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

1. Date: 10/11/2026 2.a. Candidate or Committee Name: Paige Brown for Mayor

2. b. If Committee, Name of Candidate: PaigeBrown 3. Election Date: 11/4/2026

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 Avenue

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

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

Political Treasurer Email Address: epbrown@comcast.net

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: 7/1/2026 End Date: 9/30/2026

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
Paige Brown	10/13/2026	Paige Brown	10/13/2026

Witness Signature	Date	Witness Signature	Date
Angela K Davis	10/13/2026	Angela K Davis	10/13/2026

12. Summary:

FILED AM PM OCT 13 2026 SUMNER COUNTY ELECTION COMMISSION

a.	Balance On Hand Last Report	$ 20,757.76
b.	Total Receipts This Period	$ 34,600.00
c.	Total Disbursements This Period	$ 12,271.62
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 42,886.14
e.	Total Loans Outstanding	$
f.	Total Obligations Outstanding	$ 9,559.72

SUMMARY PAGE - CANDIDATE

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

14. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 1750.00
(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) ..... $ 32.850.00

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.) ..... $ 34.600.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 12.271.62
(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.) ..... $ 12.271.62

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.) ..... $ 9,559.72

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Paige Brown for Mayor

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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

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: $ $ 34,600

(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.)

First Name	Middle	Last Name	Street	City	State	Zip	Occupation	Employer	Election	Amt	Date	Aggregate
Chad		Coley		Gallatin	TN	37066	Bank Manager	Macon Bank & Trust	General	$250.00	18-Sep	250
Paula		Gatlin	511 Hillview Ct	Mt. Juliet	TN	37122	CEO	Market Graphics	General	$1,900.00	17-Sep	1900
Henry		Holleman	PO Box 674	Gallatin	TN	37066	Business Owner	Holleman Trucking	General	$1,900.00	18-Sep	1900
John		Puryear	1490 Cherokee Rd	Gallatin	TN	37066	Business Owner	Puryear Farms	General	$500.00	17-Sep	500
Joe		Harsh	123 Public Square	Gallatin	TN	37066	Attorney	Harsh Law	General	$1,900.00	20-Sep	1900
Lynda & Hugh		Love	745 East Main	Gallatin	TN	37066	Retired		General	$250.00	20-Sep	250
Tim		Smith	5198 Old Scottsville	Alvaton	KY	42122	Construction	Self	General	$1,900.00	21-Sep	1900
Charles		Tomkins	PO Box 741	Gallatin	TN	37066	Retired		General	$150.00	20-Sep	150
Griffin		Bonham	1238 Plymouth Ave	Nashville	TN	37216	VP/Business Owner	Baetis Restoration Partners	General	$1,900.00	24-Sep	1900
Velma & Frank		Brinkley	258 Grandview Dr	Gallatin	TN	37066	Retired		General	$400.00	24-Sep	400
Steve & Tonya		Brown	270 Grandview Circle	Gallatin	TN	37066	Retired		General	$200.00	24-Sep	200
Stanley & Judith		Carver	104 Bluewater	Gallatin	TN	37066	Retired		General	$200.00	24-Sep	200
Jean		Edwards	920 Plantation Blvd	Gallatin	TN	37066	Attorney	SELF	General	$400.00	24-Sep	400
Dr. Frederick		Frank	1061 Highway 25	Gallatin	TN	37066	Retired		General	$400.00	24-Sep	400
Jean		Harsh	2295 Hartsville Pike	Gallatin	TN	37066	Retired		General	$1,500.00	24-Sep	1500
Erika		Holloway	105 Hazel Path	Gallatin	TN	37066	Homemaker		General	$1,900.00	24-Sep	1900
Wayne		Holloway	105 Hazel Path	Gallatin	TN	37066	Business Owner	Holloway Investments	General	$1,900.00	24-Sep	1900
William		Hudgins	1205 Nashville Pike	Gallatin	TN	37066	Retired		General	$250.00	24-Sep	250
Mance & Gina		Huffman	203 Lankford Ln	Gallatin	TN	37066	Director Strategic Accounts	SOBI	General	$1,000.00	24-Sep	1000
Mary		Hunter	1004 Harris Dr	Gallatin	TN	37066	Retired		General	$200.00	24-Sep	200
Guy Randall		Jones	1121 Inneswood Dr	Gallatin	TN	37066	Retired		General	$250.00	24-Sep	250
Susan		Mattox	4215 Harding Pk 411	Nashville	TN	37205	Business Owner	The French Shoppe	General	$200.00	24-Sep	200
Ken		Moore	725 W Main St	Franklin	TN	37084	Mayor	City of Franklin	General	$1,000.00	24-Sep	1000
Rick		Murphy	940 Lakeshore Dr	Gallatin	TN	37066	Retired		General	$1,000.00	24-Sep	1000
Floyd		Poindexter	1490 Calgy Dr	Gallatin	TN	37066	Retired		General	$200.00	24-Sep	200
Betty		Reynolds	1344 Reynard Dr	Gallatin	TN	37066	Realtor	Coldwell Banker Lakeside	General	$200.00	24-Sep	200
Sam & Amanda		Rickman	2052 Rodman Blvd	Gallatin	TN	37066	Retired		General	$200.00	24-Sep	200
HailePAC			1900 Cairo Rd	Gallatin	TN	37066			General	$1,000.00	24-Sep	1000
Lifepoint Tennessee PAC			330 Seven Springs Way	Brentwood	TN	37027			General	$1,000.00	24-Sep	1000
Paul		Curd	315 St Blaise Rd	Gallatin	TN	37066	Retired		General	$1,000.00	28-Sep	1000

