CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/8/26 2.a. Candidate or Committee Name: Committee to Elect Sarah Hilton

2.b. If Committee, Name of Candidate: Sarah Hilton 3. Election Date:

4. Campaign Address: 1259 Payton Lane

City: Gallatin State: TN Zip Code: 370666 Phone: 586-530-4246

5. Candidate Home Address: 1259 Payton Lane

City: Gallatin State: TN Zip Code: 370666 Phone: 586-530-4246

Candidate Email Address: sarahhiltonforthe gmail.com

6. Office Sought: (include district number, if applicable) County Commission, district 12

7. Name of Political Treasurer (may be candidate): Jessie McKinney

Political Treasurer Email Address: jesmckinneye 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: 4/26/26 End Date: 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.

Sarah Hilton 7/8/26 Jessie McKinney 7/8/26

Candidate Signature Date Political Treasurer Signature Date

James Wyatt Bellow 7/8/26 James Wyatt Bellow 7/8/26

Witness Signature Date Witness Signature Date

12. Summary:

FILED AM PM JUL 09 2026 SUMNER COUNTY ELECTION COMMISSION

a. Balance On Hand Last Report ..... $ 488.58

b. Total Receipts This Period ..... $ 1,501.00

c. Total Disbursements This Period ..... $ 883.52

d. Balance On Hand (12.a. plus 12.b. minus 12.c.) ..... $ $1,106.06

e. Total Loans Outstanding ..... $ 0

f. Total Obligations Outstanding ..... $ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Committee to Elect Sarah Hilton

14. Reporting Period: Start Date: 4/26/26 End Date: 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) ..... $ 1,501

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.) ..... $ 1,501

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 883.52
(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.) ..... $ 883.52

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ 0

b. Itemized In-Kind Contributions Received This Period ..... $ 39.51

c. Total In-Kind Contributions Received This Period ..... $ 39.51

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Committee to Elect Sarah Hilton

2. Reporting Period: Start Date: 4/26/26 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: Chaney Middle Name: _____ Last Name: Mosley

Address: 1430 Electric Ave City: Nashville State: TN Zip Code: 37206

Occupation: education Employer: MNPS

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/1/26 Aggregate This Election: $ _____

Business or Organization Name: ~~Angela~~ _____ **OR**

First Name: Angela Middle Name: _____ Last Name: Whidden

Address: 2122 Lincoln Ave City: Cleveland State: OH Zip Code: 44107

Occupation: Social worker Employer: CWRU

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

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: n/a Employer: n/a

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

Amount of Contribution: $ 100.00 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Nubia Middle Name: _____ Last Name: Barajas

Address: 549 E Main St, #D41 City: Hendersonville State: TN Zip Code: 37075

Occupation: Small business owner Employer: Tea Tree Co.

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

Amount of Contribution: $ 40.00 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

Total Contributions: $ 215.00

(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: _____

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 215.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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 mgr Employer: Buyers Edge Platform

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

Amount of Contribution: $ 125 Date of Contribution: 5/2/26 Aggregate This Election: $ $125

Business or Organization Name: _____ **OR**

First Name: Anthony Middle Name: _____ Last Name: Stephens

Address: 104 Lee Etta Dr City: Gallatin State: TN Zip Code: 37066

Occupation: n/a Employer: not employed

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

Amount of Contribution: $ 100 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Squires

Address: 134 Chesapeake Harbor City: Hendersonville State: TN Zip Code: 37075

Occupation: director Employer: Nielsen IQ

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Natasha Middle Name: _____ Last Name: Davis

Address: 1151 Payton Lane City: Gallatin State: TN Zip Code: 37066

Occupation: HR Employer: NA

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

Amount of Contribution: $ 50.00 Date of Contribution: 5/2/26 Aggregate This Election: $ _____

Total Contributions: $ 325

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 215 + 325 = 540

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Lani Middle Name: _____ Last Name: Larson

Address: 10721 S Troy St City: Chicago State: IL Zip Code: 60655

Occupation: HR Employer: Ehr Onon Engineers

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/3/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Chelsea Middle Name: _____ Last Name: Pemell

