CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/8/2026 2.a. Candidate or Committee Name: Guy W Carden

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

4. Campaign Address: 3019 Gari Baldi Way

City: Spring Hill State: TN Zip Code: 37174 Phone: _____

5. Candidate Home Address: 3019 Gari Baldi Way

City: Spring Hill State: TN Zip Code: 37174 Phone: 6158876340

Candidate Email Address: guycarden@gmail.com

6. Office Sought: (include district number, if applicable) County Commissioner - Dist 03

7. Name of Political Treasurer (may be candidate): Katherine Carden

Political Treasurer Email Address: katherinelcarden@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: 4/26/2026 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

-2E4E-428B-855C-0EA
07/08/26 - 9:44 AM

12. Summary:

a.	Balance On Hand Last Report	$ $330.79
b.	Total Receipts This Period	$ $3,400.00
c.	Total Disbursements This Period	$ $2,329.81
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $1,400.98
e.	Total Loans Outstanding	$ $1,000.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Guy W Carden

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) ..... $ _____
(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) ..... $ $2,400.00

c. Loans Received This Reporting Period..... $ $1,000.00

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.) ..... $ $3,400.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $2,329.81
(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.)..... $ $2,329.81

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: Guy W Carden

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: Ginger Middle Name: _____ Last Name: Smith

Address: 136 N Westland Ave City: Gallatin State: TN Zip Code: 37066

Occupation: Chief Financial Officer Employer: Lynch Regenerative Medicine

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

Amount of Contribution: $ $250.00 Date of Contribution: 5/12/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Joseph Middle Name: _____ Last Name: Woodruff

Address: 135 4th Ave South City: Franklin State: TN Zip Code: 37064

Occupation: Circuit Judge Employer: State of TN

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

Amount of Contribution: $ $200.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $200.00

Business or Organization Name: _____ **OR**

First Name: Stephen Middle Name: _____ Last Name: Hickey

Address: 3520 Mauldin Woods Trail City: Franklin State: TN Zip Code: 37064

Occupation: Chairman Employer: WCRP

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

Amount of Contribution: $ $50.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Dennis Middle Name: _____ Last Name: Driggers

Address: 7004 Kidman Lane City: Spring Hill State: TN Zip Code: 37174

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $200.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $200.00

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: Guy W Carden

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: _____ **OR**

First Name: Steven Middle Name: _____ Last Name: Cassidy

Address: 1134 Glenbrook Drive City: Franklin State: TN Zip Code: 37064

Occupation: CEO Employer: EOD Gear

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

Amount of Contribution: $ $300.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $300.00

Business or Organization Name: _____ **OR**

First Name: Justin Middle Name: _____ Last Name: Lakins

Address: 6011 Thrush Court City: Spring Hill State: TN Zip Code: 37174

Occupation: Director of Asset Protection Employer: Tractor Supply

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

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

Business or Organization Name: _____ **OR**

First Name: Denise Middle Name: _____ Last Name: Andre

Address: 1004 St. Michael's Court City: Franklin State: TN Zip Code: 37064

Occupation: General Sessions Judge Employer: State of TN

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

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

Business or Organization Name: _____ **OR**

First Name: Nathan Middle Name: _____ Last Name: Miller

Address: 6000 San Giovanni Court City: Spring Hill State: TN Zip Code: 37174

Occupation: LE Employer: US - SSA

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/9/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $1,300.00

(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: Guy W Carden

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) $ $1,300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Fitterer

Address: 2826 Iroquois Dr City: Thompson Station State: TN Zip Code: 37179

Occupation: Mayor Spring Hill Employer: City of Spring Hill

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

Amount of Contribution: $$100.00 Date of Contribution: 6/14/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Jack Middle Name: _____ Last Name: PAC

Address: 915 Lewisburg Pike City: Franklin State: TN Zip Code: 37064

Occupation: Senator State of TN Employer: State of TN

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

Amount of Contribution: $$500.00 Date of Contribution: 6/17/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Linda Middle Name: _____ Last Name: Carden

Address: 2002 Timewinder Way City: Columbia State: TN Zip Code: 38401

Occupation: Retired Employer: Retired

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

Amount of Contribution: $$500.00 Date of Contribution: 6/29/2026 Aggregate This Election: $ $500.00

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: $ _____

Total Contributions: $ $2,400.00

(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: Guy W Carden

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: Zazzle **OR**

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

Address: 1200 Chestnut Street City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Campaign stickers and buttons

Amount of Expenditure: $ $114.84 Date of Expenditure: $ 5/27/2026

Business or Organization Name: Anedot Fee **OR**

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

Address: 1201 W Peachtreet St NW City: Atlanta State: GA Zip Code: 30309

Purpose of Expenditure: Online Donation Fee - Cassidy

Amount of Expenditure: $ $12.30 Date of Expenditure: $ 6/5/2026

Business or Organization Name: Anedot Fee **OR**

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

Address: 1201 W Peachtreet St NW City: Atlanta State: GA Zip Code: 30309

Purpose of Expenditure: Online Donation Fee - Lakins

Amount of Expenditure: $ $4.30 Date of Expenditure: $ 6/5/2026

Business or Organization Name: The Southern Baking Co **OR**

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

Address: 4847 Main Street City: Spring Hill State: TN Zip Code: 37174

Purpose of Expenditure: Campaign Kick Off Event

Amount of Expenditure: $ $205.09 Date of Expenditure: $ 6/8/2026

Business or Organization Name: Anedot Fee **OR**

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

Address: 1201 W Peachtreet St NW City: Atlanta State: GA Zip Code: 30309

Purpose of Expenditure: Online Donation Fee - Miller

Amount of Expenditure: $ $4.30 Date of Expenditure: $ 6/9/2026

Total Expenditures: $ $340.83

(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: Guy W Carden

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) $ $340.83

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: _____ **OR**

First Name: Jennifer Middle Name: _____ Last Name: Mason

Address: 1006 St Hubbins City: Spring Hill State: TN Zip Code: 37174

Purpose of Expenditure: 50% Lions Club Banner

Amount of Expenditure: $ $154.00 Date of Expenditure: $ 6/15/2026

Business or Organization Name: Friends of Williamson County Animal Shelter **OR**

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

Address: 1006 Grigsby Hayes Ct City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Benefiting animals of Williamson County

Amount of Expenditure: $ $225.75 Date of Expenditure: $ 6/17/2026

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Floyd - BattleGroun

Address: PO Box 680805 City: Franklin State: TN Zip Code: 37068

Purpose of Expenditure: Campaign Consultation

Amount of Expenditure: $ $1,500.00 Date of Expenditure: $ 6/29/2026

Business or Organization Name: Ace Hardware **OR**

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

Address: 1109 Elliston Way City: Thompson Station State: TN Zip Code: 37179

Purpose of Expenditure: Campaign Sign Hardware

Amount of Expenditure: $ $109.23 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: $ _____

Total Expenditures: $ $2,329.81

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Guy W Carden

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: Kate Middle Name: _____ Last Name: Carden

Address: 3019 Gari Baldi Way City: Spring Hill State: TN Zip Code: 37174

Outstanding Loan Balance (Beginning) ..... $ $1,000.00

Loans Received ..... $ $1,000.00

Loan Payments ..... $ $0.00

Outstanding Loan (End) ..... $ $1,000.00

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

Date of Loan: 6/26/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $ $0.00

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $_____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $_____

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $_____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... $ $1,000.00

Loans Received ..... $ $1,000.00

Loan Payments ..... $ $0.00

Outstanding Loan (End) ..... $ $1,000.00