CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 6/30/2026 2.a. Candidate or Committee Name: Edmonds for Office

2.b. If Committee, Name of Candidate: Rory Edmonds 3. Election Date: 8/6/26

4. Campaign Address: 1125 Leann Ct

City: Gallatin State: TN Zip Code: 37066 Phone: 6159890050

5. Candidate Home Address: 1125 Leann Ct

City: Gallatin State: TN Zip Code: 37066 Phone: 6156553608

Candidate Email Address: EdmondsforOffice@gmail.com

6. Office Sought: (include district number, if applicable) Sumner County Commission District 8

7. Name of Political Treasurer (may be candidate): James Tyler Jones

Political Treasurer Email Address: wilson75567@tutamail.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: 4/24/2026 End Date: 6/30/2026

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 7/9/26 Date

Political Treasurer Signature 7/9/26 Date

Witness Signature 7/9/26 Date

Witness Signature 07/09/26 Date

FILED
AM PM
JUL 09 2026
SUMNER COUNTY
ELECTION COMMISSION

12. Summary:

a.	Balance On Hand Last Report	$ 103.00
b.	Total Receipts This Period	$ 2650.00
c.	Total Disbursements This Period	$ 1624.84
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 1128.16
e.	Total Loans Outstanding	$ 0
f.	Total Obligations Outstanding	$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Edmonds for Office - Rory Edmonds

14. Reporting Period: Start Date: 4/24/2026 End Date: 6/30/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 0
(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) ..... $ 2650.00

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.) ..... $ 2650.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 1624.84
(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.) ..... $ 1624.84

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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

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

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jill Middle Name: _____ Last Name: Fernelius

Address: 108 Cobbler Cir City: Hendersonville State: TN Zip Code: 37075

Occupation: Banker Employer: Zions Bank

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

Amount of Contribution: $ 400.00 Date of Contribution: 4/29/2026 Aggregate This Election: $ 400.00

Business or Organization Name: _____ **OR**

First Name: James Middle Name: _____ Last Name: Higdon

Address: PO Box 5372 City: Maryville State: TN Zip Code: 37802

Occupation: Consultant Employer: L'Espace Inc

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

Amount of Contribution: $ 100.00 Date of Contribution: 4/30/2026 Aggregate This Election: $ 100.00

Business or Organization Name: _____ **OR**

First Name: Samantha Middle Name: _____ Last Name: Primrose

Address: 432 Triple Crown Cir City: Gallatin State: TN Zip Code: 37066

Occupation: Digital Marketing Manager Employer: Creative Website Marketing

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/7/2026 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Megan Middle Name: _____ Last Name: Lange

Address: 236 Brown Pl City: Gallatin State: TN Zip Code: 37066

Occupation: Self employed Employer: Megan Lange

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

Amount of Contribution: $ 10.00 Date of Contribution: 5/9/2026 Aggregate This Election: $ 40.00

Total Contributions: $ 560.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 560.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: James Middle Name: Tyler Last Name: Jones

Address: 1135 Fowler Ford Rd City: Portland State: TN Zip Code: 37148

Occupation: Software Engineer Employer: Ferguson & Associates

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

Amount of Contribution: $ 150.00 Date of Contribution: 5/9/2025 Aggregate This Election: $ 175.00

Business or Organization Name: _____ **OR**

First Name: Jeffrey Middle Name: _____ Last Name: White

Address: 2147 Springdale Lane K312 City: Gallatin State: TN Zip Code: 37066

Occupation: Inventory control specialist Employer: NABRICO

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

Amount of Contribution: $ 10.00 Date of Contribution: 5/12/26 Aggregate This Election: $ 10.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Primrose III

Address: 432 Triple Crown Circle City: Gallatin State: TN Zip Code: 37066

Occupation: Data Quality Manager Employer: Buyers Edge Platform

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

Amount of Contribution: $ 100.00 Date of Contribution: 5/14/26 Aggregate This Election: $ 100.00

Business or Organization Name: _____ **OR**

First Name: Anne Middle Name: _____ Last Name: Marlin

Address: 566 Becks Place City: Gallatin State: TN Zip Code: _____

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/23/26 Aggregate This Election: $ 25.00

Total Contributions: $ 845.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 845.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Lynn Middle Name: _____ Last Name: Takacs

Address: 1531 Anderson Rd City: Hendersonville State: TN Zip Code: 37075

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 100.00 Date of Contribution: 5/27/26 Aggregate This Election: $ 100.00

