



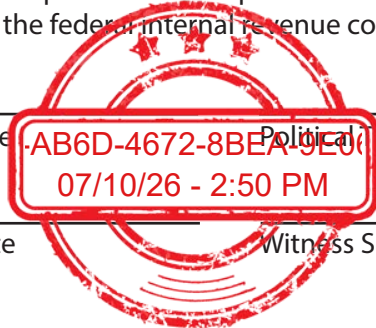
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/10/2026 2.a. Candidate or Committee Name: Cindy Fain
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 707 Gatti Ln
City: Chattanooga State: TN Zip Code: 37405 Phone: _____
5. Candidate Home Address: 707 Gatti Lan
City: Chattanooga State: TN Zip Code: 37405 Phone: _____
Candidate Email Address: electcindyf@gmail.com
6. Office Sought: (include district number, if applicable) County School Board Dist. 6
7. Name of Political Treasurer (may be candidate): Harriette Reid
Political Treasurer Email Address: freedomwarrior1956@protonmail.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>\$1,944.94</u> |
| b. Total Receipts This Period | \$ <u>\$4,890.00</u> |
| c. Total Disbursements This Period | \$ <u>\$3,098.50</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$3,736.44</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: Cindy Fain

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) \$ \$40.00
(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) \$ \$4,850.00
- 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.) \$ \$4,890.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$3,098.50
(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.)..... \$ \$3,098.50

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: Cindy Fain
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: Lemon Middle Name: _____ Last Name: Williams

Address: 707 Gatti Lane City: Chattanooga State: TN Zip Code: 37405

Occupation: Self employed Employer: The Ionado Group

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/6/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Christine Middle Name: _____ Last Name: Scott

Address: 8114Karr St City: Chattanooga State: TN Zip Code: 37421

Occupation: self employed Employer: self employed

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

Amount of Contribution: \$ \$350.00 Date of Contribution: 6/4/2026 Aggregate This Election: \$ \$350.00

Business or Organization Name: _____ **OR**

First Name: Jeffrey Middle Name: _____ Last Name: Lovinggood

Address: 435 Bouton Drive City: Chattanooga State: TN Zip Code: 37415

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$125.00 Date of Contribution: 6/6/2026 Aggregate This Election: \$ \$125.00

Business or Organization Name: _____ **OR**

First Name: Mike Middle Name: _____ Last Name: Shaw

Address: 344 Meadow Woods Drive City: Hoover State: AL Zip Code: 35216

Occupation: CTO Employer: Mutual Springs CU

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

Amount of Contribution: \$ \$125.00 Date of Contribution: 6/8/2026 Aggregate This Election: \$ \$125.00

Total Contributions: \$ \$700.00

(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: Cindy Fain
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) \$ \$700.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: BOW PAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 2059 City: Hixson State: TN Zip Code: 37343
Occupation: BOW PAC Employer: BOW PAC
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 6/12/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Jessica Middle Name: _____ Last Name: Perkins
Address: 6465 Deep Canyon Rd City: Hixson State: TN Zip Code: 37343
Occupation: Event Planner/Owner Employer: Divine Design LLC
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Melony Middle Name: _____ Last Name: Stover
Address: 4620 Florida Ave City: Chattanooga State: TN Zip Code: 37409
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Delores Middle Name: _____ Last Name: Vinson
Address: 111 Forsythe St City: Chattanooga State: TN Zip Code: 37415
Occupation: ENL Specialist Employer: HCDE
Contribution Received For: Primary Election ☒ General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/13/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$1,500.00
(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: Cindy Fain
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) \$ \$1,500.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Rufus Middle Name: _____ Last Name: Marve

Address: 5309 Anderson Ave City: East Ridge State: TN Zip Code: 37412

Occupation: self employed owner Employer: Van Man

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/21/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Delores Middle Name: _____ Last Name: Vinson

Address: 111 Forsythe St City: Chattanooga State: TN Zip Code: 37415

Occupation: ENL Specialist Employer: HCDE

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/22/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Harris Middle Name: _____ Last Name: Mr. and Mrs. Pappu

