CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/9/2026 2.a. Candidate or Committee Name: Brian R Hornback

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: PO Box 22743

City: Knoxville State: TN Zip Code: 37933 Phone: _____

5. Candidate Home Address: 9706 Timber Oaks Ct

City: Knoxville State: TN Zip Code: 37922 Phone: 8656071108

Candidate Email Address: brian@brianhornback.com

6. Office Sought: (include district number, if applicable) R-State Executive Committeeman Dist. 6

7. Name of Political Treasurer (may be candidate): BRYAN HAIR

Political Treasurer Email Address: bryanhair@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.

DF18-4AC4-A4B1-179A
07/09/26 - 10:07 PM

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $6,786.94
b.	Total Receipts This Period	$ $1,336.90
c.	Total Disbursements This Period	$ $3,460.46
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $4,663.38
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Brian R Hornback

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) ..... $ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $1,336.90

c. Loans Received This Reporting Period..... $ _____

d. Interest Received This Reporting Period..... $ _____

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ $1,336.90

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $3,460.46
(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.)..... $ $3,460.46

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: Brian R Hornback

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: KAREN Middle Name: _____ Last Name: BROWN

Address: BEST EFFORT City: KNOXVILLE State: TN Zip Code: 37909

Occupation: RETIRED Employer: RETIRED

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

Amount of Contribution: $ $104.10 Date of Contribution: 4/9/2026 Aggregate This Election: $ $104.10

Business or Organization Name: _____ **OR**

First Name: STOKES Middle Name: _____ Last Name: NIELSON

Address: 112 BUCKHEAD CT City: BRENTWOOD State: TN Zip Code: 37027

Occupation: ENTREPRENUER Employer: CHANNEL GREATNESS

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

Amount of Contribution: $ $100.00 Date of Contribution: 4/17/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: NICK Middle Name: _____ Last Name: WALLACE

Address: 439 WESTBRIDGE DR City: KNOXVILLE State: TN Zip Code: 37919

Occupation: ATTORNEY Employer: PUBLIC DEFENDER

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

Amount of Contribution: $ $104.10 Date of Contribution: 5/16/2026 Aggregate This Election: $ $104.10

Business or Organization Name: _____ **OR**

First Name: GARRETT Middle Name: _____ Last Name: HOLT

Address: 8028 MAPLE RUN LN City: KNOXVILLE State: TN Zip Code: 37919

Occupation: STUDENT Employer: STUDENT

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

Amount of Contribution: $ $104.10 Date of Contribution: 5/23/2026 Aggregate This Election: $ $104.10

Total Contributions: $ $412.30

(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: Brian R Hornback

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) $ $412.30

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: GEORGE Middle Name: _____ Last Name: WALLACE

Address: 1286 BURGUNDY PLACE City: KNOXVILLE State: TN Zip Code: 37919

Occupation: REALTOR Employer: WALLACE TN

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

Amount of Contribution: $ $104.10 Date of Contribution: 5/26/2026 Aggregate This Election: $ $104.10

Business or Organization Name: _____ **OR**

First Name: JENNIFER Middle Name: _____ Last Name: LITTLE

Address: 352 KOSATI RD City: BEAN STATION State: TN Zip Code: 37708

Occupation: BEST EFFORT Employer: BEST EFFORT

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

Amount of Contribution: $ $260.25 Date of Contribution: 6/6/2026 Aggregate This Election: $ $260.25

Business or Organization Name: _____ **OR**

First Name: SEN. JESSIE Middle Name: _____ Last Name: SEAL

Address: P.O. BOX 211 City: NEW TAZEWELL State: TN Zip Code: 37879

Occupation: STATE SENATOR Employer: TN SENATE DIST. 8

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

Amount of Contribution: $ $260.25 Date of Contribution: 6/30/2026 Aggregate This Election: $ $260.25

Business or Organization Name: _____ **OR**

First Name: MICHAEL AND WENDY Middle Name: _____ Last Name: BITTEL

Address: 309 GOVERNORS LN City: FARRAGUT State: TN Zip Code: 37934

Occupation: RETIRED Employer: RETIIRED

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

Amount of Contribution: $ $200.00 Date of Contribution: 5/12/2026 Aggregate This Election: $ $200.00

Total Contributions: $ $1,236.90

(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: Brian R Hornback

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) $ $1,236.90

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ **OR**
First Name: REP. DAVE Middle Name: ______ Last Name: WRIGHT
Address: 6930 BORUFF RD City: CORRYTON State: TN Zip Code: 37721
Occupation: STATE REP Employer: TN STATE REP. DIST 19
Contribution Received For: ■ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $ $100.00 Date of Contribution: 4/2/2026 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: $ $1,336.90
(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: Brian R Hornback

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: DATA TECH **OR**

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

Address: 8616 ASHEVILLE HIGHWAY City: Knoxville State: TN Zip Code: 37924

Purpose of Expenditure: LAPTOP

Amount of Expenditure: $ $327.75 Date of Expenditure: $ 4/3/2026

Business or Organization Name: FEDEX **OR**

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

Address: 10205 KINGSTON PIKE City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: COPIES

