

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date	-July 2, 2024 2.a. Cand	didate or Committee Name	e: FRANK FIN	130N HOT 1	HOERMAN
2.b. If C	Committee, Name of Candid	late: FRANK Pin	YSON/	3. Election Dat	e: 11/5/2024
4. Cam	paign Address: 166 A	SHLAND POINT			
City:	HENDERSONVILLE	State: TH	Zip Code: 37075	Phone: 615	840 1704
5 Can	didate Home Address: 160	6 ASPLAND POIN	T		-
City:	HENDERSONVILLE	State: TH.	Zip Code: 37075	Phone: 615	840-1704
Cano	lidate Email Address:	PRANKAINSONE gm	pil. Com		
6 Office	ce Sought: (include district r	number, if applicable)	dermon WAR	def AM	FILED
7 Nam	ne of Political Treasurer (may	who candidate) Mike	GAUGHAN		Pla
7. INdii	ie of Political Treasurer (may	Manchan Ale	llengy wat	JUL	0 9 2024
Polit	ical Treasurer Email Address	: My gave 1/10 & Sel	JSOUTH . NET	(SIII.	1
8. Cate	gory or Report: (check one)			ELECTION C	COUNTY
Fi	rst Quarter 💢 Second C	Quarter Third Quarter	Fourth Quarter	☐ Pre-Primary	
	id-Year Supplemental		☐ Runoff Election		
9. Repo	orting Period: Start Date	April 1, 2024	End Date: JUNE	30, 2024	
10. Det	tailed Disclosure: (Check on	e)			
-	This campaign is exempt fro or less AND expenditures to				
10	his campaign is required to				
	otal more than \$1,000 and/				3
and by car no Cano	e do solemnly swear or affind that this report is an accurate candidate committee Impaign contributions have a defined at the candidate signature	rate accounting of campai by the Campaign Financia been expended for the ped by the federal internal reports 7/2/2024 Date	gn contributions and end of Disclosure Act. Additional financial beneficient of the Disclosure Act. Additional financial beneficient of the Disclosure Act. Additional financial beneficient of the Disclosure Act. Additional financial fin	expenditures requitionally, I/we sweath of the candidate	ired to be reported ar or affirm that no
	ess Signature	Date	Witness Signature	Date	
12. Sur	nmary:			0	
a.	Balance On Hand Last Rep			4200.00	
b.	Total Receipts This Period				
c.		Period		3950.00	
d.	Balance On Hand (12.a. pl			3,750.	_
e.				0	
f.		ding	\$	O	
SS-1109	(Rev. 8/2023)				Page of

SUMMARY PAGE - CANDIDATE

12 No.	me of Candidate or Committee: FRANK PINSON	
13. IVa	The of Candidate of Committee:	2- 2-0
14. Rep	porting Period: Start Date: Apeil 1, 2024 End Date: June	30, 2000
15. Red		00
a.	Unitemized Contributions (\$100 or less from each source this period)	\$
b.	Itemized Contributions (over \$100 from each source this period)	\$ 3500.00
c.	Loans Received This Reporting Period	
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.)	\$ 4200.00
16. Dis	bursements:	
a.	Total Expenditures (other than loan payments)	
b.	Loan Repayments Made This Period	\$
c.	Total Obligation Payments Made This Period	\$ 0
d.	Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)	\$
17. In-l	Kind Contributions:	
a.	Unitemized In-Kind Contributions Received This Period	\$0
b.	Itemized In-Kind Contributions Received This Period	
c.	Total In-Kind Contributions Received This Period	
18. Ob	ligations:	
a.	Total Obligations Outstanding (must be shown in item 12.f.)	\$

