



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/31/2025 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: 7/1/2024 End Date: 1/15/2025
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

-8799-4925-83C-1249C
01/31/25 - 8:56 PM

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$0.00</u> |
| b. Total Receipts This Period | \$ <u>\$7,104.74</u> |
| c. Total Disbursements This Period | \$ <u>\$5,772.40</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$1,332.34</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: 7/1/2024 End Date: 1/15/2025

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) \$ \$7,104.74
- 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.) \$ \$7,104.74

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$5,772.40
(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.)..... \$ \$5,772.40

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: 7/1/2024 End Date: 1/15/2025
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: Chris Middle Name: _____ Last Name: Taylor

Address: 418 Everlee Ln City: Mt Juliet State: TN Zip Code: 37122

Occupation: Financial Advisor Employer: Financial Advisor

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Colin Middle Name: _____ Last Name: Womack

Address: 626 Spears Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: Bartender Employer: Bartender

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Erika Middle Name: _____ Last Name: Bukva

Address: 306 Clydesdale Dr City: Stephens City State: VA Zip Code: 22655

Occupation: Marketing Employer: Marketing

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

Amount of Contribution: \$ \$30.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$30.00

Business or Organization Name: _____ **OR**

First Name: Karen Middle Name: _____ Last Name: Kessler

Address: 4200 Laclede Ave Apt 106 City: St Louis State: MO Zip Code: 63108

Occupation: School Administrator Employer: School Administrator

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$430.00

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$430.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Fonda Middle Name: _____ Last Name: Sundeen
Address: UNK City: Marco Island State: FL Zip Code: 34145
Occupation: Business Owner Employer: Business Owner
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Linda Middle Name: _____ Last Name: Feagans
Address: 1201 Chamberlain Ave City: Chattanooga State: TN Zip Code: 37408
Occupation: Business Owner Employer: Business Owner
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: John Middle Name: _____ Last Name: Sweet
Address: 65875 Center St City: Cassopolis State: MI Zip Code: 49031
Occupation: Business Owner Employer: Business Owner
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 7/30/2024 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: Joel Middle Name: _____ Last Name: Armstrong
Address: 1407 Jefferson St City: Chattanooga State: Tn Zip Code: 37408
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 7/31/2024 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$1,830.00
(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,830.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Rusty Middle Name: _____ Last Name: Ambrose
Address: UNK City: Boulder State: Co Zip Code: 80301
Occupation: Sales Employer: Sales
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 8/1/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Shannon Middle Name: _____ Last Name: Roche
Address: UNK City: Annapolis State: MD Zip Code: 21401
Occupation: UNK Employer: UNK
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 8/1/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Cara Middle Name: _____ Last Name: Battestille
Address: UNK City: Pittsburgh State: PA Zip Code: 15120
Occupation: Nurse Employer: Nurse
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 8/2/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Tyler Middle Name: _____ Last Name: Wilson
Address: UNK City: Chattanooga State: TN Zip Code: 37405
Occupation: Business Owner Employer: Business Owner
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 8/6/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$2,005.00
(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,005.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Phil Middle Name: _____ Last Name: Porterfield

Address: UNK City: Charles Town State: WV Zip Code: 12345

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 8/18/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Stacy Middle Name: _____ Last Name: Zonts

Address: UNK City: Greenville State: SC Zip Code: 12345

Occupation: Veterinarian Employer: Veterinarian

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/6/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Taylor Middle Name: _____ Last Name: Thurmond

Address: 3805 Memphis Dr City: Chattanooga State: TN Zip Code: 37415

Occupation: Purchasing Employer: Purchasing

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/8/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Amanda Middle Name: _____ Last Name: Queen

Address: 927 E 11th St City: Chattanooga State: TN Zip Code: 37403

Occupation: Office Manager Employer: Office Manager

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/8/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$2,405.00

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,405.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Aaron Middle Name: _____ Last Name: Bright
Address: 7580 Tylers Hill Ct City: West Chester State: OH Zip Code: 45069
Occupation: Sales Employer: Sales
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 9/8/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Sara Middle Name: _____ Last Name: Wilcox
Address: UNK City: Asheville State: NC Zip Code: 12345
Occupation: Pastor Employer: Pastor
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 9/8/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Erin Middle Name: _____ Last Name: Law
Address: UNK City: Amherst State: NY Zip Code: 12345
Occupation: Educator Employer: Educator
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 9/8/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Ben Middle Name: _____ Last Name: Lazar
Address: 1525 Maplewood Court City: Woodstock State: GA Zip Code: 30189
Occupation: Marketing Director Employer: Marketing Director
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 9/6/2024 Aggregate This Election: \$ \$47.60

Total Contributions: \$ \$2,630.00
(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,630.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mary Lea Middle Name: _____ Last Name: Kirby

