



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 1/23/2026 2.a. Candidate or Committee Name: Mark Herndon

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 2907 Leggett Rd
 City: Sale Creek State: TN Zip Code: 37373 Phone: 4236532187

5. Candidate Home Address: 2907 Leggett Rd
 City: Sale Creek State: TN Zip Code: 37373 Phone: 4236532187
 Candidate Email Address: mark@votemarkformayor.com

6. Office Sought: (include district number, if applicable) County Mayor

7. Name of Political Treasurer (may be candidate): Timothy Gorman
 Political Treasurer Email Address: tagorman@comcast.net

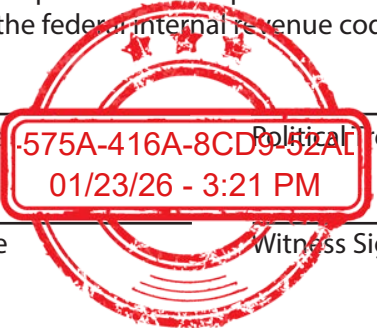
8. Category or Report: (check one)
 First Quarter Second Quarter Third Quarter Fourth Quarter Pre-Primary Pre-General
 Mid-Year Supplemental Year-End Supplemental Runoff Election

9. Reporting Period: Start Date: 12/30/2025 End Date: 1/15/2026

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: 575A-416A-8CD9-52A1 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>\$495.00</u>
c. Total Disbursements This Period	\$ <u>\$13.91</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$481.09</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: Mark Herndon

14. Reporting Period: Start Date: 12/30/2025 End Date: 1/15/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$85.00
(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) \$ \$410.00
- 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.) \$ \$495.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$13.91
(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.)..... \$ \$13.91

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$360.00
- c. Total In-Kind Contributions Received This Period \$ \$360.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Mark Herndon
2. Reporting Period: Start Date: 12/30/2025 End Date: 1/15/2026
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: Mark Middle Name: _____ Last Name: Herndon
Address: 2907 Leggett Rd City: Sale Creek State: TN Zip Code: 37373
Occupation: general contractor Employer: self employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$110.00 Date of Contribution: 12/30/2025 Aggregate This Election: \$ \$110.00

Business or Organization Name: _____ **OR**
First Name: Nicole Middle Name: _____ Last Name: Bruner
Address: 1292 Teddy's Place City: Mt. Juliet State: TN Zip Code: 37122
Occupation: teacher Employer: East End Preparatory
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Lauren Middle Name: _____ Last Name: Tewalt
Address: 2331 Little Bend Rd City: Signal Mountain State: TN Zip Code: 37377
Occupation: program assistant Employer: UT - Institute of Agriculture
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/14/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: Hampton
Address: 1229 Mountain Brook Circle City: Signal Mountain State: TN Zip Code: 37377
Occupation: program manager Employer: TVA
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/14/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$410.00

(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: Mark Herndon
2. Reporting Period: Start Date: 12/30/2025 End Date: 1/15/2026
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: Hannah Middle Name: _____ Last Name: Miller-Thatcher
Address: 4600 Tennessee Ave City: Chattanooga State: TN Zip Code: 37409
Occupation: graphic designer Employer: The H Creative
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ \$360.00 In-Kind Contribution Date: 1/15/2026 Aggregate This Election: \$ \$360.00
Description of In-Kind Contribution: website design

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: \$ \$360.00

(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: Mark Herndon
2. Reporting Period: Start Date: 12/30/2025 End Date: 1/15/2026
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: ActBlue **OR**

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

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: online fundraising fees

Amount of Expenditure: \$ \$5.34 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: ActBlue **OR**

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

Address: PO Box 441146 City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: online fundraising fees

Amount of Expenditure: \$ \$8.57 Date of Expenditure: \$ 1/16/2026

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: \$ _____

Total Expenditures: \$ \$13.91

(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.)