



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Danielle Nadeau
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: PO Box 332344
City: Murfreesboro State: TN Zip Code: 37133 Phone: _____
5. Candidate Home Address: 6404 Bradyville Pike
City: Murfreesboro State: TN Zip Code: 37127 Phone: 9315486333
Candidate Email Address: dnadeauforcommissioner@gmail.com
6. Office Sought: (include district number, if applicable) County Commission District #06
7. Name of Political Treasurer (may be candidate): Sarah Clark
Political Treasurer Email Address: treasurer.dnadeau@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 _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$549.80</u>
b. Total Receipts This Period	\$ <u>\$925.00</u>
c. Total Disbursements This Period	\$ <u>\$1,011.34</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$463.46</u>
e. Total Loans Outstanding	\$ <u>\$300.00</u>
f. Total Obligations Outstanding	\$ <u>\$482.58</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Danielle Nadeau

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) \$ \$825.00
- c. Loans Received This Reporting Period..... \$ \$100.00
- 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.) \$ \$925.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,011.34
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ \$3.93
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$1,011.34

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ \$86.76
- b. Itemized In-Kind Contributions Received This Period \$ \$86.76
- c. Total In-Kind Contributions Received This Period \$ \$173.52

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ \$482.58

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Danielle Nadeau
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: Dionne Middle Name: _____ Last Name: Rucker

Address: 509 Comet Ct City: Murfreesboro State: TN Zip Code: 37127

Occupation: Scheduling Employer: CSSD

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: Denise Middle Name: _____ Last Name: Boyce

Address: 6815 Gum Puckett Road City: Murfreesboro State: TN Zip Code: 37127

Occupation: RN Employer: St. Thomas Rutherford

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/22/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Ferry

Address: 1501 BELLE OAKS DR City: Murfreesboro State: TN Zip Code: 37130

Occupation: Photographer Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/10/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Deanna Middle Name: _____ Last Name: Nadeau

Address: 4251 Lytle Creek Dr City: Murfreesboro State: TN Zip Code: 37127

Occupation: Deputy Clerk Employer: Rutherford County

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/22/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$800.00

(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: Danielle Nadeau
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) \$ \$800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Leigh Ann Middle Name: _____ Last Name: Merritt

Address: 218 Callender Court City: Christiana State: TN Zip Code: 37037

Occupation: Lab Manager Employer: BioVentures, Inc.

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 6/26/2026 Aggregate This Election: \$ \$25.00

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: \$ _____

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: \$ \$825.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Danielle Nadeau
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

First Name: Danielle Middle Name: _____ Last Name: Nadeau

Address: PO Box 332344 City: Murfreesboro State: TN Zip Code: 37133

Occupation: Codes Inspector Employer: City of Murfreesboro

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

In-Kind Contribution Value: \$ \$86.76 In-Kind Contribution Date: 6/26/2026 Aggregate This Election: \$ \$86.76

Description of In-Kind Contribution: "Tabling items"

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) ☐

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ \$86.76

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Danielle Nadeau
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: Staples OR

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

Address: 1740 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Printing - banners

Amount of Expenditure: \$ \$36.44 Date of Expenditure: \$ 5/18/2026

Business or Organization Name: RUCO Pride OR

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

Address: 906 Ridgely Road City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Donation/event

Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: _____ OR

First Name: Precious Middle Name: _____ Last Name: Parham

Address: 529 Stetson Court City: Murfreesboro State: TN Zip Code: 37128

Purpose of Expenditure: T-shirts

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 6/9/2026

Business or Organization Name: Stewart's Special Events OR

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

Address: 939 N Thompson Lane City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Event Supplies

Amount of Expenditure: \$ \$35.15 Date of Expenditure: \$ 6/12/2026

Business or Organization Name: Blackman Community Club OR

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

Address: 4310 Manson Pike City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Blackman Barbecue

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 6/19/2026

Total Expenditures: \$ \$421.59

(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: Danielle Nadeau
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) \$ \$421.59

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 Kiosk OR

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

Address: S. Church St City: Murfreesboro State: TN Zip Code: 37133

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$1.56 Date of Expenditure: \$ 6/22/2026

Business or Organization Name: Staples OR

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

Address: 1740 Old Fort Pkwy City: Murfreesboro State: TN Zip Code: 37129

Purpose of Expenditure: Printing

Amount of Expenditure: \$ \$56.45 Date of Expenditure: \$ 6/26/2026

Business or Organization Name: The Vinyl Room Murfreesboro OR

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

Address: 1660 Middle Tennessee Blvd City: Murfreesboro State: TN Zip Code: 37130

Purpose of Expenditure: Shirt supplies

Amount of Expenditure: \$ \$32.92 Date of Expenditure: \$ 6/26/2026

Business or Organization Name: ACTBLUE OR

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

Address: PO Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: fees (Actblue / stripe)

Amount of Expenditure: \$ \$23.82 Date of Expenditure: \$ 6/30/2026

Business or Organization Name: TN Democratic Party OR

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

Address: 4900 Centennial Blvd, Suite 300 City: Nashville State: TN Zip Code: 37209

Purpose of Expenditure: Votebuilder

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 6/12/2026

Total Expenditures: \$ \$636.34

(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: Danielle Nadeau
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) \$ \$636.34

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: 100Signs, LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 31198 Beck Rd, City: Novi State: MI Zip Code: 48377
Purpose of Expenditure: Signs
Amount of Expenditure: \$ \$375.00 Date of Expenditure: \$ 6/23/2026

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: \$ _____

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: \$ \$1,011.34

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Danielle Nadeau
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: Danielle Middle Name: _____ Last Name: Nadeau

Address: PO Box 332344 City: Murfreesboro State: TN Zip Code: 37133

Outstanding Loan Balance (Beginning) \$ \$200.00

Loans Received \$ \$100.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$300.00

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

Date of Loan: 6/29/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ \$200.00

Loans Received \$ \$100.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$300.00

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Danielle Nadeau

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: ACTBLUE

First Name: _____ Middle Name: _____

Last Name: _____

Address: PO Box 962017

City: Boston

State: MA Zip Code: 02196

Description of
Obligation:

fees (Actblue / stripe)

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$3.93

\$1.88

\$3.93

\$1.88

Business Name: Four Eyes Printing

First Name: _____ Middle Name: _____

Last Name: _____

Address: 3709 Elene Way

City: Murfreesboro

State: TN Zip Code: 37129

Description of
Obligation:

Signs

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$0.00

\$480.70

\$0.00

\$480.70

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of
Obligation:

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$

\$

\$

\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of
Obligation:

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$

\$

\$

\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$3.93

\$482.58

\$3.93

\$482.58