



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates

### For Single-Candidate Committees

1. Date: 1/27/2026 2.a. Candidate or Committee Name: Rory Edmonds

2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: \_\_\_\_\_

4. Campaign Address: 1125 Leann Ct  
City: Gallatin State: TN Zip Code: 37066 Phone: \_\_\_\_\_

5. Candidate Home Address: 1125 Leann Ct  
City: Gallatin State: TN Zip Code: 37066 Phone: \_\_\_\_\_  
Candidate Email Address: \_\_\_\_\_

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

7. Name of Political Treasurer (may be candidate): Rory Edmonds  
Political Treasurer Email Address: edmondsforoffice@gmail.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: 7/1/2025 End Date: 1/15/2026

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: [Signature] Date: 1/27/2026  
Political Treasurer Signature: [Signature] Date: 1/27/2026  
Witness Signature: Melissa K. Cox Date: 1/27/2026  
Witness Signature: [Signature] Date: 1/27/2026

12. Summary:

a. Balance On Hand Last Report	AM	PM	\$	_____
b. Total Receipts This Period			\$	_____
c. Total Disbursements This Period	JAN 30 2026		\$	_____
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	SUMNER COUNTY		\$	<u>46.81</u>
e. Total Loans Outstanding	ELECTION COMMISSION		\$	_____
f. Total Obligations Outstanding			\$	_____