CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 3/9/2026 2.a. Candidate or Committee Name: Tori Smith

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

4. Campaign Address: PO Box 43

City: Ooltewah State: TN Zip Code: 37363 Phone: 423-802-7646

5. Candidate Home Address: 5213 Ooltewah-Ringgold Rd Ste 127

City: Ooltewah State: TN Zip Code: 37363 Phone: 423-802-7646

Candidate Email Address: team@votejudgetori.com

6. Office Sought: (include district number, if applicable) Sessions Court Judge, Div. 2

7. Name of Political Treasurer (may be candidate): Chad Goodman

Political Treasurer Email Address: Cgoodman@hhmcpas.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: 1/16/2026 End Date: 3/31/2026

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
	3/9/2026		4/10/26

Witness Signature	Date	Witness Signature	Date
Andrew Smith	3/9/2026	Carol Ward	4/10/26

12. Summary:

a.	Balance On Hand Last Report	$ 28,973.70
b.	Total Receipts This Period	$ 6,000.00
c.	Total Disbursements This Period	$ 30,544.76
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 4,428.94
e.	Total Loans Outstanding	$ 5,000.00
f.	Total Obligations Outstanding	$ 0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Tori Smith

14. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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) ..... $ 6,000.00

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.) ..... $ 6,000.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 30,544.76
(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.) ..... $ 30,544.76

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.) ..... $ 0.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Tori Smith

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Burwell Middle Name: B. Last Name: Bell

Address: P.O. Box 4047 City: Chattanooga State: TN Zip Code: 37405

Occupation: Retired Employer: U.S. Army

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

Amount of Contribution: $ 1,000.00 Date of Contribution: 1/17/2026 Aggregate This Election: $ 1,000.00

Business or Organization Name: _____ OR

First Name: Jerry Middle Name: _____ Last Name: Young

Address: 1831 Creek Way Dr City: Ooltewah State: TN Zip Code: 37363

Occupation: Director of Sales Accounting Employer: Intapp

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

Amount of Contribution: $ 500.00 Date of Contribution: 1/19/2026 Aggregate This Election: $ 750.00

Business or Organization Name: _____ OR

First Name: Hal Middle Name: _____ Last Name: North

Address: 7732 Royal Barbour Cir City: Ooltewah State: TN Zip Code: 37363

Occupation: Attorney at Law Employer: Chambliss, Bahner, and Stophel P.C.

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

Amount of Contribution: $ 750.00 Date of Contribution: 1/20/2026 Aggregate This Election: $ 750.00

Business or Organization Name: _____ OR

First Name: Alex Middle Name: _____ Last Name: Shoaf

Address: 1000 Mississippi Ave City: Chattanooga State: TN Zip Code: 37405

Occupation: Attorney Employer: Hamilton County Public Defender

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

Amount of Contribution: $ 100.00 Date of Contribution: 1/22/2026 Aggregate This Election: $ 100.00

Total Contributions: $ 2,350.00

(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: Tori Smith

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ 2,350.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Meredith Middle Name: _____ Last Name: Mochel

Address: 809 Market St. 2nd Floor City: Chattanooga State: TN Zip Code: 37402

Occupation: Attorney Employer: Law Offices of Meredith Mochel

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

Amount of Contribution: $ 500.00 Date of Contribution: 1/23/2026 Aggregate This Election: $ 500.00

Business or Organization Name: _____ **OR**

First Name: Vince Middle Name: _____ Last Name: Butler

Address: 6504 Lake Shadows Cir City: Hixson State: TN Zip Code: 37343

Occupation: Consultant Employer: Butler Consulting

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

Amount of Contribution: $ 150.00 Date of Contribution: 1/29/2026 Aggregate This Election: $ 150.00

Business or Organization Name: _____ **OR**

First Name: Bret Middle Name: _____ Last Name: Alexander

Address: 8431 Front Gate Cir City: Ooltewah State: TN Zip Code: 37363

Occupation: Attorney Employer: Alexander Law PLLC

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

Amount of Contribution: $ 350.00 Date of Contribution: 2/1/2026 Aggregate This Election: $ 350.00

