

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: 2.a. Candidate or Committee Na	me: Wade by	ans	Me Kelkensi
		_ 3. Election Date:	Setting 11
4. Campaign Address: 100 H111 WOOD C+. City: HenderSonville State: TN	Zip Code: 37075	Phone:	
5. Candidate Home Address: Samo			
City: State:	Zip Code:	Phone:	
Candidate Email Address:			
6. Office Sought: (include district number, if applicable) S			
7. Name of Political Treasurer (may be candidate): SOU(Political Treasurer Email Address: SARAH. AN ORT			
8. Category or Report: (check one)			
☐ First Quarter ☐ Second Quarter ☐ Third Quart ☐ Mid-Year Supplemental ☐ Year-End Supplementa		☐ Pre-Primary	☐ Pre-Genera
9. Reporting Period: Start Date: 7-1-23	_ End Date: 1-15	24	
10. Detailed Disclosure: (Check one)			
This campaign is exempt from detailed disclosures b or less AND expenditures total \$1,000 or less for this	ecause contributions (inc reporting period. (Comp	luding in-kind) reco plete items 12.d., 12	eived total \$1,000 2.e., and 12.f.)
This campaign is required to file a detailed financial total more than \$1,000 and/or expenditures total me	disclosure because contri ore than \$1,000 for this re	butions (including porting period.	in-kind) received
11. I/we do solemnly swear or affirm that the information and that this report is an accurate accounting of camp by the candidate committee by the Campaign Financian campaign contributions have been expended for the nonpolitical purpose as defined by the federal internation	aign contributions and excial Disclosure Act. Addition personal financial benefit revenue code.	xpenditures require ionally, I/we swear fit of the candidate	ed to be reported or affirm that no e or for any other
Candidate Signature Date	Political Treasurer Sign	11111	46/4
Witness Signature Date	Witness Signature	- 1/3.	0/24
12. Summary: FILED	Withess signature	Date 4	
a. Balance On Hand Wast ReportPM	\$	0.00	
		00.00	
b. Total Receipts This Period	\$	17,9192	
d. Balance On Hand (12 annus 12 to minus 12.c.)		970.29	
e. Total Loans Outstanding N. COMMISSION	\$	Ø	
f. Total Obligations Outstanding	\$	Ø	
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SUMMARY PAGE - CANDIDATE

13. Na	ne of Candidate or Committee: Wack Evans
14. Rep	orting Period: Start Date: 1-1-23 End Date: 1-15-24
15. Rec	eipts:
a.	Unitemized Contributions (\$100 or less from each source this period)
b.	Itemized Contributions (over \$100 from each source this period)\$
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.) \$ 8890.00
16. Dis	pursements:
a.	Total Expenditures (other than loan payments)
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.)\$
17. ln-l	(ind 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. Ob	igations:
a.	Total Obligations Outstanding (must be shown in item 12.f.)

1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 7-1-23 End Date: 1-15-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:OF
First Name: Middle Name: Last Name: And reus
Address: 1011 Forestpoint city: Handersonville State: TN zip Code: 37075
Occupation: RECEPTION 1ST Employer: AND COX
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\loo \omega\$ Date of Contribution: \loo \alpha
Business or Organization Name:OF
First Name: Last Name: Last Name: Oil X (
Address: 110 Blue Ridge Tv. City: Hendersonville State: TN zip Code: 37075
Address: 110 Blue Ridge Tv. City: Hendersonville State: TN Zip Code: 37075 Occupation: Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11 19 23 Aggregate This Election: \$
Business or Organization Name: Blucarass Bar Ginll OR
First Name: Middle Name: Last Name:
First Name: Middle Name: Last Name: Last Name: City: HenderSonville State: TN Zip Code: 31075
Occupation: Retwed Employer:
Contribution Received For: A Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\frac{100}{000}\text{ Date of Contribution: \$\frac{124}{23}\text{ Aggregate This Election: \$\frac{100}{000}\text{ Aggregate This Election: \$\frac{100}{0000}\text{ Aggregate This Election: \$\frac{100}{0000}\text{ Aggregate This Election: \$\frac{100}{0000}\text{ Aggregate This Election: \$\frac{100}{00000}\text{ Aggregate This Election: \$\frac{100}{000000000000000000000000000000000
Business or Organization Name:OR
First Name: Barry Middle Name: Last Name: Bresnahan
Address: 127 Country HIIS City: Hendersonville State: TN Zip Code: 37075
Occupation: Employer: _Self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 12 13 23 Aggregate This Election: \$
Total Contributions: \$ (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.)