Address: 346 Foxborough Drive City: Brunswick State: OH Zip Code: 44212

Occupation: Teacher Employer: Teacher

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 9/7/2024 Aggregate This Election: \$ \$23.80

Business or Organization Name: _____ **OR**

First Name: Iomola Middle Name: _____ Last Name: Bauman

Address: 2668 s race st City: Denver State: CO Zip Code: 80210

Occupation: Unknown Employer: Unknown

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 9/7/2024 Aggregate This Election: \$ \$23.80

Business or Organization Name: _____ **OR**

First Name: Virginia Middle Name: _____ Last Name: Crawfird

Address: 435 East Gibbons Road City: Dayton State: OH Zip Code: 45449

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 9/7/2024 Aggregate This Election: \$ \$47.60

Business or Organization Name: _____ **OR**

First Name: April Middle Name: _____ Last Name: Berends

Address: 1405 Chamberlain Ave City: Chattanooga State: TN Zip Code: 37404

Occupation: Priest Employer: Priest

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/10/2024 Aggregate This Election: \$ \$95.20

Total Contributions: \$ \$2,830.00

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,830.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Heather Middle Name: _____ Last Name: Fann

Address: 1192 Abby Lane City: Hixson State: TN Zip Code: 37343

Occupation: Realtor Employer: Realtor

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$23.80

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Michener

Address: 161 Somerset Drive City: Patterson State: NY Zip Code: 12563

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$47.60

Business or Organization Name: _____ **OR**

First Name: Chet Middle Name: _____ Last Name: Green

Address: UNK City: Atlanta State: GA Zip Code: 12345

Occupation: Restaurant Owner Employer: Restaurant Owner

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Anna Middle Name: _____ Last Name: Menken

Address: UNK City: Nashville State: TN Zip Code: 12345

Occupation: Musician Employer: Musician

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

Amount of Contribution: \$ \$44.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$44.00

Total Contributions: \$ \$3,049.00

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,049.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: JD Middle Name: _____ Last Name: Eicher
Address: UNK City: Liberty Township State: OH Zip Code: 12345
Occupation: Musician Employer: Musician
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Lauren Middle Name: _____ Last Name: Turner
Address: UNK City: Houston State: TX Zip Code: 12345
Occupation: Research Analyst Employer: Research Analyst
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$30.00 Date of Contribution: 9/14/2024 Aggregate This Election: \$ \$30.00

Business or Organization Name: _____ **OR**
First Name: Aaron Middle Name: _____ Last Name: Bright
Address: 7580 Tylers Hill Ct City: West Chester State: OH Zip Code: 45069
Occupation: Sales Employer: Sales
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 9/26/2024 Aggregate This Election: \$ \$95.20

Business or Organization Name: _____ **OR**
First Name: Morgan Middle Name: _____ Last Name: Golladay
Address: 4201 Fullerton Court City: Milford State: DE Zip Code: 19963
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 9/29/2024 Aggregate This Election: \$ \$95.20

Total Contributions: \$ \$3,304.00
(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,304.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Purcell

Address: 4705 Gross Mill Road City: Hampstead State: MD Zip Code: 21074

Occupation: Sales Director Employer: Sales Director

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 10/10/2024 Aggregate This Election: \$ \$47.60

Business or Organization Name: _____ **OR**

First Name: Farhad Middle Name: _____ Last Name: Raiszadeh

Address: UNK City: Chattanooga State: TN Zip Code: 37405

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 10/28/2024 Aggregate This Election: \$ \$47.70

Business or Organization Name: _____ **OR**

First Name: Taylor Middle Name: _____ Last Name: Thurmond

Address: 3805 Memphis Dr City: Chattanooga State: TN Zip Code: 37415

Occupation: Purchasing Director Employer: Purchasing Director

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 11/17/2024 Aggregate This Election: \$ \$191.70

Business or Organization Name: _____ **OR**

First Name: Spencer Middle Name: _____ Last Name: Smolen

Address: 809 central ave City: Chattanooga State: TN Zip Code: 37403

Occupation: IT Personnel Employer: IT Personnel

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 11/23/2024 Aggregate This Election: \$ \$23.70

Total Contributions: \$ \$3,629.00

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,629.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: George Middle Name: _____ Last Name: Robinson

Address: 1031 Fort Stephenson Rd City: Lookout Mountain State: TN Zip Code: 30750

Occupation: CEO Employer: CEO

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 11/26/2024 Aggregate This Election: \$ \$479.70

Business or Organization Name: _____ **OR**

First Name: Joel Middle Name: _____ Last Name: Armstrong

Address: 1407 Jefferson St City: Chattanooga State: TN Zip Code: 37408

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$260.73 Date of Contribution: 11/29/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Cath Shaw Middle Name: _____ Last Name: Truelove

