CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 4/1/2025 2.a. Candidate or Committee Name: Anna Golladay

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 4/8/2025

4. Campaign Address: 1479 FAGAN ST

City: CHATTANOOGA State: TN Zip Code: 37408 Phone: 5409740117

5. Candidate Home Address: 1479 FAGAN ST

City: CHATTANOOGA State: TN Zip Code: 37408 Phone: 5409740117

Candidate Email Address: campaign@annagolladay.com

6. Office Sought: (include district number, if applicable) Chattanooga Council Dist. 8

7. Name of Political Treasurer (may be candidate): Kendra McCahill

Political Treasurer Email Address: kendramccahill@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: 2/23/2025 End Date: 3/29/2025

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

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04/01/25 - 8:39 PM

12. Summary:

a.	Balance On Hand Last Report	$ $1,670.72
b.	Total Receipts This Period	$ $2,720.00
c.	Total Disbursements This Period	$ $1,986.86
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $2,403.86
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Anna Golladay

14. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

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) ..... $ $2,720.00

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.) ..... $ $2,720.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $1,986.86
(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.)..... $ $1,986.86

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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

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: GREG Middle Name: _____ Last Name: GENTRY

Address: 60 ROBERST ST City: ASHEVILLE State: NC Zip Code: 28801

Occupation: CPA Employer: N/A

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

Amount of Contribution: $ $50.00 Date of Contribution: 2/28/2025 Aggregate This Election: $ $47.70

Business or Organization Name: _____ **OR**

First Name: TAYLOR Middle Name: _____ Last Name: THURMOND

Address: 3805 MEMPHIS DR City: CHATTANOOGA State: TN Zip Code: 37415

Occupation: SUPPLY CHAIM Employer: TVA

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

Amount of Contribution: $ $200.00 Date of Contribution: 3/4/2025 Aggregate This Election: $ $191.70

Business or Organization Name: _____ **OR**

First Name: TRACY Middle Name: _____ Last Name: WILLIAMS

Address: 1607 BRADT ST City: CHATTANOOGA State: TN Zip Code: 37415

Occupation: N/A Employer: N/A

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

Amount of Contribution: $ $10.00 Date of Contribution: 3/5/2025 Aggregate This Election: $ $9.30

Business or Organization Name: _____ **OR**

First Name: MARYLEA Middle Name: _____ Last Name: KIRBY

Address: 346 FOXBOROUGH DR City: BRUNSWICK State: OH Zip Code: 44212

Occupation: Senior Functional Fitness Specia Employer: City of Strongsville

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

Amount of Contribution: $ $20.00 Date of Contribution: 3/5/2025 Aggregate This Election: $ $18.90

Total Contributions: $ $280.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $280.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: NICOLE Middle Name: _____ Last Name: HEYMAN

Address: 208 Vantage Pt City: CHATTANOOGA State: TN Zip Code: 37405

Occupation: Chief housing officer Employer: City of Chattanooga

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/6/2025 Aggregate This Election: $ $95.70

Business or Organization Name: _____ **OR**

First Name: DAVID Middle Name: _____ Last Name: BROCK

Address: 508 EAST 5TH ST City: CHATTANOOGA State: TN Zip Code: 37403

Occupation: BUSINESS OWNER Employer: SELF

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/6/2025 Aggregate This Election: $ $239.70

Business or Organization Name: _____ **OR**

First Name: CATH Middle Name: _____ Last Name: TRUELOVE

Address: 1200 RUSSELL ST City: CHATTANOOGA State: TN Zip Code: 37405

Occupation: Concierge for estate planning Employer: CATH SHAW INSURE

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/6/2025 Aggregate This Election: $ $95.70

Business or Organization Name: _____ **OR**

First Name: TRACY Middle Name: _____ Last Name: WILLIAMS

Address: 1607 BRADT ST City: CHATTANOOGA State: TN Zip Code: 37406

Occupation: N/A Employer: DISABLED

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

Amount of Contribution: $ $15.00 Date of Contribution: 3/7/2025 Aggregate This Election: $ $15.00

Total Contributions: $ $745.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $745.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: **OR**

First Name: BETH Middle Name: Last Name: PERAZZO

Address: PO BOX 671 City: OCCOQUAN State: VA Zip Code: 22125

Occupation: MILITARY Employer: USMC

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

Amount of Contribution: $ $25.00 Date of Contribution: 4/8/2025 Aggregate This Election: $ $23.70

Business or Organization Name: **OR**

First Name: HEATHER Middle Name: Last Name: MCCLENDON

Address: 112 ASBURY DR City: CHATTANOOGA State: TN Zip Code: 37411

Occupation: 3/9/25 $50.00 $50.00 $47.70 $2.3 Employer: STRIDE

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/9/2025 Aggregate This Election: $ $47.70

Business or Organization Name: **OR**

First Name: TAMMY Middle Name: Last Name: BARNES

Address: 12109 ENDLESS VW City: SODDY DAISY State: TN Zip Code: 37379

Occupation: RAD TECH Employer: UNEMPLOYED

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/9/2025 Aggregate This Election: $ $47.70

Business or Organization Name: **OR**

First Name: JOHN Middle Name: Last Name: MCGINLEY

Address: 1615 Cowart St City: CHATTANOOGA State: TN Zip Code: 37408

Occupation: HOMELESS COORDINATOR Employer: CITY OF CHATTANOOGA

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/9/2025 Aggregate This Election: $ $47.70

