



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/28/2026 2.a. Candidate or Committee Name: Cadence Collins
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 12201 East Doncaster Drive
City: Knoxville State: TN Zip Code: 37932 Phone: _____
5. Candidate Home Address: 12201 E DONCASTER DR
City: Knoxville State: TN Zip Code: 37932 Phone: 8657191233
Candidate Email Address: cadenceforschoolboard@gmail.com
6. Office Sought: (include district number, if applicable) School Board, District 6
7. Name of Political Treasurer (may be candidate): Daniel Greene
Political Treasurer Email Address: degreene02@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: 7/1/2026 End Date: 7/27/2026
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>\$7,582.47</u>
b. Total Receipts This Period	\$ <u>\$869.67</u>
c. Total Disbursements This Period	\$ <u>\$3,778.41</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$4,673.73</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: Cadence Collins

14. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$50.00
(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) \$ \$819.67
- 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.) \$ \$869.67

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$3,778.41
(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.)..... \$ \$3,778.41

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$282.58
- c. Total In-Kind Contributions Received This Period \$ \$282.58

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Joseph Middle Name: _____ Last Name: Bailey
Address: 2612 Avondale Ave City: Knoxville State: TN Zip Code: 37917
Occupation: ERP Specialist Employer: CMH Inc
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$3.00 Date of Contribution: 7/1/2026 Aggregate This Election: \$ \$54.00

Business or Organization Name: _____ **OR**
First Name: David Middle Name: _____ Last Name: Massey
Address: PO Box 11854 City: Knoxville State: TN Zip Code: 37939
Occupation: Not Employed Employer: Not Employed
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 7/1/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: ANDREW Middle Name: _____ Last Name: MACDONALD
Address: 648 FERNWOOD RD City: Knoxville State: TN Zip Code: 37923
Occupation: CPA Employer: TVEC
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$6.00 Date of Contribution: 7/2/2026 Aggregate This Election: \$ \$42.00

Business or Organization Name: _____ **OR**
First Name: Joseph Middle Name: _____ Last Name: Bailey
Address: 2612 Avondale Avenue City: Knoxville State: TN Zip Code: 37917
Occupation: ERP Specialist Employer: CMH Inc
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1.00 Date of Contribution: 7/9/2026 Aggregate This Election: \$ \$55.00

Total Contributions: \$ \$110.00

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$110.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Katherine Middle Name: _____ Last Name: Brady
Address: 11345 Stonebriar Ln City: Knoxville State: TN Zip Code: 37932
Occupation: Web Developer Employer: Astronomer
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$10.00 Date of Contribution: 7/11/2026 Aggregate This Election: \$ \$30.00

Business or Organization Name: _____ **OR**
First Name: Mitchell Middle Name: _____ Last Name: Laubach
Address: 7333 Chartwell Road City: Knoxville State: TN Zip Code: 37931
Occupation: Engineer Employer: Mirion
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$6.00 Date of Contribution: 7/11/2026 Aggregate This Election: \$ \$38.00

Business or Organization Name: _____ **OR**
First Name: Shane Middle Name: _____ Last Name: Jackson
Address: 2233 Delta Way City: Knoxville State: TN Zip Code: 37919
Occupation: Banker Employer: Pinnacle Financial Partners
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 7/11/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: Oath **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 The Greene City: Dover State: DE Zip Code: 19901
Occupation: N/A Employer: N/A
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$0.67 Date of Contribution: 7/14/2026 Aggregate This Election: \$ \$0.67

Total Contributions: \$ \$226.67
(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$226.67

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Joseph Middle Name: _____ Last Name: Bailey

Address: 2612 Avondale Avenue City: Knoxville State: TN Zip Code: 37917

Occupation: ERP Specialist Employer: CMH Inc

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

Amount of Contribution: \$ \$2.00 Date of Contribution: 7/15/2026 Aggregate This Election: \$ \$57.00

Business or Organization Name: _____ **OR**

First Name: Louise Middle Name: _____ Last Name: Morin

Address: 4532 Haverty Drive City: Knoxville State: TN Zip Code: 37931

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 7/16/2026 Aggregate This Election: \$ \$145.00

Business or Organization Name: Knox County Democratic Women's Club **OR**

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

Address: PO BOX 50622 City: Knoxville State: TN Zip Code: 37950

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/16/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: _____ Last Name: Wise

Address: 4905 Mountaincrest Drive City: Knoxville State: TN Zip Code: 37918

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 7/17/2026 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$498.67

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$498.67

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Diane Middle Name: _____ Last Name: Bird

Address: 4920 Governorwood Dr City: Powell State: TN Zip Code: 37849

Occupation: Med tech Employer: Covenant Health

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 7/18/2026 Aggregate This Election: \$ \$105.00

Business or Organization Name: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Langston

