CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 10/27/2026 2.a. Candidate or Committee Name: Paige Brown for Mayor

2. b. If Committee, Name of Candidate: PaigeBrown 3. Election Date: 11/3/2026

4. Campaign Address: 146 North Hume Ave

City: Gallatin State: TN Zip Code: 37066 Phone: 615-975-9196

5. Candidate Home Address: 146 North Hume Ave

City: Gallatin State: TN Zip Code: 37066 Phone: 615-975-9196

Candidate Email Address: epbrown@comcast.net

6. Office Sought: (include district number, if applicable) Mayor - Gallatin

7. Name of Political Treasurer (may be candidate): Paige Brown

Political Treasurer Email Address: 146 North Hume Avenue Gallatin, TN 37066

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: 10/1/2026 End Date: 10/24/2026

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
	10/27/2026		10/27/2026

Witness Signature	Date	Witness Signature	Date
Angela Davis	10/27/26	Angela Davis	10/27/26

12. Summary:

FILED
AM PM
OCT 27 2026
SUMNER COUNTY
ELECTION COMMISSION

a.	Balance On Hand Last Report	$ 42,886.14
b.	Total Receipts This Period	$ 19,790.00
c.	Total Disbursements This Period	$ 38,589.92
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 24,086.22
e.	Total Loans Outstanding	$ 0
f.	Total Obligations Outstanding	$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Paige Brown for Mayor

14. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 640
(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) ..... $ 19,150

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.) ..... $ 19,790

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 29,030.20
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ 0

c. Total Obligation Payments Made This Period ..... $ 9,559.72

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ 38,589.92

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: Paige Brown for Mayor

2. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ SEE ATTACHED FOR FULL LIST

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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: $_____

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: $ 19,790

(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.)

Paige Brown for Mayor Campaign Contributions 10/1/2026 -10/24/2026

First Name	Last Name	Street	City	State	Zip	Occupation	Employer	Election	Amount	Received	Aggregate
Bryan	Bondurant	1054 Sugartree Lane	Gallatin	TN	37066	Retired		General	1000	1-Oct	1000
Randell	Smith	1000 Cages Bend Court	Gallatin	TN	37066	Retired		General	1900	1-Oct	1900
Anthony	Holt	298 Kirk Lane	Gallatin	TN	37066	Executive Director	Association of County Mayors	General	500	2-Oct	500
Leslie & Jim	Harrison	1659 Boardwalk Place	Gallatin	TN	37066	Executive VP	CSDG	General	500	2-Oct	500
David	Luckey	110 Clarendon Place	Hendersonville	TN	37075	President	Self	General	1900	3-Oct	1900
Kimberly	Luckey	110 Clarendon Place	Hendersonville	TN	37075	Homemaker		General	1900	3-Oct	1900
Mitzi Blair	Elasar	1255 Plantation Blvd	Gallatin	TN	37066	Self-Employed	Self	General	1000	5-Oct	1000
Odric	Gregory	145 Ziegler Fort Rd	Gallatin	TN	37066	Retired		General	1000	5-Oct	1000
Morris & Rachel	Holleman	968 Coles Ferry	Gallatin	TN	37066	Business Owners	Holleman Farms	General	1900	5-Oct	1900
Charles & Cora	Kimbrough	48 Wyndermere	Hendersonville	TN	37075	Consultant	Self	General	250	7-Oct	250
Stanley	Fields	303 Bayshore Drive	Hendersonville	TN	37075	Business Owners	Tenn Properties	General	1000	7-Oct	1000
Robert & Tiffany	Horton	166 Bayshore Drive	Hendersonville	TN	37075	Business Owners	Tenn Properties	General	1000	7-Oct	1000
Kenneth	Burd	10 Vandywood Ct	Hendersonville	TN	37075	Self-Employed	Self	General	1900	8-Oct	1900
Emily & Roy	Alexander	724 Bay Point Dr	Gallatin	TN	37066	Business Owner	General Tire	General	500	11-Oct	500
Michelle	Haynes	335 West Main	Gallatin	TN	37066	Business Owner	Haynes Realtors	General	500	11-Oct	500
Charles & Michael	Curtis	981 Browns Lane	Gallatin	TN	37066	Business Owners	Curtis Construction	General	150	20-Oct	150
Craig	Hayes	1156 Inneswood	Gallatin	TN	37066	Retired		General	250	20-Oct	250
Pape-Dawson Tennessee PAC		PO Box 60070	Nashville	TN	37206			General	500	20-Oct	500
Joe	Whitaker	1045 Steam Plant Rd	Gallatin	TN	37066	Retired		General	500	21-Oct	500
Connie & Joseph	Godfrey	1495 Calgy Drive	Gallatin	TN	37066	Business Owner	The Godfrey Group	General	1000	23-Oct	1000

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Paige Brown for Mayor

2. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

3. Total in-kind contributions from preceding page (enter $0 if first page) $ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars ($100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: $ 0

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Paige Brown for Mayor

2. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 0 PLEASE SEE ATTACHED

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: _____ 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: $ _____

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: $ 38,589.92

(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.)

Paige Brown for Mayor Campaign Expenditures 10/1/2026 -10/24/2026

Business Name	Address	City	State	Zipcode	Purpose	Amount	Date
Amazon	410 Terry Avenue N	Seattle	WA	98109	Event Supplies	97.04	10/5/26
Direct Edge	2000 Glen Echo Rd Ste 207a	Nashville	TN	37215	Digital Marketing	18,000.00	10/22/26
Direct Edge	2000 Glen Echo Rd Ste 207a	Nashville	TN	37215	Direct Mail	8,104.98	10/22/26
Direct Edge	2000 Glen Echo Rd Ste 207a	Nashville	TN	37215	Card Printing	945.00	10/22/26
Hobby Lobby	261 Indian Lake Blvd Ste 200	Hendersonville	TN	37075	Event Supplies	8.77	10/23/26
Direct Edge	2000 Glen Echo Rd Ste 207a	Nashville	TN	37215	Direct Mail	9,559.72	10/13/26
Josh Bratcher	303 Malvin Street	Gallatin	TN	37066	Graphic Design	300.00	10/14/26
Sam's Club	301 Indian Lake Blvd	Hendersonville	TN	37075	Event Supplies	239.51	10/2/26
Little Josh Productions	319 Wildcat Run	Gallatin	TN	37066	Video Production	1,181.25	10/1/26
Mr. Sign Man	129 Commerce Drive	129 Commerce Drive		37075	T Shirts	153.65	10/24/26
						38,589.92	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Paige Brown For Mayor

2. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

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: _____ Middle Name: _____ Last Name: _____

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

Outstanding Loan Balance (Beginning) ..... $ 0

Loans Received ..... $ 0

Loan Payments ..... $ 0

Outstanding Loan (End) ..... $ 0

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

Date of Loan: _____

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: $_____

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) ..... $ 0

Loans Received ..... $ 0

Loan Payments ..... $ 0

Outstanding Loan (End) ..... $ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Paige Brownfor Mayor

2. Reporting Period: Start Date: 10/1/2026 End Date: 10/24/2026

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
$ 9.559.72	$ 0	$ 9559.72	$ 0