Amount of Expenditure: $ $37.70 Date of Expenditure: $ 4/5/2026

Business or Organization Name: USPS **OR**

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

Address: 11409 MUNICIPAL CENTER DR City: KNOXVILLE State: TN Zip Code: 37933

Purpose of Expenditure: POSTAGE

Amount of Expenditure: $ $234.00 Date of Expenditure: $ 4/11/2026

Business or Organization Name: RED HEAD PROMOS **OR**

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

Address: 1102 BRADSHAW GARDEN City: KNOXVILLE State: TN Zip Code: 37912

Purpose of Expenditure: NOTE CARDS, POST CARDS

Amount of Expenditure: $ $365.99 Date of Expenditure: $ 4/13/2026

Business or Organization Name: WALMART **OR**

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

Address: 8445 WALBROOK DR City: KNOXVILLE State: TN Zip Code: 37923

Purpose of Expenditure: OFFICE SUPPLIES

Amount of Expenditure: $ $40.88 Date of Expenditure: $ 4/22/2026

Total Expenditures: $ $1,006.32

(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: Brian R Hornback

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) $ $1,006.32

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: SAMS CLUB **OR**

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

Address: 8435 WALBROOOK DR City: KNOXVILLE State: TN Zip Code: 37923

Purpose of Expenditure: FUEL

Amount of Expenditure: $ $50.46 Date of Expenditure: $ 4/29/2026

Business or Organization Name: WEIGELS **OR**

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

Address: 9710 WESTLAND DR City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: FUEL

Amount of Expenditure: $ $13.52 Date of Expenditure: $ 4/30/2026

Business or Organization Name: BEST BAGELS **OR**

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

Address: 138 S PETERS RD City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: SNACKS FOR VOLS

Amount of Expenditure: $ $58.81 Date of Expenditure: $ 5/8/2026

Business or Organization Name: WALGREENS **OR**

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

Address: S PETERS RD City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: PHOTOS

Amount of Expenditure: $ $36.04 Date of Expenditure: $ 5/16/2026

Business or Organization Name: SAMS CLUB **OR**

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

Address: 8435 WALBROOOK DR City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: FUEL

Amount of Expenditure: $ $71.15 Date of Expenditure: $ 5/19/2026

Total Expenditures: $ $1,236.30

(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: Brian R Hornback

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) $ $1,236.30

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: OFFICE MAX **OR**

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

Address: 11012 PARKSIDE DR City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: COMPUTER JUMP DRIVES

Amount of Expenditure: $ $26.21 Date of Expenditure: $ 5/19/2026

Business or Organization Name: TENNESSEE REPUBLICAN PARTY **OR**

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

Address: 95 WHITE BRIDGE RD #414 City: NASHVILLE State: TN Zip Code: 37205

Purpose of Expenditure: STATESMENS DINNER TICKET

Amount of Expenditure: $ $300.00 Date of Expenditure: $ 5/25/2026

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: SAMS CLUB

Address: 8435 WALBROOOK DR City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: FUEL

Amount of Expenditure: $ $73.79 Date of Expenditure: $ 5/29/2026

Business or Organization Name: RED HEAD PROMOS **OR**

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

Address: 1102 BRADSHAW GARDEN City: KNOXVILLE State: TN Zip Code: 37912

Purpose of Expenditure: SIGNS

Amount of Expenditure: $ $710.13 Date of Expenditure: $ 6/12/2026

Business or Organization Name: WEIGELS **OR**

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

Address: 9710 WESTLAND DR City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: FUEL

Amount of Expenditure: $ $48.34 Date of Expenditure: $ 6/13/2026

Total Expenditures: $ $2,394.77

(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: Brian R Hornback

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) $ $2,394.77

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: FARRAGUT CLEANERS **OR**

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

Address: 120 S PETERS RD City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: SUIT

Amount of Expenditure: $ $42.85 Date of Expenditure: $ 6/12/2026

Business or Organization Name: USPS **OR**

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

Address: 11409 MUNICIPAL CENTER DR City: KNOXVILLE State: TN Zip Code: 37934

Purpose of Expenditure: POSTAGE

Amount of Expenditure: $ $427.00 Date of Expenditure: $ 6/13/2026

Business or Organization Name: LOUDON COUNTY REPUBLICAN PARTY **OR**

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

Address: BEST EFFORT City: LOUODN State: TN Zip Code: 37774

Purpose of Expenditure: MCNALLY DINNER

Amount of Expenditure: $ $80.00 Date of Expenditure: $ 6/20/2026

Business or Organization Name: JOHNATHANS GRILL **OR**

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

Address: 613 S MT JULIET City: MT JULIET State: TN Zip Code: 37138

Purpose of Expenditure: LUNCH

Amount of Expenditure: $ $28.00 Date of Expenditure: $ 6/29/2026

Business or Organization Name: COURTYARD BY MARRIOTT **OR**

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

Address: 1980 PROVIDENCE PARKWAY City: MT JULIET State: TN Zip Code: 37122

Purpose of Expenditure: ROOM

Amount of Expenditure: $ $224.44 Date of Expenditure: $ 6/28/2026

Total Expenditures: $ $3,197.06

(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: Brian R Hornback

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) $ $3,197.06

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: QUALITY LABEL AND TAG **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: 821HICKORY DR City: KNOXVILLE State: TN Zip Code: 37912
Purpose of Expenditure: LABELS
Amount of Expenditure: $ $263.40 Date of Expenditure: $ 6/9/2026

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: $ $3,460.46
(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.)