Business or Organization Name: _____ **OR**

First Name: Deborah Middle Name: _____ Last Name: Blondell

Address: 6572 Fairville Station Rd City: Newark State: NY Zip Code: 14513

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/28/26 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Sally Middle Name: _____ Last Name: Meyer

Address: 403 S Tunnel Rd City: Gallatin State: TN Zip Code: 37066

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/28/26 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Nicole Middle Name: _____ Last Name: Wacenske

Address: 912 Percy Warner Blvd City: Nashville State: TN Zip Code: 37205

Occupation: Travel Agent Employer: TAG

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

Amount of Contribution: $ 100.00 Date of Contribution: 5/28/26 Aggregate This Election: $ 100.00

Total Contributions: $ 1145.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1145.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Zachary Middle Name: _____ Last Name: Kochuyt

Address: 2612 Barton Ave City: Nashville State: TN Zip Code: 37212

Occupation: Audio Engineer Employer: Self Employed

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/28/26 Aggregate This Election: $ 25.00

Business or Organization Name: _____ **OR**

First Name: Steven Middle Name: _____ Last Name: Puckett

Address: 228 Sanders Ferry Road Apt A21 City: Hendersonville State: TN Zip Code: 37075

Occupation: Night Stock Clerk Employer: Kroger

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

Amount of Contribution: $ 10.00 Date of Contribution: 5/29/26 Aggregate This Election: $ 10.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Lowe

Address: 128 Bluegrass Drive City: Hendersonville State: TN Zip Code: 37075

Occupation: Professional Singer Employer: Retired

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/30/26 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: James Middle Name: Tyler Last Name: Jones

Address: 1135 Fowler Ford Rd City: Portland State: TN Zip Code: 37148

Occupation: Software Development Employer: Ferguson & Associates

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/31/2026 Aggregate This Election: $ 25.00

Total Contributions: $ 1255.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1255.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Tyler Middle Name: _____ Last Name: Mitchell

Address: 136 McDavid St City: Gallatin State: TN Zip Code: 37066

Occupation: Photographer Employer: Tyler Mitchell

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/01/2026 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Jana Middle Name: _____ Last Name: Edmonds

Address: 1926 RYDER RD City: Newark State: NY Zip Code: 14513

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 250.00 Date of Contribution: 6/05/2026 Aggregate This Election: $ 250.00

Business or Organization Name: _____ **OR**

First Name: Leonard Middle Name: _____ Last Name: Assante

Address: 825 S Browns Ln #601 City: Gallatin State: TN Zip Code: 37066

Occupation: Teacher Employer: Volunteer State College

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

Amount of Contribution: $ 100.00 Date of Contribution: 6/06/2026 Aggregate This Election: $ 100.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Primrose III

Address: 432 Triple Crown Circle City: Gallatin State: TN Zip Code: 37066

Occupation: Data Quality Manager Employer: Buyers edge platform

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/06/26 Aggregate This Election: $ 150.00

Total Contributions: $ 1705.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1705.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Leonard Middle Name: _____ Last Name: Assante

Address: 825 S Browns Ln #601 City: Gallatin State: TN Zip Code: 37066

Occupation: Teacher Employer: Volunteer State College

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/06/26 Aggregate This Election: $ 150.00

Business or Organization Name: _____ **OR**

First Name: Jessie Middle Name: _____ Last Name: McKinney

Address: 209 Waterview Dr City: Hendersonville State: TN Zip Code: 37075

Occupation: Instructor Employer: Volunteer State Community College

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/06/26 Aggregate This Election: $ 25.00

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Johnson

Address: 447 Ellis Way City: Gallatin State: TN Zip Code: 37066

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/6/2026 Aggregate This Election: $ 25.00

Business or Organization Name: _____ **OR**

First Name: Becky Middle Name: _____ Last Name: Fleming

Address: 1742 Old Gallatin Road City: Portland State: TN Zip Code: 37148

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 100.00 Date of Contribution: 6/6/2026 Aggregate This Election: $ 100.00

Total Contributions: $ 1905.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1905.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Joanne Middle Name: _____ Last Name: Stephens

Address: 423 Oak Hill Drive City: Altamonte Springs State: FL Zip Code: 32701

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 100.00 Date of Contribution: 6/6/2026 Aggregate This Election: $ 100.00

Business or Organization Name: _____ **OR**

First Name: Megan Middle Name: _____ Last Name: Lange

Address: 236 Brown Pl City: Gallatin State: TN Zip Code: 37066

Occupation: Self Employer: Megan Lange

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

Amount of Contribution: $ 10.00 Date of Contribution: 6/9/2026 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Jennie Middle Name: _____ Last Name: Erdle