Address: 1200 Russell Street City: Chattanooga State: TN Zip Code: 37405

Occupation: Esate Advisor Employer: Esate Advisor

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

Amount of Contribution: \$ \$104.48 Date of Contribution: 11/30/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Larry Middle Name: _____ Last Name: Varnell

Address: 552 Bluebird Cir City: Chattanooga State: TN Zip Code: 37412

Occupation: Performer Employer: Performer

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/1/2024 Aggregate This Election: \$ \$47.70

Total Contributions: \$ \$4,544.21

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,544.21

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kendra Middle Name: _____ Last Name: McCahill

Address: 602 Holly ave City: South Pittsburg State: TN Zip Code: 37380

Occupation: Student Employer: Student

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

Amount of Contribution: \$ \$52.40 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Collin Middle Name: _____ Last Name: Rogers

Address: 106 E Euclid Ave City: Chattanooga State: TN Zip Code: 37415

Occupation: Realtor Employer: Realtor

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$95.70

Business or Organization Name: _____ **OR**

First Name: Katie Middle Name: _____ Last Name: Nelson

Address: 903 Sterling Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: VP Employer: VP

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$47.70

Business or Organization Name: _____ **OR**

First Name: Gina Middle Name: _____ Last Name: Fann

Address: 529 Forest Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: Insurance Broker Employer: Insurance Broker

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

Amount of Contribution: \$ \$260.73 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$5,007.34

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,007.34

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Angela Middle Name: _____ Last Name: Ward

Address: 504 Beck Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: Real Estate Broker Employer: Real Estate Broker

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$47.70

Business or Organization Name: _____ **OR**

First Name: Taylor Middle Name: _____ Last Name: Hicks

Address: 3998 Arkwright Street City: Lupton City State: TN Zip Code: 37351

Occupation: Registered Nurse Employer: Registered Nurse

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

Amount of Contribution: \$ \$52.40 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Ryan Middle Name: _____ Last Name: Ashburn

Address: 3408 Whittaker Ave City: Chattanooga State: TN Zip Code: 37415

Occupation: Electrician Employer: Electrician

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$47.70

Business or Organization Name: _____ **OR**

First Name: Lin Middle Name: _____ Last Name: Feagans

Address: 1201 Chamberlain Ave City: Chattanooga State: TN Zip Code: 37408

Occupation: Business Owner Employer: Business Owner

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

Amount of Contribution: \$ \$45.00 Date of Contribution: 12/3/2024 Aggregate This Election: \$ \$45.00

Total Contributions: \$ \$5,204.74

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,204.74

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Top Flight Inc. **OR**

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

Address: PO Box 927 City: Chattanooga State: TN Zip Code: 37401

Occupation: Corporate Donation Employer: Corporate Donation

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

Amount of Contribution: \$ \$1,800.00 Date of Contribution: 12/10/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Golladay

Address: PO Box 159 City: Stephens City State: VA Zip Code: 22655

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/24/2024 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: \$ \$7,104.74

(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: 7/1/2024 End Date: 1/15/2025
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: TNDP **OR**

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

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

Purpose of Expenditure: Voter Files/ Database (Vote Builder TNDP)

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 8/1/2024

Business or Organization Name: TNDP **OR**

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

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

Purpose of Expenditure: Voter Files/ Database (Vote Builder TNDP)

Amount of Expenditure: \$ \$67.20 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: SAKARI **OR**

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

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

Purpose of Expenditure: Texting Software

Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: GODADDY **OR**

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

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

Purpose of Expenditure: Website

Amount of Expenditure: \$ \$104.75 Date of Expenditure: \$ 7/1/2024

Business or Organization Name: GO DADDY **OR**

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

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

Purpose of Expenditure: Website

Amount of Expenditure: \$ \$39.98 Date of Expenditure: \$ 9/1/2024

Total Expenditures: \$ \$356.93

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$356.93

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: GO DADDY **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Website
Amount of Expenditure: \$ \$203.88 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: PRINTPLACE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Postcards/Handouts
Amount of Expenditure: \$ \$352.15 Date of Expenditure: \$ 9/1/2024

Business or Organization Name: PRINT PLACE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Palm Cards/ Business Cards
Amount of Expenditure: \$ \$57.90 Date of Expenditure: \$ 9/1/2024

Business or Organization Name: PURE BUTTONS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Buttons/Stickers
Amount of Expenditure: \$ \$55.22 Date of Expenditure: \$ 9/1/2024

Business or Organization Name: STICKERS ON THE CHEAP **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Buttons/Stickers
Amount of Expenditure: \$ \$94.90 Date of Expenditure: \$ 10/1/2024

