CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

7/6/26

1. Date: ~~04/26/2026~~ 2.a. Candidate or Committee Name: Christopher M. Guiette

2.b. If Committee, Name of Candidate: _____ 3. Election Date: May 5th, 2026

4. Campaign Address: 864 Corum Hill Rd

City: Castalian Springs State: TN Zip Code: 37031 Phone: 615-809-9796

5. Candidate Home Address: 864 Corum Hill Rd

City: Castalian Springs State: TN Zip Code: 37031 Phone: 615-809-9796

Candidate Email Address: chrisgforschoolboard@gmail.com

6. Office Sought: (include district number, if applicable) Sumner County School Board, District 9

7. Name of Political Treasurer (may be candidate): Christopher M. Guiette

Political Treasurer Email Address: _____

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: 04/01/2026 End Date: ~~04/25/2026~~ 6/30/26

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 7/6/26 Political Treasurer Signature _____ Date 7/6/26

Witness Signature _____ Date _____ Witness Signature _____ Date _____

AM FILED PM
JUL 15 2026
SUMNER COUNTY ELECTION COMMISSION

12. Summary:

a.	Balance On Hand Last Report	$ 3004.72
b.	Total Receipts This Period	$ 0
c.	Total Disbursements This Period	$ ~~1,409.96~~ 2986.62
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ ~~1594.76~~ 0
e.	Total Loans Outstanding	$ ~~5,000~~ 494.90
f.	Total Obligations Outstanding	$ _____

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Christopher M. Guiette

14. Reporting Period: Start Date: 04/01/2026 End Date: ~~04/25/2026~~ 6/30/26

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) ..... $ 0

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.) ..... $ 0

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ ~~1409.96~~ 2986.62
(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.) ..... $ ~~1409.96~~ 2986.62

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.) ..... $ 0

Account Closed 6/30/26
After Loss of election.

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Christopher M. Guiette

2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026

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: SOS Printing **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: 706 Space Park N City: Goodlettsville State: TN Zip Code: 37072
Purpose of Expenditure: Mailers
Amount of Expenditure: $ 1409.96 Date of Expenditure: $ 04/22/2026

Business or Organization Name: SOS Printing **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: 706 Space park N City: Goodlettsville State: TN Zip Code: 37072
Purpose of Expenditure: Mailers
Amount of Expenditure: $ 1576.66 Date of Expenditure: $ May 4th/2026

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: $ 2986.62
(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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Christopher M. Guiette

2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026

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: Christopher Middle Name: Michael Last Name: Guiette

Address: 864 Corum Hill Rd City: Castalian Springs State: TN Zip Code: 37031

Outstanding Loan Balance (Beginning) $ ~~0~~ 5000

Loans Received $ 0

Loan Payments $ 0

Outstanding Loan (End) $ ~~5,000~~ 494.90

Loan Received For: [X] Primary Election [ ] General Election [ ] Runoff (Local Elections Only)

Date of Loan: 02/23/2026

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

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

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) $ 0 5,000

Loans Received $ 0

Loan Payments $ 0 6.10

Outstanding Loan (End) $ ~~5,000~~ 494.90