



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/8/2026 2.a. Candidate or Committee Name: David Queen
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: PO BOX 1445
City: HIXSON State: TN Zip Code: 37343 Phone: _____
5. Candidate Home Address: 1715 CHIPPENHAM DRIVE
City: HIXSON State: TN Zip Code: 37343 Phone: _____
Candidate Email Address: DQUEEN@QFSC.COM
6. Office Sought: (include district number, if applicable) State Exec Committeeman Dist. 11
7. Name of Political Treasurer (may be candidate): TOM MARSHALL
Political Treasurer Email Address: TOMMARSHALL1971@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: 4/1/2026 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>\$1,004.50</u> |
| b. Total Receipts This Period | \$ <u>\$4,815.00</u> |
| c. Total Disbursements This Period | \$ <u>\$2,973.69</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$2,845.81</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: David Queen

14. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$150.00
(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) \$ \$4,665.00
- 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.) \$ \$4,815.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,973.69
(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.)..... \$ \$2,973.69

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$900.00
- c. Total In-Kind Contributions Received This Period \$ \$900.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: David Queen
2. Reporting Period: Start Date: 4/1/2026 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: ELLIS Middle Name: _____ Last Name: SMITH

Address: 642 E 19TH STREET City: CHATTANOOGA State: TN Zip Code: 37408

Occupation: EXTERNAL AFFAIRS Employer: CITY OF CHATTANOOGA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/20/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: PATRICK Middle Name: _____ Last Name: WAGNER

Address: 6700 MOSS LAKE DRIVE City: HIXSON State: TN Zip Code: 37343

Occupation: ATTORNEY Employer: WAGNER & WEEKS PLLC

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/11/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: PAULINA Middle Name: _____ Last Name: MADARIS

Address: 1024 READS LAKE ROAD City: CHATTANOOGA State: TN Zip Code: 37415

Occupation: ADMINISTRATIVE Employer: US SENATOR MARSHA BLACKBURN

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/14/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: ROGER Middle Name: _____ Last Name: LAYNE

Address: 129 WALNUT STREET UNIT 313 City: CHATTANOOGA State: TN Zip Code: 37403

Occupation: MANAGING PARTNER Employer: EAST TECH MANUFACTURING CO. LLC

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/19/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: NATHAN Middle Name: _____ Last Name: BOSSHARDT
Address: 2757 HAYWOOD AVENUE City: CHATTANOOGA State: TN Zip Code: 37415
Occupation: ATTORNEY Employer: LAW OFFICE OF NATHAN D BOSSHARDT
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/21/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: CANDICE Middle Name: _____ Last Name: CANTRELL
Address: 8167 FOX GLOVE DRIVE City: OOLTEWAH State: TN Zip Code: 37363
Occupation: RETIRED Employer: RETIRED
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: SHERI Middle Name: _____ Last Name: SAHRLING
Address: 5840 NORTH PARK ROAD City: HIXSON State: TN Zip Code: 37343
Occupation: REGISTERED DIETICIAN Employer: SELF EMPLOYED
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/28/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: PAULINA Middle Name: _____ Last Name: MADARIS
Address: 1024 READS LAKE ROAD City: CHATTANOOGA State: TN Zip Code: 37415
Occupation: ADMINISTRATIVE Employer: US SENATOR MARSHA BLACKBURN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/30/2026 Aggregate This Election: \$ \$350.00

Total Contributions: \$ \$900.00
(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$900.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: MARTY Middle Name: _____ Last Name: HAYNES
Address: PO BOX 398 City: HIXSON State: TN Zip Code: 37343
Occupation: ASSESSOR OF PROPERTY Employer: HAMILTON COUNTY
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/7/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: RYAN Middle Name: _____ Last Name: JENKINS
Address: 2052 FLAT TOP LANE City: SODDY DAISY State: TN Zip Code: 37379
Occupation: STUDENT Employer: STUDENT
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$115.00 Date of Contribution: 6/12/2026 Aggregate This Election: \$ \$115.00