Business or Organization Name: _____ **OR**

First Name: Mike Middle Name: _____ Last Name: St Charles

Address: 112 Signal Point Trl City: Signal Mountain State: TN Zip Code: 37377

Occupation: Attorney Employer: Chambliss, Bahner, and Stophel

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

Amount of Contribution: $ 250.00 Date of Contribution: 2/23/2026 Aggregate This Election: $ 250.00

Total Contributions: $ 3,600.00

(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: Tori Smith

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ 3,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Poarch Band of Creek Indians **OR**

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

Address: 5811 Jack Springs Rd City: Atmore State: AL Zip Code: 36502

Occupation: _____ Employer: _____

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

Amount of Contribution: $ 1,900.00 Date of Contribution: 3/3/2026 Aggregate This Election: $ 1,900.00

Business or Organization Name: All Fences Co. **OR**

First Name: Jack Middle Name: _____ Last Name: Berry

Address: 4143 Ringgold Rd ste K City: East Ridge State: TN Zip Code: 37412

Occupation: Contractor Employer: All Fences Co.

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

Amount of Contribution: $ 500.00 Date of Contribution: 3/31/2026 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: $_____

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: $ 6,000.00

(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: Tori Smith

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Anedot **OR**

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

Address: 3723 Greenville Ave ste 41003 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Processing Fee

Amount of Expenditure: $ 20.30 Date of Expenditure: $ 1/19/2026

Business or Organization Name: Anedot **OR**

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

Address: 3723 Greenville Ave ste 41003 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Processing Fee

Amount of Expenditure: $ 4.30 Date of Expenditure: $ 1/22/2026

Business or Organization Name: Anedot **OR**

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

Address: 3723 Greenville Ave ste 41003 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Processing fee

Amount of Expenditure: $ 6.30 Date of Expenditure: $ 1/29/2026

Business or Organization Name: Anedot **OR**

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

Address: 3723 Greenville Ave Ste 41003 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Processing Fee

Amount of Expenditure: $ 14.30 Date of Expenditure: $ 2/1/2026

Business or Organization Name: Anedot **OR**

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

Address: 3723 Greenville Ave Ste 41003 City: Dallas State: TX Zip Code: 75206

Purpose of Expenditure: Processing Fee

Amount of Expenditure: $ 10.30 Date of Expenditure: $ 2/23/2026

Total Expenditures: $ 55.50

(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: Tori Smith
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter $0 if first page) $ 55.50

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: Ooltewah Youth Association OR
First Name: ______ Middle Name: ______ Last Name: ______
Address: 5208 Little Debbie Pkwy City: Collegedale State: TN Zip Code: 37363
Purpose of Expenditure: Sign Printing and display
Amount of Expenditure: $ 500.00 Date of Expenditure: $ 3/7/2026

Business or Organization Name: Chatt Strategies LLC OR
First Name: ______ Middle Name: ______ Last Name: ______
Address: 5213 Ooltewah-Ringgold Rd City: Ooltewah State: TN Zip Code: 37363
Purpose of Expenditure: Campaign Set-up, Printing, Postage, Signs, T-shirts, Consulting
Amount of Expenditure: $ 29,989.26 Date of Expenditure: $ 3/11/2026

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: $ ______

Total Expenditures: $ 30,544.76
(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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Tori Smith

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Victoria Middle Name: _____ Last Name: Smith

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

Outstanding Loan Balance (Beginning) ..... $ 5,000.00

Loans Received ..... $ 0.00

Loan Payments ..... $ 0.00

Outstanding Loan (End) ..... $ 5,000.00

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

Date of Loan: 10/9/2025

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

Business or Organization Name: _____ **OR**

First Name: Victoria Middle Name: _____ Last Name: Smith

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) ..... $ 5,000.00

Loans Received ..... $ 0.00

Loan Payments ..... $ 0.00

Outstanding Loan (End) ..... $ 5,000.00