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1. Candidate or Committee Name: WOOL ENGINE 2. Reporting Period: Start Date: 1-123 End Date: 1-15-24 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 600 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. Business or Organization Name: OR First Name: WOCL Middle Name: Last Name: Oliver Address: OH Liberty Ct. City: Hercesmalle State: Name: Zip Code: 31015
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 6 00 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. Business or Organization Name:
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. Business or Organization Name:
Business or Organization Name:OR
First Name: Last Name: Last Name:
Address: 104 Liberty Ct. City: Hendersmalle State: TN Zip Code: 37075
Occupation: Vetived Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$500 Date of Contribution: 12 4 3 Aggregate This Election: \$
Business or Organization Name:OR
First Name: Tammy Middle Name: Last Name: Haves
Address: 120 Governors Pt, City: Hendersonville State: TN Zip Code: 37075
Address: 120 Governors Pt City: Hendersonville State: TN Zip Code: 37075 Occupation: retired Blvd Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$150 Date of Contribution: 12 4 23 Aggregate This Election: \$
Rusiness or Organization Name:
First Name: Middle Name: Last Name: ECISTON
Address: 151 Chevorce Rd City: Hendersonville State: TN Zip Code; 37075
Occupation: COD Employer: NOShull Ply 2000
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$500 Date of Contribution: 12 12 23 Aggregate This Election: \$
Amount of Contribution: \$ Date of Contribution: \ Aggregate This Election: \$
Business or Organization Name:OR
First Name: Middle Name: Last Name: EVANS
Address: 1511 Drawes Creek Rd City: Hendorson Me State: TN Zip Code: 37075
Occupation: Employer: ROD CVOSS
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 300 Date of Contribution: \(\frac{18}{3} \) Aggregate This Election: \$
Total Contributions: \$ 2250.00 (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.)

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1. Candidate or Committee Name: Whole Exans
2. Reporting Period: Start Date: 7-123 End Date: 1-1524
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2250.00
proceeding page (effect 30 if first page) \$ 4450.00
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:
First Name: Middle Name: Last Name: Pill C
Address: 10 Vandywood Ct. City: Hendersonville State: TN Zip Code: 37075
Occupation: rented Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$\\\ 1800.00\) Date of Contribution: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Business or Organization Name:
First Name: Middle Name: Last Name: Tell VIA
Address: 131 Indian Lake Ste 101 City: Herotossonville State: TN Zip Code: 37075
Occupation: Owner Employer: One Stop Realty & Auction
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 12 28 23 Aggregate This Election: \$
Business or Organization Name:OR
First Name. Middle Name: Last Name. Movels
Address: 22+ Shive City: Hendersmille State: TN Zip Code: 37075
Occupation: Project Manager Employer: CPS
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$250.00 Date of Contribution: 12 28 23 Aggregate This Election: \$
Business or Organization Name:
First Name: DO A LO O
add and and and and and and and and and
Occupation: Vetived Employer: State: N Zip Code: 310 (0)
Contribution Possited For
Amount of Contribution: \$\frac{1}{250}\) Date of Contribution: \frac{1}{250}\) Aggregate This Election: \$\frac{1}{250}\]
Total Contributions: \$ 4050.00 (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.)

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1. Candidate or Committee Name: \\ 2. Reporting Period: Start Date: End Date: 1-15 24 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4050.00 COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. **Business or Organization Name:** First Name: Middle Name: Last Name: HUMLING Address: \ State: Zip Code: Occupation: 100 Employer: Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution: 1/6/24 Amount of Contribution: \$ Aggregate This Election: \$ **Business or Organization Name:** OR First Name: Middle Name: Last Name: Address: (0)0 State: \T Occupation: **Primary Election** General Election Runoff (Local Elections Only) Date of Contribution: 1024 Amount of Contribution: \$ Aggregate This Election: \$ **Business or Organization Name:** OR First Name: Middle Name: Address: P.(City: He M Zip Code: Manasellon 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: Address: State: V Zip Code: Occupation: Employer: MC Contribution Received For: Primary Election ☐ General Election ☐ Runoff (Local Elections Only) Date of Contribution: Amount of Contribution: \$ Aggregate This Election: \$ Total Contributions: \$ (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.)