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

) Dans III	ame: FRANK PINSON	BUTIONS - CANDIDATE
- Reporting Period: Start Da	to: 400:11 2 2/	1 (20 200)
3. Iotal campaign contribution	ns from preceding page (enter \$0 if first	VAE 30, 2024
COMPLETE THE AREA	page (enter 50 if first	page) \$ <i>O</i>
COMIT LETE THE APPROPRIATE	ITEMS FOR EACH ITEMIZED CONTRIBU	TION
o gallization Namo		HON.
First Name: Mike	Middle Namo	
Add /3- //	a made Indille	Last Name: GAUGLAN VITE State: TU Zip Code: 37075 EMAY Choice Proposition
Occupation: Replator /	OWNER CITY: MEUDERSON	State: To Zip Code: 3707
Contribution Received For: [City: HEVDERSON City: HEVDERSON Primary Election General Election	tion Runoff (Local Elections Only)
Amount of Contribution: \$ 25	Date of Court	tion Runoff (Local Elections Only
		tion Runoff (Local Elections Only) Regregate This Election: \$ 250.
Business or Organization Name: First Name:		
Address 80 1/2// 3	Middle Name:	Last Name: Canex Villé State: TD Zip Code: 37075
Address: DO HIAGEN PO	DIAT City: HENDERS	Last Name: Confl
Occupation: RETIRED	Employer:	State: 12 Zip Code: 37075
Amount of Contail	General Election	on Dr. Co
Contribution: \$ 250.	Data of a	Li Runoff (Local Elections Only)
	Date of Contribution: 6/19/2	(Local Liections Only)
usiness or Organization Name:	Date of Contribution: 6/19/2	Aggregate This Election: \$ 250.
usiness or Organization Name:	Date of Contribution: 6/19/2	Aggregate This Election: \$ 250.
usiness or Organization Name:	Date of Contribution: 6/19/2	Aggregate This Election: \$ 250.
usiness or Organization Name: rst Name: Tau(ddress: 124 Cedie CRES ccupation: Reals for	Date of Contribution: 6/19/2 Middle Name: T DR. City: HENDERS	Aggregate This Election: \$ 250. OR Last Name: Gode
usiness or Organization Name: rst Name: Tau ddress: 124 Cedee Cees ccupation: Reals toe	Date of Contribution: 6/19/2 Middle Name: T DR. City: HENDERSON	Aggregate This Election: \$ 250. OR Last Name: Gode State: Two Zip Code: 37075
usiness or Organization Name: rst Name: Tau ddress: 124 Cedee Cees ccupation: Reals toe	Date of Contribution: 6/19/2 Middle Name: T DR. City: HENDERSON	Aggregate This Election: \$ 250. OR Last Name: Gode State: Two Zip Code: 37075
usiness or Organization Name: rst Name:	Date of Contribution: 6/19/2 Middle Name: T DR. City: HENDERSON	Aggregate This Election: \$ 250. OR Last Name: Goode Zip Code: 37075
usiness or Organization Name: rst Name: ddress: 124 Cedee CRES ccupation: Received For: nount of Contribution: \$ 150.	Date of Contribution: 6/19/2 Middle Name: T DR. City: HENDERSON	Aggregate This Election: \$ 250. OR Last Name: Gode State: Two Zip Code: 3707
usiness or Organization Name: rst Name: ddress: /24 Cedie CRES ccupation: // Cedie CRES ccupation: // Cedie CRES contribution Received For: Industribution Received For: Industribution: \$ /50. siness or Organization Name: Bill N	Middle Name: Middle Name: T DR. City: HENDERSON Employer: Primary Election Date of Contribution: 4/17	Aggregate This Elections Only) Last Name: Goode Zip Code: 37075 R. Goode H. Issocioles Runoff (Local Elections Only) Aggregate This Election: \$ 150.00
usiness or Organization Name: rst Name:	Middle Name: Middle Name: City: Henderson Employer: Primary Election Date of Contribution: 6 4 17	Aggregate This Elections Only) Last Name: Goode Zip Code: 37075 R. Goode H. Issocioles Runoff (Local Elections Only) Aggregate This Election: \$ 150.00 OR
usiness or Organization Name: rst Name:	Middle Name: Middle Name: Employer: Primary Election	Aggregate This Elections Only) Last Name: Goode Zip Code: 37075 R. Goode H. Issocioles Runoff (Local Elections Only) Aggregate This Election: \$ 150.00 OR
usiness or Organization Name: irst Name:	Date of Contribution: 6/19/2 Middle Name: Employer: Primary Election Date of Contribution: 6/4/7 Middle Name: City: HENDERS OF Contribution: 6/4/7 Employer:	Aggregate This Election: \$ 250. Last Name: Gode Zip Code: 37075 Runoff (Local Elections Only) Aggregate This Election: \$ 150. OR Last Name: Sinks State: The Zip Code: 37075
dusiness or Organization Name: irst Name: ddress: /24 Cedee Cees ccupation: // Cedee Cees coupation: // Cedee Cees co	Middle Name: Employer: Date of Contribution: Employer: Date of Contribution: Middle Name: City: Employer: Employer: City: Employer: Employer: City: Employer: City: Employer: City: Employer: City: Contribution: City: Employer: City: Contribution: City: City: City: City: Contribution: City: City: City: City: Contribution: City: City: City: Contribution: City: City: City: Contribution: City: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City	Aggregate This Election: \$ 250. Last Name: Goode Zip Code: 37075 Runoff (Local Elections Only) Aggregate This Election: \$ 150. OR Last Name: Sinks State: 7. Zip Code: 37075 OR Last Name: Sinks Runoff (Local Elections Only) Aggregate This Election: \$ 150.
usiness or Organization Name: irst Name: ddress: /24 Cedee Cees ccupation: // Cedee Cees contribution Received For: mount of Contribution: \$ /50. siness or Organization Name: st Name: // Bill dress: /63 Bay Deceived For: // Cedee Cees cupation: // Cees	Middle Name: Employer: Date of Contribution: Employer: Date of Contribution: Middle Name: City: Employer: Employer: City: Employer: Employer: City: Employer: City: Employer: City: Employer: City: Contribution: City: Employer: City: Contribution: City: City: City: City: Contribution: City: City: City: City: Contribution: City: City: City: Contribution: City: City: City: Contribution: City: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City: Contribution: City: City: Contribution: City	Aggregate This Elections Only) Last Name: Goode Zip Code: 37075 Runoff (Local Elections Only) Aggregate This Election: \$ 150. 00 Cast Name: Sinks State: The Zip Code: 37075 OR Last Name: Sinks Runoff (Local Elections Only) Aggregate This Elections Only) Runoff (Local Elections Only)
dusiness or Organization Name: irst Name: ddress: /24 Cedre CRES ccupation: Received For: mount of Contribution: \$ /50. siness or Organization Name: st Name: dress: /63 Bay Del cupation: Received For: Prount of Contribution: \$ /50. atal Contribution: \$ /50.	Middle Name: Employer: Date of Contribution: Employer: Date of Contribution: Middle Name: City: Employer: Employer: Employer: Employer: Date of Contribution: Date of Contribution: Date of Contribution:	Aggregate This Election: \$ 250. Last Name: Goode State: The Zip Code: 37075 Runoff (Local Elections Only) Aggregate This Election: \$ 150.00 OR Last Name: Sinks State: The Zip Code: 37075 OR Last Name: Sinks State: The Zip Code: 37075 PRUNOff (Local Elections Only) 224 Aggregate This Election: \$ 350.00
dusiness or Organization Name: irst Name: ddress: /24 Cedre CRES ccupation: Received For: mount of Contribution: \$ /50. siness or Organization Name: st Name: dress: /63 Bay Del cupation: Received For: Prount of Contribution: \$ /50. atal Contribution: \$ /50.	Middle Name: Employer: Date of Contribution: Employer: Date of Contribution: Middle Name: City: Employer: Employer: Employer: Employer: Date of Contribution: Date of Contribution: Date of Contribution:	Aggregate This Elections Only) Last Name: Goode State: The Zip Code: 37075 Runoff (Local Elections Only) Aggregate This Election: \$ 150.00 OR Last Name: Sinks State: The Zip Code: 37075 OR Last Name: Sinks Runoff (Local Elections Only) OR Last Name: Sinks