Address: 8038 Ellisville Lane City: Knoxville State: TN Zip Code: 37909

Occupation: Teacher Employer: Knox County Schools

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 7/18/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**

First Name: Matthew Middle Name: _____ Last Name: Threlkeld

Address: 5062 sims rd City: Knoxville State: TN Zip Code: 37920

Occupation: Media Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/20/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Kohl Middle Name: _____ Last Name: Threlkeld

Address: 5062 sims rd City: Knoxville State: TN Zip Code: 37920

Occupation: Self employed Employer: Eastward creative

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 7/20/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$768.67

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$768.67

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Becca Middle Name: _____ Last Name: Dryden

Address: 5132 13th Ave S City: Minneapolis State: MN Zip Code: 55417

Occupation: Family Mentorship Project Manager Employer: Transforming Families MN

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 7/20/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**

First Name: Kenneth Middle Name: _____ Last Name: Stephenson

Address: 212 Linford Rd City: Knoxville State: TN Zip Code: 37920

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 7/22/2026 Aggregate This Election: \$ \$175.00

Business or Organization Name: _____ **OR**

First Name: Joseph Middle Name: _____ Last Name: Bailey

Address: 2612 Avondale Avenue City: Knoxville State: TN Zip Code: 37917

Occupation: ERP Specialist Employer: CMH Inc

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

Amount of Contribution: \$ \$1.00 Date of Contribution: 7/22/2026 Aggregate This Election: \$ \$58.00

Business or Organization Name: _____ **OR**

First Name: Diane Middle Name: _____ Last Name: Bird

Address: 4920 Governorwood Dr City: Powell State: TN Zip Code: 37849

Occupation: Med tech Employer: Covenant Health

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

Amount of Contribution: \$ \$5.00 Date of Contribution: 7/26/2026 Aggregate This Election: \$ \$110.00

Total Contributions: \$ \$819.67

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Cadence Middle Name: _____ Last Name: Collins

Address: 12201 E Doncaster Dr City: Knoxville State: TN Zip Code: 37932

Occupation: Theatre Educator Employer: Knoxville Children's Theatre

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

In-Kind Contribution Value: \$ \$232.58 In-Kind Contribution Date: 7/20/2026 Aggregate This Election: \$ \$492.95

Description of In-Kind Contribution: Canva Print

Business or Organization Name: _____ **OR**

First Name: Cadence Middle Name: _____ Last Name: Collins

Address: 12201 E Doncaster Dr City: Knoxville State: TN Zip Code: 37932

Occupation: Theatre Educator Employer: Knoxville Children's Theatre

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

In-Kind Contribution Value: \$ \$50.00 In-Kind Contribution Date: 7/24/2026 Aggregate This Election: \$ \$542.95

Description of In-Kind Contribution: Canva Pro Subscription

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: \$ \$282.58

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: USPS **OR**

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

Address: 475 L'Enfant Plaza SW City: Washington State: DC Zip Code: 20260

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$610.00 Date of Expenditure: \$ 7/3/2026

Business or Organization Name: USPS **OR**

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

Address: 475 L'Enfant Plaza SW City: Washington State: DC Zip Code: 20260

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$147.62 Date of Expenditure: \$ 7/9/2026

Business or Organization Name: Empower **OR**

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

Address: 2800 Royal Ave City: Monona State: WI Zip Code: 53716

Purpose of Expenditure: Relational Organizing App

Amount of Expenditure: \$ \$10.00 Date of Expenditure: \$ 7/16/2026

Business or Organization Name: USPS **OR**

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

Address: 475 L'Enfant Plaza SW City: Washington State: DC Zip Code: 20260

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$292.50 Date of Expenditure: \$ 7/20/2026

Business or Organization Name: Russell Printing LLC **OR**

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

Address: 1800 Grand Avenue City: Knoxville State: TN Zip Code: 37916

Purpose of Expenditure: Direct Mail

Amount of Expenditure: \$ \$1,488.76 Date of Expenditure: \$ 7/20/2026

Total Expenditures: \$ \$2,548.88

(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: Cadence Collins
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,548.88

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: Partners in Education **OR**

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

Address: 505 Summer Place City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Sponsor Stuff the Sleigh Back to School Event

Amount of Expenditure: \$ \$1,130.18 Date of Expenditure: \$ 7/23/2026

Business or Organization Name: Actblue **OR**

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

Address: PO BOX 441146 City: Somerville State: MN Zip Code: 21440

Purpose of Expenditure: Online Donation Hosting

Amount of Expenditure: \$ \$4.35 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Campaign Verify **OR**

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

Address: 1215 31st Street NW PO Box 355 City: Washington State: DC Zip Code: 20007

Purpose of Expenditure: Campaign Verification service

Amount of Expenditure: \$ \$95.00 Date of Expenditure: \$ 7/27/2026

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: \$ _____

Total Expenditures: \$ \$3,778.41

(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.)