Address: 131 Elnora Rd City: Hendersonville State: TN Zip Code: 37075

Occupation: realtor Employer: n/a

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/3/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Tyler Middle Name: _____ Last Name: Jones

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

Occupation: software engineer Employer: Ferguson + ~~Assoiat~~ Associates

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

Amount of Contribution: $ 150.00 Date of Contribution: 5/9/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Alecia Middle Name: _____ Last Name: Stephens

Address: 104 Lee Etta Rd City: Gallatin State: TN Zip Code: 37066

Occupation: Clerk Employer: Metro Nashville Government

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/11/26 Aggregate This Election: $ $50.00

Total Contributions: $ 225

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 765

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mandy Middle Name: _____ Last Name: Cook

Address: 3108 Boulderpark Dr City: Nashville State: TN Zip Code: 37214

Occupation: yoga teacher Employer: n/a

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

Amount of Contribution: $ 10 Date of Contribution: 5/17/26 Aggregate This Election: $ $20

Business or Organization Name: _____ **OR**

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

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

Occupation: data quality mgr Employer: Buyers Edge Platform

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/18/26 Aggregate This Election: $ $150

Business or Organization Name: _____ **OR**

First Name: Kim Middle Name: _____ Last Name: Tijerina

Address: 190 Grandstand Blvd City: Gallatin State: TN Zip Code: 37066

Occupation: Business analyst Employer: Cracker Barrel

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

Amount of Contribution: $ 25.00 Date of Contribution: 5/18/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

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

Address: 228 Sanders Ferry Rd City: Hendersonville State: TN Zip Code: 37075

Occupation: night stock 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: $ $20

Total Contributions: $ 70

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 835

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

Address: 432 Triple Crown Circle City: Gallatin State: TN Zip Code: 370660

Occupation: data quality mgr Employer: Buyers Edge Platform

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

Amount of Contribution: $ 25 Date of Contribution: 6/2/26 Aggregate This Election: $ 175

Business or Organization Name: _____ **OR**

First Name: Jenna Middle Name: _____ Last Name: Krabacher

Address: 102 Paddock Park Circle City: Gallatin State: TN Zip Code: 37066

Occupation: n/a Employer: na

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/4/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Holly Middle Name: _____ Last Name: Cruz

Address: 3275 Hartsville Pike City: Castalian Springs State: TN Zip Code: 37031

Occupation: Collections specialist Employer: Bridge Healthcare Partners

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/4/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

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

Address: 236 Brown Pl City: Gallatin State: TN Zip Code: 370660

Occupation: self Employer: Self

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

Amount of Contribution: $ 20.00 Date of Contribution: 6/4/26 Aggregate This Election: $ _____

Total Contributions: $ 95

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 930

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Bevins

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

Occupation: self Employer: n/a

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/4/26 Aggregate This Election: $ 75.00

Business or Organization Name: _____ **OR**

First Name: Kristi Middle Name: _____ Last Name: Robey

Address: 120 Sugar Tree Lane City: Gallatin State: TN Zip Code: 370646

Occupation: Sales Mgr Employer: Rich Products

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/4/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Kunkel

Address: 210 Grassy Glen Dr City: Gallatin State: TN Zip Code: 370646

Occupation: business owner Employer: Moving Solutions

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/4/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Nitza Middle Name: _____ Last Name: Canziani

Address: 228 Sanders Ferry Rd City: Hendersonville State: TN Zip Code: 37075

Occupation: Sales Employer: Americolor

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

Amount of Contribution: $ 12.00 Date of Contribution: 6/5/26 Aggregate This Election: $ _____

Total Contributions: $ 112

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1042

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Rose Middle Name: _____ Last Name: Wyrick

Address: 1010 Whispering Wind Way City: Hendersonville State: TN Zip Code: 37075

Occupation: n/a Employer: n/a

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

Amount of Contribution: $ 12.00 Date of Contribution: 6/6/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Norris