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

. Candidate of Committee Name							
2. Reporting Period: Start Date: End Date:							
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$							
COMPLETE THE APPROPRIATE ITEMS F dollars (\$100) from any contributor during the		In-kind contributions totaling more than one hundred					
Business or Organization Name:		OR					
First Name:	Middle Name:	Last Name:					
		State: Zip Code:					
Occupation:	Employer:	304					
In-Kind Contribution Received For: In-Kind Contribution Value: \$	☐ Primary Election ☐ Genera _ In-Kind Contribution Date:	al Election Runoff (Local Elections Only) Aggregate This Election: \$					
Business or Organization Name:		OR					
No. of the contract of the con		Last Name:					
		State: Zip Code:					
		Discount of the second					
the state of the same of the s	Primary Flection Genera	al Election Runoff (Local Elections Only)					
In-Kind Contribution Value: \$	In-Kind Contribution Date:						
In-Kind Contribution Value: \$ Description of In-Kind Contribution:	_ In-Kind Contribution Date:	Aggregate This Election: \$					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name:	_ In-Kind Contribution Date:	Aggregate This Election: \$ OR					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name:	In-Kind Contribution Date: Middle Name:	Aggregate This Election: \$ OR Last Name:					
In-Kind Contribution Value: \$	In-Kind Contribution Date: Middle Name: City:	Aggregate This Election: \$ OR Last Name:					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation: In-Kind Contribution Received For: In-Kind Contribution Value: \$ Description of In-Kind Contribution:	In-Kind Contribution Date: Middle Name: City: Employer: Primary Election ☐ General _ In-Kind Contribution Date:	Aggregate This Election: \$ OR Last Name: State: Zip Code: al Election					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation: In-Kind Contribution Received For: In-Kind Contribution Value: \$ Description of In-Kind Contribution:	In-Kind Contribution Date: Middle Name: City: Employer: Primary Election	Aggregate This Election: \$ OR Last Name: State: Zip Code: al Election					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation: In-Kind Contribution Received For: In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name:	In-Kind Contribution Date: Middle Name: City: Employer: Primary Election General _ In-Kind Contribution Date:	Aggregate This Election: \$ OR OR State: Zip Code: all Election					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation: In-Kind Contribution Received For: In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name:	In-Kind Contribution Date: Middle Name: City: Employer: Primary Election	Aggregate This Election: \$ OR Last Name: State: Zip Code: al Election					
In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation: In-Kind Contribution Received For: In-Kind Contribution Value: \$ Description of In-Kind Contribution: Business or Organization Name: First Name: Address: Occupation:	In-Kind Contribution Date: Middle Name: City: Employer: Primary Election	Aggregate This Election: \$ OR Last Name: State: Zip Code: al Election					