Total Expenditures: \$ \$1,120.98

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,120.98

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: DIRT CHEAP SIGNS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Yard Signs
Amount of Expenditure: \$ \$1,789.04 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: CITY OF CREATORS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Mainx24 Parade Registration
Amount of Expenditure: \$ \$75.00 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: Staples (Supplies) **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Staples (Supplies)
Amount of Expenditure: \$ \$8.73 Date of Expenditure: \$ 10/21/2024

Business or Organization Name: SAKARI **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Texting Software
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 11/10/2024

Business or Organization Name: Amazon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Amazon (Supplies)
Amount of Expenditure: \$ \$127.80 Date of Expenditure: \$ 11/20/2024

Total Expenditures: \$ \$3,146.55

(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: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,146.55

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: Amazon **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Amazon (Supplies)
Amount of Expenditure: \$ \$21.84 Date of Expenditure: \$ 11/21/2024

Business or Organization Name: Pax Breu Ruim **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Pax Breu Ruim (campaign kickoff party)
Amount of Expenditure: \$ \$325.50 Date of Expenditure: \$ 12/3/2024

Business or Organization Name: Party City **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Party City (campaign kickoff party supplies)
Amount of Expenditure: \$ \$11.54 Date of Expenditure: \$ 12/1/2024

Business or Organization Name: Target **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Target
Amount of Expenditure: \$ \$65.55 Date of Expenditure: \$ 12/1/2024

Business or Organization Name: SAKARI **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Texting Software
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 12/1/2024

Total Expenditures: \$ \$3,595.98

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,595.98

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: Brightside **OR**

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

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

Purpose of Expenditure: Brightside (marketing)

Amount of Expenditure: \$ \$425.00 Date of Expenditure: \$ 12/24/2001

Business or Organization Name: Signsonthecheap **OR**

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

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

Purpose of Expenditure: (campaign signs)

Amount of Expenditure: \$ \$714.76 Date of Expenditure: \$ 12/30/2024

Business or Organization Name: Brightside **OR**

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

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

Purpose of Expenditure: MARKETING

Amount of Expenditure: \$ \$425.00 Date of Expenditure: \$ 12/30/2024

Business or Organization Name: Elder's Ace **OR**

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

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

Purpose of Expenditure: Elder's Ace (campaign supplies)

Amount of Expenditure: \$ \$55.66 Date of Expenditure: \$ 1/8/2025

Business or Organization Name: Elder's Ace **OR**

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

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

Purpose of Expenditure: Elder's Ace (campaign supplies)

Amount of Expenditure: \$ \$124.34 Date of Expenditure: \$ 1/8/2025

Total Expenditures: \$ \$5,340.74

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Anna Golladay
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,340.74

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: ELDER'S ACE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Elder's Ace (campaign supplies)
Amount of Expenditure: \$ \$106.50 Date of Expenditure: \$ 1/9/2025

Business or Organization Name: SAKARI **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Texting Software
Amount of Expenditure: \$ \$25.00 Date of Expenditure: \$ 1/1/2025

Business or Organization Name: SAKARI **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: UNK City: N/A State: N/A Zip Code: 12345
Purpose of Expenditure: Texting Software
Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 1/1/2025

Business or Organization Name: TVFCU **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: N/A City: N/A State: TN Zip Code: 37408
Purpose of Expenditure: Bank Fees
Amount of Expenditure: \$ \$7.00 Date of Expenditure: \$ 7/1/2024

Business or Organization Name: TVFCU **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: N/A City: N/A State: TN Zip Code: 37408
Purpose of Expenditure: BANK FEES
Amount of Expenditure: \$ \$7.00 Date of Expenditure: \$ 8/1/2024

Total Expenditures: \$ \$5,531.24

(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: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,531.24

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: TVFCU **OR**

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

Address: N/A City: N/A State: TN Zip Code: 37408

Purpose of Expenditure: BANK FEES

Amount of Expenditure: \$ \$7.00 Date of Expenditure: \$ 9/1/2024

Business or Organization Name: TVFCU **OR**

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

Address: N/A City: N/A State: TN Zip Code: 37408

Purpose of Expenditure: BANK FEES

Amount of Expenditure: \$ \$7.00 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: SAKARI **OR**

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

Address: UNK City: UNK State: TN Zip Code: 37408

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 1/15/2025

Business or Organization Name: Homegoods **OR**

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

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

Purpose of Expenditure: PARADE CANDY

Amount of Expenditure: \$ \$52.76 Date of Expenditure: \$ 12/1/2024

Business or Organization Name: Aldi **OR**

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

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

Purpose of Expenditure: KICKOFF PARTY FOOD

Amount of Expenditure: \$ \$129.40 Date of Expenditure: \$ 12/1/2024

Total Expenditures: \$ \$5,772.40

(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.)