Address: 51 E Main Street City: Shortsville State: NY Zip Code: 14548

Occupation: Higher Education Employer: Finger Lakes Community College

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

Amount of Contribution: $ 300.00 Date of Contribution: 6/10/2026 Aggregate This Election: $ 300.00

Business or Organization Name: _____ **OR**

First Name: Nancy Middle Name: _____ Last Name: Edmonds

Address: 447 Lakeview Way City: Emerald Hills State: CA Zip Code: 94062

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: $ 250.00 Date of Contribution: 6/10/2026 Aggregate This Election: $ 250.00

Total Contributions: $ 2565.00

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 2565.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Chad Middle Name: _____ Last Name: Edmonds

Address: 1806 N Nebraska Ave #6 City: Tampa State: FL Zip Code: 33602

Occupation: Interpreter Employer: Chad Edmonds

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/11/26 Aggregate This Election: $ 50.00

Business or Organization Name: _____ **OR**

First Name: Jenn Middle Name: _____ Last Name: Randles

Address: 743 Rogers Road City: Gallatin State: TN Zip Code: 37066

Occupation: IT Employer: State of TN

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

Amount of Contribution: $ 35.00 Date of Contribution: 6/21/26 Aggregate This Election: $ 85.00

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: $ 2650.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/26 End Date: 6/30/26

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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/2026 End Date: 6/30/2026

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

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: ActBlue **OR**

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

Address: PO Box 962017 City: Boston State: MA Zip Code: 02196

Purpose of Expenditure: Processing Fees

Amount of Expenditure: $ 99.16 Date of Expenditure: $ 4/24/2026 to 6/30/26

Business or Organization Name: WIX.COM **OR**

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

Address: 500 Terry A Francois Blvd Fl 6 City: San Francisco State: CA Zip Code: 94158-2230

Purpose of Expenditure: Website Fee

Amount of Expenditure: $ 26.22 Date of Expenditure: $ 5/4/2026

Business or Organization Name: WIX.COM **OR**

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

Address: 500 Terry A Francois Blvd Fl 6 City: San Francisco State: CA Zip Code: 94158-2230

Purpose of Expenditure: Website Fee

Amount of Expenditure: $ 26.22 Date of Expenditure: $ 6/4/2026

Business or Organization Name: KROGER #897 **OR**

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

Address: 845 Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Campaign supplies

Amount of Expenditure: $ 10.63 Date of Expenditure: $ 6/8/26

Business or Organization Name: WM SUPERCENTER #674 **OR**

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

Address: 1112 Nashville Pike City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Campaign kickoff supplies

Amount of Expenditure: $ 21.57 Date of Expenditure: $ 6/8/26

Total Expenditures: $ 183.80

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 183.80

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: FAIRVUE PIZZA & PUB **OR**

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

Address: 1483 Nashville Pike, Ste 403 City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Campaign kickoff food

Amount of Expenditure: $ 86.76 Date of Expenditure: $ 6/8/26

Business or Organization Name: BUSY BEE PRINTING **OR**

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

Address: 334 W Main St City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Palm cards; misc. campaign materials

Amount of Expenditure: $ 749.70 Date of Expenditure: $ 6/8/2026

Business or Organization Name: Heaven's Favorite **OR**

First Name: Dylan Middle Name: _____ Last Name: Stephens

Address: dylanxstephens@gmail.com City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: Stickers

Amount of Expenditure: $ 150.00 Date of Expenditure: $ 6/15/2026

Business or Organization Name: BUSY BEE PRINTING **OR**

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

Address: 334 W Main St City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: $ 287.39 Date of Expenditure: $ 6/17/2026

Business or Organization Name: Friends of Clearview Park **OR**

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

Address: https://focp2022.square.site City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Juneteenth Booth in Gallatin

Amount of Expenditure: $ 30.00 Date of Expenditure: $ 5/26/2026

Total Expenditures: $ 1487.65

(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: Edmonds for Office-Rory Edmonds

2. Reporting Period: Start Date: 4/24/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 1487.65

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: Payton Print **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: 131 S. Water Ave. City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Campaign printing/signage

Amount of Expenditure: $ 137.19 Date of Expenditure: $ 5/26/26

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: $ 1624.84

(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: ______________________________

2. Reporting Period: Start Date: ____________ End Date: ____________

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100). NONE

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) .... $ ____________

Loans Received .... $ ____________

Loan Payments .... $ ____________

Outstanding Loan (End) .... $ ____________

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: ______________________

2. Reporting Period: Start Date: ____________ End Date: ____________ NONE

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)
$	$	$	$