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: FRAUK PINEON
2 Paparting Pariod: Start Data: Age 1 1. 2024 End Data: Tune 30 2024
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: KANHY Middle Name: Last Name: LENTH
First Name: KANHY Middle Name: Last Name: LENTH Address: 105 LIEUATH POINT City: HENDERSONVILE State: TN. Zip Code: 37075
Occupation: RETIREA Employer:
Contribution Received For: Primary Election General Electiony Runoff (Local Elections Only)
Amount of Contribution: \$ 250. Date of Contribution: 6/24/24 Aggregate This Election: \$ 250.
Business or Organization Name: OR
First Name: KEITH Middle Name: Last Name: DENNEN!
Address: 115 SAFANAC TRAIL City: HENDERSONVILLE State: TN Zip Code: 37075
Occupation: A Holvey Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250. Date of Contribution: 6/24/24 Aggregate This Election: \$ 250. 0
Business or Organization Name:
First Name: Davia Middle Name: Last Name: hvckev
Address: 110 Clarendon Place City: HONDERSONNILE State: Tr Zip Code: 37075
Occupation: PRESIDENT Employer: SWIHEASTERN Building
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000. Date of Contribution: 6/28/24 Aggregate This Election: \$ 1000.
Business or Organization Name: OR
First Name: Charles Middle Name: Last Name: Kin Lrough
Address: 48 Wyndermere City: Herpersonville State: To Zip Code: 37075
Occupation: KETIRED Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200. Date of Contribution: 4/28/24 Aggregate This Election: \$ 200.
77 00
Total Contributions: \$ 2700.
(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: FRANK PINSON
2 Reporting Period: Start Date: ADCI 1. 2024 End Date: Turn 30 2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2700.
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name:
First Name: JONATHON Middle Name: Last Name: HAYES
First Name: JONATHON Middle Name: Last Name: HAYES Address: 120 Governors Point City: HENDERSONILLE State: Tr Zip Code: 37075
Occupation: RETIRED Employer:
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150.00 Date of Contribution: Aggregate This Election: \$ 150.00
Business or Organization Name: OR
First Name: Last Name: Last Name:
Address: 652 NORTHRIDGE DR. City: GALLATIN' State: TN. Zip Code: 37066
Occupation: Aesthetics Employer: WIEK
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 450. Date of Contribution: 6/21/24 Aggregate This Election: \$ 450.
Business or Organization Name:
First Name: Last Name: Last Name: Last Name:
Address: 168 ASHLA-D Point City: HENNELSONIILE State: TN Zip Code: 37075
Occupation: Judical Magistrate Employer: Simuli Canti
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Amount of Contribution: \$ 200. Date of Contribution: 6 25/24 Aggregate This Election: \$ 200.
Business or Organization Name:
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: \$ 2500.00
Total Continuations, 4
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name:		,			
2. Reporting Period: Start Date:	ei 1, 202	Y End Date: JUNE 30, 2	2024		
3. Total campaign expenditures from					
COMPLETE THE APPROPRIATE ITEMS kind contribution to a candidate, please remandidate's name in the purpose of the expe	ember to includ	le the purpose of the expenditure (e	must be itemized .g., postage, printi	. If the expending, etc.) along	iture is an in- with the
Business or Organization Name: A	ENDERS	ouville Chamber of	Commence	3	OR
First Name:	Middle	Name:	Last Name:		
Address: 100 Country Clos	DR.	City: HENDERSONUIllé	State: TN	Zip Code:	37075
Purpose of Expenditure: FREE	on FEST				
Amount of Expenditure: \$ 250	2.00	Date of Expenditure: \$	6-24-	2024	
Business or Organization Name:					OR
First Name:	Middle	Name:	Last Name:	1	
Address:		City:	State:	Zip Code:	No
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:	4	Teta e			
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:				100	OR
First Name:	Middle	Name:	Last Name:		\$46 D
Address:					
Purpose of Expenditure:					
Amount of Expenditure: \$		Date of Expenditure: \$			
Total Expenditures: \$(Carry forward to the next page if add amount must be shown in the summ	ditional page	es of this form are used. If this			