Address: 1041 Manskers Farms Blvd City: Hendersonville State: TN Zip Code: 37075

Occupation: n/a Employer: n/a

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

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

Business or Organization Name: _____ **OR**

First Name: Janet Middle Name: _____ Last Name: Scott

Address: 255 E Albert #302 City: Gallatin State: TN Zip Code: 37066

Occupation: n/a Employer: n/a

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/9/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Michaela Middle Name: _____ Last Name: Schnetzer

Address: 1004 Tyree Cts City: White House State: TN Zip Code: 37188

Occupation: Teacher Employer: MNPS

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

Amount of Contribution: $ 12.00 Date of Contribution: 6/10/26 Aggregate This Election: $ _____

Total Contributions: $ 99

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1141

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Alecia Middle Name: _____ Last Name: Stephens

Address: 104 Lee Etta Dr City: Gallatin State: TN Zip Code: 37066

Occupation: Clerk Employer: Metro Government of Nashville

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/11/26 Aggregate This Election: $ 75.00

Business or Organization Name: _____ **OR**

First Name: Kim Middle Name: _____ Last Name: Krieger

Address: 1003 W 29th Ave City: Spokane State: WA Zip Code: 99203

Occupation: Speech language pathologist Employer: Mead School District

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/16/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Mandy Middle Name: _____ Last Name: Cook

Address: 3108 Boulder Park Dr City: Nashville State: TN Zip Code: 37214

Occupation: Yoga teacher Employer: n/a

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

Amount of Contribution: $ 10.00 Date of Contribution: 6/17/26 Aggregate This Election: $ 30.00

Business or Organization Name: _____ **OR**

First Name: Regan Middle Name: _____ Last Name: Cothron

Address: 130 Walton Trace S City: Hendersonville State: TN Zip Code: 37075

Occupation: attorney Employer: government

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/20/26 Aggregate This Election: $ _____

Total Contributions: $ 85.00

(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: Committee to Elect Sarah Hilton

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

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1,226

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Barbara Middle Name: _____ Last Name: Hawk Hilton

Address: 729 Hackberry Way City: Lake Mary State: FL Zip Code: 32746

Occupation: n/a Employer: n/a

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/21/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Beth Middle Name: _____ Last Name: Winfree

Address: 915 Winston Ave City: Lebanon State: TN Zip Code: 37087

Occupation: teacher Employer: ~~Lebanon~~ Episcopal School

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

Amount of Contribution: $ 50.00 Date of Contribution: 6/23/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Andrew Middle Name: _____ Last Name: Piekutowski

Address: 2090 Harvard City: Berkely State: MI Zip Code: 48072

Occupation: auto worker Employer: Stellantis

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

Amount of Contribution: $ 100.00 Date of Contribution: 6/27/26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Robertson

Address: 1000 Banner Dr #2104 City: Gallatin State: TN Zip Code: 37066

Occupation: distiller Employer: AJ Bond Distillery

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

Amount of Contribution: $ 25.00 Date of Contribution: 6/27/26 Aggregate This Election: $ _____

Total Contributions: $ 225+1226=$1,451

(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: Committee to Elect Sarah Hilton
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26
3. Total campaign contributions from preceding page (enter $0 if first page) $ 1451

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: ______ OR
First Name: Margaret Middle Name: ______ Last Name: Schmidt
Address: 71 Grindstone City: Gallatin State: TN Zip Code: 37066
Occupation: n/a Employer: n/a
Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 50.00 Date of Contribution: 5/22/26 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: $ ______

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: $ 1,501
(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: Committee to Elect Sarah Hilton

2. Reporting Period: Start Date: 4/26/26 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: Sarah Middle Name: ____ Last Name: Hilton

Address: 1259 Payton Ln City: Gallatin State: TN Zip Code: 37066

Occupation: Self employed Employer: ____

In-Kind Contribution Received For: ☐ Primary Election ☑ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $ 39.51 In-Kind Contribution Date: 5/12/26 Aggregate This Election: $ 39.51

Description of In-Kind Contribution: Car magnets

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: $ 39.51

(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: Committee to Elect Sarah Hilton

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

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: Act Blue **OR**

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

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

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 0.56 Date of Expenditure: $ 4/28/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ___ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 1.05 Date of Expenditure: $ 4/29/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ___ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 1.05 Date of Expenditure: $ 5/5/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ___ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 20.70 Date of Expenditure: $ 5/6/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ___ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 6.16 Date of Expenditure: $ 5/13/26

Total Expenditures: $ 29.52

(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.)