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1. Candidate or Committee Name: 2. Reporting Period: Start Date: 74 23 End Date: 15 24 3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5(00) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. **Business or Organization Name:** First Name: Vo Middle Name: Occupation: Mar Keth Employer: St Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only) Date of Contribution: Amount of Contribution: \$\(\) Aggregate This Election: \$_ **Business or Organization Name:** OR First Name: Middle Name: Last Name: Address: \(State: TV Zip Code: 370 Occupation: Employer: Primary Election Contribution Received For: General Election Runoff (Local Elections Only) Amount of Contribution: \$\ \ Date of Contribution: Aggregate This Election: \$ **Business or Organization Name:** First Name: \ (1)\(\(1)\) Middle Name: Last Name: Address: State: Occupation: YP TV Employer: Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only) _ Date of Contribution: Amount of Contribution: \$ Aggregate This Election: \$ 550 **Business or Organization Name:** OR First Name: HNGL Middle Name: Last Name: Address: Zip Code: Occupation: **Employer:** Contribution Received For: Primary Election ☐ General Election Runoff (Local Elections Only) Date of Contribution: 10 24 Amount of Contribution: \$ Aggregate This Election: \$ Total Contributions: \$ (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.)

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1. Candidate or Committee Name: Wade Evans
2. Reporting Period: Start Date: 1-1-23 End Date: 1-15-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:OR
First Name: Last Name:
Address: OH PCCANWOOD Ct. City: HENDERSONIIL State: TM Zip Code: 37075
Occupation: VETVEO Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \(\frac{100}{2} \) Date of Contribution: \(\frac{10}{2} \) Aggregate This Election: \$ \(\frac{1}{2} \)
Business or Organization Name:OR
First Name: Name: Middle Name: Last Name:
Address: 1041 Marsker Farius City: Hendersonville State: TV Zip Code: 37075
Occupation: Software engineer Employer: Elastic
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1024 Aggregate This Election: \$
Business or Organization Name:OR
First Name: Last Name:
Address: #101Brady La City: Gallatin State: TN Zip Code: 37066
Occupation: Employer: Employer: Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 100 24 Aggregate This Election: \$
Business or Organization Name:OR
First Name: Middle Name: Last Name: Mottern
Address: 1875 WYNOLOLE City: Hand States A Zip Code: 3034
Occupation: MOIA Employer: WSB-TV
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 1024 Aggregate This Election: \$
Tetal Contributions (7250 DD)
Total Contributions: \$
amount must be shown in the summary on first page.)

1. Candidate or Committee N	ame: Wade Evans	
	ate: 1-123 End Date: 1-15-2-	+
	ons from preceding page (enter \$0 if first page) \$	
COMPLETE THE APPROPRIAT	E ITEMS FOR EACH ITEMIZED CONTRIBUTION.	
	ne:	
First Name: DI	Middle Name:	Last Name: MOUCNETTO
Address: 174Potter 1	n cityGallatin	State: TN Zip Code: 37066
Occupation: DUSINESS T	DEVELOPMENT Employer: Garrott	Browners Ready Mix
Contribution Received For:	Primary Election General Election	Runoff (Local Elections Only)
Amount of Contribution: \$\lorer{1}{0}	Date of Contribution: 11124	Aggregate This Election: \$
Business or Organization Nar	ne:	OF
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 Nar	me:	OR
	Middle 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 Nar	me:	OF
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: \$
	350 Dage if additional pages of this form are used. If the summary on first page.)	this is the last page of contributions, this

