



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 2/25/2025 2.a. Candidate or Committee Name: Anna Golladay
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 3/4/2025
4. Campaign Address: 1479 FAGAN ST
City: CHATTANOOGA State: TN Zip Code: 37408 Phone: 5409740117
5. Candidate Home Address: 1479 FAGAN ST
City: CHATTANOOGA State: TN Zip Code: 37408 Phone: 5409740117
Candidate Email Address: campaign@annagolladay.com
6. Office Sought: (include district number, if applicable) Chattanooga Council Dist. 8
7. Name of Political Treasurer (may be candidate): Kendra McCahill
Political Treasurer Email Address: kendramccahill@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: 1/15/2025 End Date: 2/25/2025
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

-3621-474E-86B0-4323

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$1,332.34</u>
b. Total Receipts This Period	\$ <u>\$1,098.61</u>
c. Total Disbursements This Period	\$ <u>\$760.23</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$1,670.72</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: Anna Golladay

14. Reporting Period: Start Date: 1/15/2025 End Date: 2/25/2025

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) \$ \$1,098.61
- 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.) \$ \$1,098.61

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$760.23
(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.)..... \$ \$760.23

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: Anna Golladay
2. Reporting Period: Start Date: 1/15/2025 End Date: 2/25/2025
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: APRIL Middle Name: _____ Last Name: BERENDS

Address: 1405 CHAMERLAIN AVE City: CHATTANOOGA State: TN Zip Code: 37404

Occupation: PRIEST Employer: N/A

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 1/25/2025 Aggregate This Election: \$ \$190.70

Business or Organization Name: _____ **OR**

First Name: ERICA Middle Name: _____ Last Name: FENTON

Address: 102 Braxton Park Ct City: GOODLETSVILLE State: TN Zip Code: 37072

Occupation: VETERINARIAN Employer: N/A

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 1/31/2025 Aggregate This Election: \$ \$238.00

Business or Organization Name: _____ **OR**

First Name: CANDACE Middle Name: _____ Last Name: EZPARZA

Address: 627 OGrady Dr City: CHATTANOOGA State: TN Zip Code: 37419

Occupation: BUSINESS OWNER Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 2/3/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: JON JON Middle Name: _____ Last Name: Weslowski

Address: 1808 Duncan Avenue City: CHATTANOOGA State: TN Zip Code: 37404

Occupation: SELF EMPLOYED Employer: SELF

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

Amount of Contribution: \$ \$238.61 Date of Contribution: 2/6/2025 Aggregate This Election: \$ \$228.77

Total Contributions: \$ \$788.61

(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: Anna Golladay
2. Reporting Period: Start Date: 1/15/2025 End Date: 2/25/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$788.61

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: CHARLOTTE Middle Name: _____ Last Name: SMITH

Address: 289 Waterwalk Place City: CHATTANOOGA State: TN Zip Code: 37406

Occupation: COMMUNICATIONS Employer: N/A

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 2/6/2025 Aggregate This Election: \$ \$9.30

Business or Organization Name: _____ **OR**

First Name: DAVID Middle Name: _____ Last Name: BROCK

Address: 508 East 5th Street City: CHATTANOOGA State: TN Zip Code: 37403

Occupation: BUSINESS OWNER Employer: SELF

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 2/12/2025 Aggregate This Election: \$ \$191.70

Business or Organization Name: _____ **OR**

First Name: JOHN Middle Name: _____ Last Name: MCGINLEY

Address: 1615 Cowart St City: CHATTANOOGA State: TN Zip Code: 37408

Occupation: HOMELESS COORDINATOR Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 2/19/2025 Aggregate This Election: \$ \$95.70

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: \$ \$1,098.61

(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: Anna Golladay
2. Reporting Period: Start Date: 1/15/2025 End Date: 2/25/2025
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: SAKARI OR

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: \$ (\$13.18) Date of Expenditure: \$ 1/16/2025

Business or Organization Name: SAKARI OR

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 1/16/2025

Business or Organization Name: SAKARI OR

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 1/18/2025

Business or Organization Name: CAMPAIGN VERIFY OR

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: CAMPAIGN SOFTWARE

Amount of Expenditure: \$ \$95.00 Date of Expenditure: \$ 1/22/0005

Business or Organization Name: IMPACTIVE OR

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: \$ \$184.71 Date of Expenditure: \$ 2/1/2025

Total Expenditures: \$ \$356.53

(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: Anna Golladay
2. Reporting Period: Start Date: 1/15/2025 End Date: 2/25/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$356.53

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: USPS **OR**

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: CAMPAIGN MAILING

Amount of Expenditure: \$ \$252.00 Date of Expenditure: \$ 2/4/2025

Business or Organization Name: ELDERS ACE **OR**

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

Address: N/A City: N/A State: TN Zip Code: 12345

Purpose of Expenditure: CAMPAIGN SUPPLIES

Amount of Expenditure: \$ \$98.17 Date of Expenditure: \$ 2/8/2025

Business or Organization Name: METAPAY **OR**

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

Address: N City: N State: TN Zip Code: 12345

Purpose of Expenditure: FACEBOOK ADVERTISING

Amount of Expenditure: \$ \$53.53 Date of Expenditure: \$ 2/19/2025

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: \$ \$760.23

(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.)