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Committee to Elect Sarah Fulton

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

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 29.52

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 Prints **OR**

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

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

Purpose of Expenditure: Campaign materials (signs, printed cards)

Amount of Expenditure: $ 548.75 Date of Expenditure: $ 5/18/26

Business or Organization Name: Square Space **OR**

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

Address: 22 Vandk St 12th floor City: NY State: NY Zip Code: 10014

Purpose of Expenditure: website

Amount of Expenditure: $ 27.44 Date of Expenditure: $ 5/15/26

Business or Organization Name: Campaign Verify **OR**

First Name: 1 Middle Name: _____ Last Name: _____

Address: 1215 31st Street NW City: Washington, DC State: ___ Zip Code: 20007

Purpose of Expenditure: texting

Amount of Expenditure: $ 95.00 Date of Expenditure: $ 5/21/26

Business or Organization Name: Act Blue **OR**

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

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

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 2.66 Date of Expenditure: $ 5/20/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ___ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 0.56 Date of Expenditure: $ 6/2/26

Total Expenditures: $ ~~671.75~~ 674.41

(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: Committee to Elect Sarah Hilton

2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26 $703.93

3. Total campaign expenditures from preceding page (enter $0 if first page) $ [illegible] 0784.44

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: Scale to Win **OR**

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

Address: 13742 Harper St City: Santa Ana State: CA Zip Code: 92703

Purpose of Expenditure: texting

Amount of Expenditure: $ 11.00 Date of Expenditure: $ 6/2/26

Business or Organization Name: Mighty Color Nashville **OR**

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

Address: 230 Broadway City: Harstville State: TN Zip Code: 37074

Purpose of Expenditure: printed campaign materials

Amount of Expenditure: $ 120.18 Date of Expenditure: $ 6/3/26

Business or Organization Name: Act Blue **OR**

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

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

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 1.05 Date of Expenditure: $ 6/4/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 8.39 Date of Expenditure: $ 6/8/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 0.62 Date of Expenditure: $ 6/9/26

Total Expenditures: $ 141.24

(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: Committee to Elect Sarah Hilton

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

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $845.17

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: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 1.05 Date of Expenditure: $ 6/15/26

Business or Organization Name: Square Space **OR**

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

Address: 22 Vandick St 2nd floor City: NY State: NY Zip Code: 10014

Purpose of Expenditure: website

Amount of Expenditure: $ 27.44 Date of Expenditure: $ 6/15/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 1.05 Date of Expenditure: $ 6/18/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 0.56 Date of Expenditure: $ 6/22/26

Business or Organization Name: Act Blue **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: transaction fees

Amount of Expenditure: $ 2.91 Date of Expenditure: $ 6/24/26

Total Expenditures: $ 33.01

(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: Committee to Elect Sarah Hilton
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26
3. Total campaign expenditures from preceding page (enter $0 if first page) $ $878.18

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: Act Blue **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: transaction fees
Amount of Expenditure: $ 1.86 Date of Expenditure: $ 6/25/26

Business or Organization Name: Act Blue **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: ______ City: ______ State: ____ Zip Code: ______
Purpose of Expenditure: transaction fees
Amount of Expenditure: $ 3.48 Date of Expenditure: $ 6/30/26

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: $ ______

Total Expenditures: $ $883.52
(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 OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Committee to Elect Sarah Hilton

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

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)
$	$	$	$

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Committee to Elect Sarah Hilton
2. Reporting Period: Start Date: 4/26/26 End Date: 6/30/26
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: ______ 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) .... $ ______