



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 6/30/2026 2.a. Candidate or Committee Name: Jon Wayne James
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: P.O. Box 122
City: Christiana State: TN Zip Code: 37037 Phone: 4066967475
5. Candidate Home Address: 1144 Church Street
City: Christiana State: TN Zip Code: 37037 Phone: 4066967475
Candidate Email Address: jonwaynejames4TN@gmail.com
6. Office Sought: (include district number, if applicable) State Executive Commission
7. Name of Political Treasurer (may be candidate): Jon Wayne James
Political Treasurer Email Address: jonwaynejames4TN@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>450.-</u>
b. Total Receipts This Period	\$	<u>2564.59</u>
c. Total Disbursements This Period	\$	<u>2925.76</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>88.83</u>
e. Total Loans Outstanding	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jon Wayne James

14. Reporting Period: Start Date: 4/1/2020 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) \$ 2504.59
- c. Loans Received This Reporting Period \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15 a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 2,504.59

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 2,925.76
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 2,925.76

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jon Wayne James
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

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Stacey Middle Name: _____ Last Name: Ruff
Address: 9115 Manhattan Park Place City: Hendersonville State: TN Zip Code: 37075
Occupation: CMT Employer: ECS
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 4/10/2026 Aggregate This Election: \$ 104.10

Business or Organization Name: _____ OR
First Name: Marilyn Middle Name: _____ Last Name: Rogan
Address: 1814 Wiltshire Dr City: Murfreesboro State: TN Zip Code: 37129
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 25.- Date of Contribution: 4/16/2026 Aggregate This Election: \$ 26.03

Business or Organization Name: _____ OR
First Name: Cameron Middle Name: _____ Last Name: James
Address: 2424 Sandstone Cir. City: Murfreesboro State: TN Zip Code: 37130
Occupation: Medical Director Employer: Genentech
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.- Date of Contribution: 4/18/2026 Aggregate This Election: \$ 520.51

Business or Organization Name: _____ OR
First Name: Michael Middle Name: _____ Last Name: Bidwell
Address: 1425 Sandy Valley Rd City: Hendersonville State: TN Zip Code: 37075
Occupation: Sr. Project Mgr Employer: Collier Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 4/27/2026 Aggregate This Election: \$ 104.10

Total Contributions: \$ 754.74

(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: Jon Wayne James
2. Reporting Period: Start Date: April 1, 2026 End Date: June 30, 2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 754.79

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Summer Middle Name: _____ Last Name: Taylor-Sani
Address: 406 Killarney Place City: Fairview State: TN Zip Code: 37062
Occupation: Project Mgr Employer: Collier Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 250.- Date of Contribution: 4/27/2026 Aggregate This Election: \$ 260.25

Business or Organization Name: _____ OR
First Name: Paul Middle Name: _____ Last Name: Lamb
Address: 402 Sandi Ct City: Smyrna State: TN Zip Code: 37167
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 25.- Date of Contribution: 4/7/2026 Aggregate This Election: \$ 25.-

Business or Organization Name: _____ OR
First Name: Renee Middle Name: _____ Last Name: Jackson
Address: 735 Dixie LN City: Pleasant View State: TN Zip Code: 37147
Occupation: Engineer Employer: Collier Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 4/30/2026 Aggregate This Election: \$ 100.-

Business or Organization Name: _____ OR
First Name: David + Carolyn Middle Name: _____ Last Name: Hager
Address: 1515 Georgetown LN City: Murfreesboro State: TN Zip Code: 37129
Occupation: N/A Employer: N/A
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 4/26/2026 Aggregate This Election: \$ 100.-

Total Contributions: \$ 1,239.99

(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: Jon Wayne James
2. Reporting Period: Start Date: 4/1/2020 End Date: 6/30/2020
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,239.99

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Craig Middle Name: _____ Last Name: Bitman
Address: 405 Brickley Dr. City: Marionboro State: WV Zip Code: 37128
Occupation: Project Mgr Employer: Common Spirit Health
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 484.- Date of Contribution: 5/4/2020 Aggregate This Election: \$ 500.-