Karen	Goodall	1459 Rozella Way	Gallatin	TN	37066	Homemaker		General	$1,900.00	27-Sep	1900
Jean	Hale	761 Plantation Blvd	Gallatin	TN	37066	Homemaker		General	$1,000.00	26-Sep	1000
Tony	Gregory	1371 Rozella Way	Gallatin	TN	37066	Bank President	Volunteer State Bank	General	$1,000.00	28-Sep	1000
Amanda	Gregory	1371 Rozella Way	Gallatin	TN	37066	Homemaker		General	$1,000.00	28-Sep	1000
Pamela	Ogden	1132 Browns Lane	Gallatin	TN	37066	Business Owner	Business Credit Reports	General	$250.00	29-Sep	250
Rachel	Brown	902A E Robertson Rd	Castalian Springs	TN	37031	Retired		General	$250.00	30-Sep	250
Dennis	Cavin	1167 Plantation Pass	Gallatin	TN	37066	Retired		General	$250.00	29-Sep	250
Tammy	Hayes	120 Governors Pt Blvd	Hendersonville	TN	37075	Retired		General	$150.00	26-Sep	150
H Wayne	Holloway	1150 Boardwalk Place	Gallatin	TN	37066	Business Owner	North Lake Auto	General	$1,000.00	24-Sep	1000
David	Holloway	222 Woodlake Drive	Gallatin	TN	37066	Business Owner	North Lake Auto	General	$1,000.00	25-Sep	1000
Unitemized Contributions									$1,750.00		
Total Receipts									$34,600.00		

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Paige Brown for Mayor

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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: 7/1/2026 End Date: 9/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 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: $ 12,271.62

(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.)

Business Name	Address	City	State	Zipcode	Purpose	Amount	Date
Amazon	410 Terry Ave N	Seattle	WA	98109	4th of July Parade	135.97	7/1/26
GHS	700 Dan P. Herron Driv	Gallatin	TN	37066	Donation	150.00	7/22/26
Casa Rojo	122 West Franklin	Gallatin	TN	37066	Volunteer Meeting Meals	108.86	8/21/26
El Rey Azteca	300 E Main	Gallatin	TN	37066	Volunteer Meeting Meals	61.29	8/24/26
Downtown Gallatin	146 North Water	Gallatin	TN	37066	Booth Space	212.87	9/2/26
Sumner Museum	183 W Main	Gallatin	TN	37066	Donation	368.76	9/5/26
Casa Rojo	122 West Franklin	Gallatin	TN	37066	Volunteer Meeting Meals	32.34	9/8/26
SquareSpace	225 Varick St	New Yor	NY	10014	Financial Services	9.22	9/9/26
SquareSpace	225 Varick St	New Yor	NY	10014	Financial Services	65.00	9/9/26
Papillon Center	PO Box 9072	Gallatin	TN	37066	Donation	200.00	9/10/26
Concept One	216 North Locust St	Gallatin	TN	37066	Signs	5,350.31	9/10/26
ASAP	116 Imperial Blvd	Henders	TN	37075	Printing	114.47	9/11/26
ProGraphics	680 Rundle Avenue	Nashville	TN	37210	Signs	3,899.97	9/11/26
Josh Bratcher	303 Malvin Street	Gallatin	TN	37066	Graphic Design	600.00	9/11/26
GHS	700 Dan P. Herron Driv	Gallatin	TN	37066	Donation	60.00	9/11/26
Boy Scouts	3414 Hillsboro	Nashville	TN	37215	Donation	20.00	9/11/26
First Baptist Church	290 East Winchester St	Gallatin	TN	37066	Event Table Sponsor	275.00	9/14/26
Deluxe Check	801 S Marquette	Minneap	MN	55402	Financial Services	27.50	9/15/26
Imprint.Com	145550 Beechnut St	Houston	TX	77083	Event Promo Items	414.73	9/16/26
Jonathans	224 Maharris Drive	Gallatin	TN	37066	Meeting	54.66	9/17/26
SquareSpace	225 Varick St	New Yor	NY	10014	Financial Services	42.85	9/19/26
ProGraphics	680 Rundle Avenue	Nashville	TN	37210	Printing	67.82	9/25/26
Total Disbursements						**12,271.62**	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Paige Brown for Mayor

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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: _____ Middle Name: _____ Last Name: _____

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

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

Loans Received ..... $ _____

Loan Payments ..... $ _____

Outstanding Loan (End) ..... $ _____

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) ..... $ Ø

Loans Received ..... $ Ø

Loan Payments ..... $ Ø

Outstanding Loan (End) ..... $ Ø

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: PaigeBrownforMayor

2. Reporting Period: Start Date: 7/1/2026 End Date: 9/30/2026

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

Business Name: DIrect Edge
First Name: _____ Middle Name: _____
Last Name: _____
Address: 2000 Glen Echo Rd Ste 207a
City: Nashville
State: TN Zip Code: 37215

Description of Obligation:	Mail Services		
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$ 0	$	$	$ 9559.72

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)
$ 0	$	$	$ 9559.72

SS-1127 (Rev. 1/2023)

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