Total Contributions: $ $920.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $920.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: KATHY Middle Name: _____ Last Name: LENNON

Address: 401 CRISMAN ST City: CHATTANOOGA State: TN Zip Code: 37415

Occupation: FAMILY BUSINESS Employer: FARM TO MED

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

Amount of Contribution: $ $200.00 Date of Contribution: 3/9/2025 Aggregate This Election: $ $191.70

Business or Organization Name: _____ **OR**

First Name: JASON Middle Name: _____ Last Name: LYLES

Address: 1802 IVY ST City: CHATTANOOGA State: TN Zip Code: 37404

Occupation: TEACHER Employer: CATOOSA COUNTY SCHOOLS

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

Amount of Contribution: $ $25.00 Date of Contribution: 3/13/2025 Aggregate This Election: $ $23.70

Business or Organization Name: _____ **OR**

First Name: THERESE Middle Name: _____ Last Name: TULEY

Address: 1005 E DALLAS RD City: CHATTANOOGA State: TN Zip Code: 37405

Occupation: RETIRED Employer: N/A

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

Amount of Contribution: $ $50.00 Date of Contribution: 3/14/2025 Aggregate This Election: $ $47.70

Business or Organization Name: _____ **OR**

First Name: BARBARA Middle Name: _____ Last Name: CLARK

Address: 4208 ROYALVIEW RD City: KNOXVILLE State: TN Zip Code: 37921

Occupation: PASTOR Employer: TRINITY UNITED METHODIST CHURCH

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/15/2025 Aggregate This Election: $ $95.70

Total Contributions: $ $1,295.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,295.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: MICHELE Middle Name: _____ Last Name: PETERSON

Address: 1710 S HOLTZCLAW AVE City: CHATTANOOGA State: TN Zip Code: 37404

Occupation: EXECUTIVE Employer: SELF

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/20/2025 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: JANE Middle Name: _____ Last Name: ELMORE

Address: 1002 E 8TH ST City: CHATTANOOGA State: TN Zip Code: 37403

Occupation: RETIRED Employer: RETIRED

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/20/2025 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: TIFFANY Middle Name: _____ Last Name: BOWER

Address: UNK City: DENVER State: CO Zip Code: 12345

Occupation: NURSE Employer: N/A

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

Amount of Contribution: $ $50.00 Date of Contribution: 2/28/2025 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: ALLISON Middle Name: _____ Last Name: KENDRICK

Address: UNK City: CHATTANOOGA State: TN Zip Code: 12345

Occupation: RETAIL Employer: DIRTY JANES ANTIQUES

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

Amount of Contribution: $ $25.00 Date of Contribution: 3/5/2025 Aggregate This Election: $ $25.00

Total Contributions: $ $2,120.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,120.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: CAROLYN Middle Name: _____ Last Name: WETZEL

Address: N/A City: N/A State: TN Zip Code: 12345

Occupation: N/A Employer: N/A

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

Amount of Contribution: $ $100.00 Date of Contribution: 3/5/2025 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: JOEL Middle Name: _____ Last Name: ARMSTRONG

Address: 1407 JEFFERSON ST City: CHATTANOOGA State: TN Zip Code: 37408

Occupation: retired Employer: n/a

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/6/2025 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: $ _____

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: $ $2,720.00

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

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: IMPACTIVE **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: TEXT MESSAGING SOFTWARE

Amount of Expenditure: $ $385.23 Date of Expenditure: $ 3/1/2025

Business or Organization Name: SIGNS ON THE CHEAP **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: SIGNS

Amount of Expenditure: $ $530.70 Date of Expenditure: $ 3/5/2025

Business or Organization Name: WALMART **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: MAILING LABELS

Amount of Expenditure: $ $10.84 Date of Expenditure: $ 3/7/2025

Business or Organization Name: HAMILTON COUNTY ELECTION COMMISSION **OR**

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

Address: UNK City: CHATTANOOGA State: TN Zip Code: 12345

Purpose of Expenditure: VOTER DATA

Amount of Expenditure: $ $40.00 Date of Expenditure: $ 3/8/2025

Business or Organization Name: HAMILTON COUNTY ELECTION COMMISSION **OR**

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

Address: UNK City: Chattanooga State: TN Zip Code: 12345

Purpose of Expenditure: VOTER DATA

Amount of Expenditure: $ $2.00 Date of Expenditure: $ 3/8/2025

Total Expenditures: $ $968.77

(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: Anna Golladay

2. Reporting Period: Start Date: 2/23/2025 End Date: 3/29/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $968.77

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: AMAZON MARKETPLACE **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: MAILING LABELS

Amount of Expenditure: $ $35.86 Date of Expenditure: $ 3/12/2025

Business or Organization Name: PRINTREADY **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: PRINTING SUPPLIES

Amount of Expenditure: $ $462.17 Date of Expenditure: $ 3/20/2025

Business or Organization Name: USPS **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: BULK MAILING POSTAGE

Amount of Expenditure: $ $487.54 Date of Expenditure: $ 3/17/2025

Business or Organization Name: AMAZON **OR**

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

Address: UNK City: UNK State: TN Zip Code: 12345

Purpose of Expenditure: MAILING LABELS

Amount of Expenditure: $ $32.52 Date of Expenditure: $ 3/26/2025

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: $ $1,986.86

(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.)