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1. Candidate or Committee Name: 1	vade Evans			
2. Reporting Period: Start Date:				741/F
3. Total in-kind contributions from p				
COMPLETE THE APPROPRIATE ITEMS dollars (\$100) from any contributor during the	FOR EACH IN-KIND CON e period must be reported.	TRIBUTION. In-kind conf	tributions totaling more than one	hundred
Business or Organization Name:				OR
First Name: Hex	Middle Name:	L	ast Name: BUV	0
Address:	City:	S	tate: Zip Code:	
Occupation:	Employ	ion.		
In-Kind Contribution Received For:	Primary Election	General Election	Runoff (Local Election	ns Only
In-Kind Contribution Value: \$400	In-Kind Contribution	Date: Ag	gregate This Flection: \$	
Description of In-Kind Contribution:	Food for Mce	teGreet		
Business or Organization Name:				OR
First Name:	Middle Name:	La	ast Name:	
Address:	City:	S1	tate: Zip Code:	
Occupation:	Employ	er:		
In-Kind Contribution Received For:	☐ Primary Election	☐ General Election	Runoff (Local Election	ns Only)
In-Kind Contribution Value: \$	_ In-Kind Contribution	Date: Ag	gregate This Election: \$,,
Description of In-Kind Contribution:				
Business or Organization Name:				OR
First Name:	Middle Name:	La	st Name:	_ 011
Address:	City:	St	ate: Zip Code	
Occupation:	Employe	er:		
In-Kind Contribution Received For:	☐ Primary Election	General Election	Runoff (Local Election	s Only)
In-Kind Contribution Value: \$	_ In-Kind Contribution	Date:Age	gregate This Election: \$	is Only,
Description of In-Kind Contribution:				
Business or Organization Name:	A CONTRACTOR OF THE PROPERTY O			OP
First Name:	Middle Name:	La	st Name:	_ 011
Address:	City:	St	ate: Zip Code:	
Occupation:	Employe	er:	z.p code	AUG.
In-Kind Contribution Received For:	☐ Primary Election	☐ General Election	Runoff (Local Flection	s Only)
In-Kind Contribution Value: \$	_ In-Kind Contribution I	Date:Ago	gregate This Election: \$	Jonly
Description of In-Kind Contribution:				
Total In-Kind Contributions: \$ (Carry forward to the next page if add contributions, this amount must be sh	itional pages of this form	are used. If this is the first page.)	last page of in-kind	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Wade F	Znak			
2. Reporting Period: Start Date:				
3. Total campaign expenditures from preceding p	age (enter \$0 if first page) \$	5		
COMPLETE THE APPROPRIATE ITEMS FOR EACH EX kind contribution to a candidate, please remember to includ candidate's name in the purpose of the expenditure section.	e the purpose of the expenditure (e.g.			in-
Business or Organization Name: MV SIGNI	man			OR
First Name: Middle	Name:	Last Name:		
Address:	City:	State:	Zip Code:	
Purpose of Expenditure: Panners, T-Sk	11ts, Magnets			
Amount of Expenditure: \$ 1638.57	Date of Expenditure: 12	0/23	_	
Business or Organization Name: TN GOF				OR
First Name: Middle		Last Name:		
Address:	City:	State:	Zip Code:	
Purpose of Expenditure: Candidate Ru	aistration			
Amount of Expenditure: \$ 25,00	Date of Expenditure: 125	123		
Business or Organization Name: Ploubic	an Party of Su	mner (Country	OR
First Name: Middle			the state of the s	
Address:	City:			
Purpose of Expenditure: Party dues				
Amount of Expenditure: \$ 50.00		24		
Business or Organization Name: ASAP	Partina			OR
First Name: Middle	Name:	Last Name:		
Address:	City:	State:	Zip Code:	
Purpose of Expenditure: Push Cards				
Amount of Expenditure: \$ 54,08	Date of Expenditure:	24		
Business or Organization Name: ASAP Pr	ntina			OR
	Name:	Last Name:		
Address:	City:	State:	Zip Code:	
Purpose of Expenditure: Push Cards				
Amount of Expenditure: \$ 375,27	Date of Expenditure: 15	24		
Total Expenditures: \$ 114292 (Carry forward to the next page if additional page amount must be shown in the summary on first p		the last page	of expenditures, thi	s

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

End Date:ge (enter \$0 if first page) \$ PENDITURE. All expenditures muthe purpose of the expenditure (e.g.,	ıst be itemized.	If the expenditure is an in
ge (enter \$0 if first page) \$ 11	ıst be itemized.	If the expenditure is an in
PENDITURE. All expenditures mu	ıst be itemized.	If the expenditure is an in
nan		OR
Name:	Last Name:	
City:	State:	Zip Code:
3, Stickers		
Date of Expenditure:	24	
		OR
	State:	Zip Code:
C		
Date of Expenditure: 1 10	124	_
MZM		OR
City:	State:	Zip Code:
CC		
Date of Expenditure: 12	29/93	
		OR
Name:	Last Name:	
City:	State:	Zip Code:
Date of Expenditure:		
Name:	Last Name:	
City:	State:	Zip Code:
Date of Expenditure:		
	Date of Expenditure:	Name: Last Name: City: State: Date of Expenditure: Last Name: VI 7 OO Name: Last Name: City: State:

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