Address: PO Box 87 City: Harrison State: TN Zip Code: 37341

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Michele Middle Name: _____ Last Name: Reneau

Address: 980 Roberts Mill Rd City: Hixson State: TN Zip Code: 37343

Occupation: State Representative Employer: State of TN

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 6/23/2026 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$2,900.00

(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: Cindy Fain
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) \$ \$2,900.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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 TN

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 6/20/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Hamilton County Republican Party **OR**

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

Address: PO Box 4451 City: Chattanooga State: TN Zip Code: 37405

Occupation: HCRP Employer: HCRP

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

Amount of Contribution: \$ \$1,500.00 Date of Contribution: 7/17/2026 Aggregate This Election: \$ \$1,500.00

Business or Organization Name: TN Valley Republican Women **OR**

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

Address: 1248 Lower Mill Rd City: Hixson State: TN Zip Code: 37343

Occupation: TVRW Employer: TVRW

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/17/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Carol Middle Name: _____ Last Name: Day

Address: 906 Mt Vernon Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/25/2026 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,850.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Cindy Fain
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: Campaign Partner **OR**

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

Address: 118 Still River Rd City: Harvard State: MA Zip Code: 01451

Purpose of Expenditure: Website

Amount of Expenditure: \$ \$29.00 Date of Expenditure: \$ 5/5/2026

Business or Organization Name: Hamilton County Election Commission **OR**

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

Address: 700 River Terminal Rd City: Chattanooga State: TN Zip Code: 37406

Purpose of Expenditure: Data

Amount of Expenditure: \$ \$42.00 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: S & K Advertising Specialists **OR**

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

Address: 324 Maple St City: Soddy Daisy State: TN Zip Code: 37379

Purpose of Expenditure: door hangers

Amount of Expenditure: \$ \$524.40 Date of Expenditure: \$ 6/4/2026

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

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

Address: 118 Still River Rd City: Harvard State: MA Zip Code: 01451

Purpose of Expenditure: website

Amount of Expenditure: \$ \$29.00 Date of Expenditure: \$ 6/8/2026

Business or Organization Name: VistaPrint **OR**

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

Address: 275 Wyman St City: Waltham State: MA Zip Code: 02451

Purpose of Expenditure: shirts

Amount of Expenditure: \$ \$174.70 Date of Expenditure: \$ 6/10/2026

Total Expenditures: \$ \$799.10

(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: Cindy Fain
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) \$ \$799.10

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: Home Depot OR

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

Address: 1194 Northpoint Blvd City: Hixson State: TN Zip Code: 37343

Purpose of Expenditure: rebar, sign tools

Amount of Expenditure: \$ \$166.18 Date of Expenditure: \$ 6/18/2026

Business or Organization Name: Elders Ace OR

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

Address: 1870 Dayton Blvd City: Chattanooga State: TN Zip Code: 37415

Purpose of Expenditure: supplies for signs

Amount of Expenditure: \$ \$19.64 Date of Expenditure: \$ 6/22/2026

Business or Organization Name: S & K Advertising Specialists OR

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

Address: 324 Maple St City: Soddy Daisy State: TN Zip Code: 37379

Purpose of Expenditure: Signs

Amount of Expenditure: \$ \$1,748.00 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: Anedot Payment System OR

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

Address: 1928 Camp St City: New Orleans State: LA Zip Code: 70130

Purpose of Expenditure: credit card payment fee

Amount of Expenditure: \$ \$36.70 Date of Expenditure: \$ 6/29/2026

Business or Organization Name: Raceway OR

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

Address: 405 Signal Mtn Rd City: Chattanooga State: TN Zip Code: 37405

Purpose of Expenditure: gasoline for canvassing driver

Amount of Expenditure: \$ \$28.88 Date of Expenditure: \$ 6/17/2026

Total Expenditures: \$ \$2,798.50

(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: Cindy Fain
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) \$ \$2,798.50

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: PO Box 4451 City: Chattanooga State: TN Zip Code: 37405
Purpose of Expenditure: Lincoln Day Dinner Advertisement
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 6/22/2026

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: \$ \$3,098.50

(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.)