,535.55

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: Farragut Press **OR**

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

Address: PO Box 22847 City: Farragut State: TN Zip Code: 37933

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$690.00 Date of Expenditure: \$ 5/5/2026

Business or Organization Name: _____ **OR**

First Name: Michelle Middle Name: _____ Last Name: Anningson

Address: 1302 Madison Oaks Rd City: Knoxville State: TN Zip Code: 37924

Purpose of Expenditure: Consulting Fee

Amount of Expenditure: \$ \$1,040.00 Date of Expenditure: \$ 5/13/2026

Business or Organization Name: Coleman's Printing & Awards **OR**

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

Address: 4100 North Broadway City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$464.31 Date of Expenditure: \$ 6/3/2026

Business or Organization Name: Harland Clarke **OR**

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

Address: PO Box 30987 City: Salt Lake City State: UT Zip Code: 84130

Purpose of Expenditure: Office Supplies

Amount of Expenditure: \$ \$37.80 Date of Expenditure: \$ 6/10/2026

Business or Organization Name: Andedot/Fundraising Site **OR**

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

Address: 5555 Hilton Ave Ste 106 City: Baton Rouge State: LA Zip Code: 70808

Purpose of Expenditure: Fees

Amount of Expenditure: \$ \$30.60 Date of Expenditure: \$ 6/30/2026

Total Expenditures: \$ \$5,798.26

(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.)