Business or Organization Name: TRI STAR VICTORY FUND **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO BOX 754 City: HIXSON State: TN Zip Code: 37343
Occupation: STATE REPRESENTATIVE Employer: STATE OF TENNESSEE
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: MICHAEL Middle Name: _____ Last Name: BARTO
Address: 5751 UPTAIN ROAD, UPTAIN BL City: CHATTANOOGA State: TN Zip Code: 37411
Occupation: CPA Employer: BARTO, HOSS & COMPANY PC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$2,765.00
(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,765.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: R BERRY Middle Name: _____ Last Name: WATSON
Address: 428 MOWBRAY PIKE City: SODDY DAISY State: TN Zip Code: 37379
Occupation: RETIRED Employer: RETIRED
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: VINCENT Middle Name: _____ Last Name: BUTLER
Address: 6504 LAKE SHADOWS CIRCLE City: HIXSON State: TN Zip Code: 37343
Occupation: CONSULTANT Employer: BUTLER CONSULTING
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: RON Middle Name: _____ Last Name: QUEEN
Address: 1516 CAMPBELL ROAD City: GOODLETTSVILLE State: TN Zip Code: 37072
Occupation: FINANCIAL ANALYST Employer: STATE OF TENNESSEE
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/19/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: TOMMY Middle Name: _____ Last Name: MARLIN
Address: 7529 FOSTER HIXSON CEMETE City: HIXSON State: TN Zip Code: 37343
Occupation: OWNER Employer: MARLIN FINANCE & LEASING
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/22/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$3,615.00
(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,615.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: LARRY Middle Name: _____ Last Name: HENRY
Address: 1718 SEDGEFIELD ROAD City: OOLTEWAH State: TN Zip Code: 37363
Occupation: CIRCUIT CLERK Employer: HAMILTON COUNTY
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/26/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: COMMITTEE TO ELECT ESTHER HELTON **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO BOX 9132 City: CHATTANOOGA State: TN Zip Code: 37412
Occupation: STATE REPRESENTATIVE Employer: STATE OF TENNESSEE
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/26/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: RON Middle Name: _____ Last Name: BAILEY
Address: 10109 ROLLING WIND DRIVE City: SODDY DAISY State: TN Zip Code: 37379
Occupation: REGISTERED REPRESENTATIVE Employer: SELF
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/26/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: ARCH Middle Name: _____ Last Name: TRIMBLE
Address: 368 MAGNOLIA VALE DRIVE City: CHATTANOOGA State: TN Zip Code: 37419
Occupation: CONSULTANT Employer: ARCH ABOUT TN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 6/29/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$4,565.00
(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,565.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: GEOFF Middle Name: _____ Last Name: HOLDEN

Address: 1533 ELDRIDGE ROAD City: SODDY DAISY State: TN Zip Code: 37379

Occupation: SALES MANAGER Employer: MCLAIN FOODS

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/30/2026 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: \$ _____

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: \$ \$4,665.00

(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 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: LIGHTHOUSE MEDIA **OR**

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

Address: PO BOX 24383 City: CHATTANOOGA State: TN Zip Code: 37422

Occupation: ADVERTISING Employer: LIGHTHOUSE MEDIA

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

In-Kind Contribution Value: \$ \$900.00 In-Kind Contribution Date: 5/22/2026 Aggregate This Election: \$ \$900.00

Description of In-Kind Contribution: Ads for June July & August

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: \$ \$900.00

(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 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: HAMILTON COUNTY REPUBLICAN PARTY **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1200 MOUNTAIN CREEK ROAD City: CHATTANOOGA State: TN Zip Code: 37405
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$518.15 Date of Expenditure: \$ 5/13/2026

Business or Organization Name: MARKCO PRINTING **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1609 HAMILL ROAD City: HIXSON State: TN Zip Code: 37343
Purpose of Expenditure: 1500 Business Cards. 3" Round Sticker (250) & 150 18x24 signs
Amount of Expenditure: \$ \$1,625.64 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: CITY OF SODDY DAISY **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9835 DAYTON PIKE City: SODDY DAISY State: TN Zip Code: 37379
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: THE CHATTANOOGAN.COM **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO BOX 2331 City: CHATTANOOGA State: TN Zip Code: 37409
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: THE CHATTANOOGAN.COM **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO BOX 231 City: CHATTANOOGA State: TN Zip Code: 37409
Purpose of Expenditure: ADVERTISING
Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 6/29/2026

Total Expenditures: \$ \$2,893.79

(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: David Queen
2. Reporting Period: Start Date: 4/1/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,893.79

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: ANEDOT INC **OR**

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

Address: 3723 GREENVILLE AVENUE City: STE DALLAS State: TX Zip Code: 75206

Purpose of Expenditure: PROCESSING FEE

Amount of Expenditure: \$ \$79.90 Date of Expenditure: \$ 6/30/2026

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: \$ \$2,973.69

(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.)