Business or Organization Name: _____ OR
First Name: James Middle Name: _____ Last Name: Matherly
Address: 705 Park Dr. City: Goodletsville State: WV Zip Code: 37072
Occupation: CMT Mgr Employer: Collier Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 250.- Date of Contribution: 5/5/2020 Aggregate This Election: \$ 260.25

Business or Organization Name: _____ OR
First Name: John Middle Name: _____ Last Name: Cheney
Address: 805 Copperfield Ct. City: MA Juliet State: WV Zip Code: 37122
Occupation: Project Mgr Employer: Collier Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 5/8/2020 Aggregate This Election: \$ 104.10

Business or Organization Name: _____ OR
First Name: Gary Middle Name: _____ Last Name: Louden
Address: PSC 851 Box R1898 City: FPO State: AE Zip Code: 9834
Occupation: Metrology Quality Assurance Employer: BAE Systems
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 5/9/2020 Aggregate This Election: \$ 104.10

Total Contributions: \$ 2,208.49

(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: Jon Wayne James
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) \$ 2,208.49

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Donald Middle Name: _____ Last Name: Collins
Address: 4195 Birmingham Rd City: Lebanon State: TN Zip Code: 37090
Occupation: Civil Engineer Employer: Coiller Engineering
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.- Date of Contribution: 6/8/2026 Aggregate This Election: \$ 104.10

Business or Organization Name: _____ OR
First Name: Patricia & William Middle Name: _____ Last Name: Nash
Address: 10201 Row Pine Springs Rd City: Arrington State: TN Zip Code: 37014
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200.- Date of Contribution: 6/13/2026 Aggregate This Election: \$ 200.-

Business or Organization Name: _____ OR
First Name: Teresa Middle Name: _____ Last Name: Higgins
Address: 490 Fortress Blvd Apt. 191 City: Memphis State: TN Zip Code: 37128
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50.- Date of Contribution: 6/23/2026 Aggregate This Election: \$ 52.05

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: \$ 2,504.59

(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: Jon Wayne James
2. Reporting Period: Start Date: 4/1/2020 End Date: 6/30/2020
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Got print. com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7651 N. San Fernando Rd. City: Burbank State: CA Zip Code: 91505
Purpose of Expenditure: Flyers
Amount of Expenditure: \$ 364.15 Date of Expenditure: \$ 5/18/2020

Business or Organization Name: Batch Geo OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: sales@batchgeo.com City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Door Knocking Map App
Amount of Expenditure: \$ 148.- Date of Expenditure: \$ 5/22/2020

Business or Organization Name: Got print. com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7651 N. San Fernando Rd. City: Burbank State: CA Zip Code: 91505
Purpose of Expenditure: Flyers / Palm cards
Amount of Expenditure: \$ 182.67 Date of Expenditure: \$ _____

Business or Organization Name: Good guy signs. com OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5002 N. Howard Ave. City: Tampa State: FL Zip Code: 33064
Purpose of Expenditure: Signs
Amount of Expenditure: \$ 596.35 Date of Expenditure: \$ 6/5/2020

Business or Organization Name: USPS Christiana OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1091 Church St. City: Christiana State: TX Zip Code: 37037
Purpose of Expenditure: Stamps
Amount of Expenditure: \$ 78.- Date of Expenditure: \$ 6/8/2020

Total Expenditures: \$ 1,369.17

(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: Jon Wayne James
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) \$ 1,369.17

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: BatchGeo OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: sales@batchgeo.com City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Door Knocking Map App
Amount of Expenditure: \$ 148.- Date of Expenditure: \$ 6/22/2026

Business or Organization Name: USPS Christiansburg OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1091 Church St City: Christiansburg State: VA Zip Code: 24037
Purpose of Expenditure: stamps/postage
Amount of Expenditure: \$ 1014.- Date of Expenditure: \$ 6/30/2026

Business or Organization Name: MWYC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2435 Central Expressway City: Albion, MI State: MI Zip Code: 49008
Purpose of Expenditure: data
Amount of Expenditure: \$ 315.- Date of Expenditure: \$ 6/30/2026

Business or Organization Name: WinRed OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4250 Fairfax Dr, Suite 600 City: Arlington State: VA Zip Code: 22203
Purpose of Expenditure: Campaign Donation Fees
Amount of Expenditure: \$ 79.99 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: \$ 2,925.76

(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.)