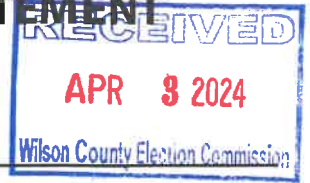




CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees



KM 2:45

1. Date: 4/2/2024 2.a. Candidate or Committee Name: James Maness
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/5/2024
4. Campaign Address: 2558 Edinburgh St.
City: Old Hickory State: TN Zip Code: 37138 Phone: 615-729-7290
5. Candidate Home Address: 2558 Edinburgh St.
City: Old Hickory State: TN Zip Code: 37138 Phone: 615-729-7290
Candidate Email Address: support@jamesmaness.com
6. Office Sought: (include district number, if applicable) Mayor
7. Name of Political Treasurer (may be candidate): James Maness
Political Treasurer Email Address: support@jamesmaness.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
9. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
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.

James Maness 4/2/2024
Candidate Signature Date

Tracy Maness 4/2/24
Witness Signature Date

James Maness 4/2/2024
Political Treasurer Signature Date

Tracy Maness 4/2/24
Witness Signature Date

12. Summary:

- | | |
|---|--------------|
| a. Balance On Hand Last Report | \$ 10,536.22 |
| b. Total Receipts This Period | \$ 14,817.00 |
| c. Total Disbursements This Period | \$ 1,304.97 |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ 24,048.25 |
| e. Total Loans Outstanding | \$ 0 |
| f. Total Obligations Outstanding | \$ 0 |

SUMMARY PAGE - CANDIDATE



13. Name of Candidate or Committee: James Maness

14. Reporting Period: Start Date: 1/16//2024 End Date: 3/31/2024

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) \$ 14,817.00
- 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.) \$ 14,817.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 1,304.97
(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.)..... \$ 1,304.97

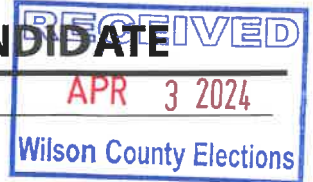
17. In-Kind Contributions:

- 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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
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: Frinda Middle Name: _____ Last Name: Maness

Address: 240 Hwy 104 City: Saltillo State: TN Zip Code: 38370

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 47.00 Date of Contribution: 1/21/2024 Aggregate This Election: \$ 47.00

Business or Organization Name: _____ **OR**

First Name: Whitwell Middle Name: _____ Last Name: Middleton

Address: 2315 Old Lebanon Road City: Mt. Juliet State: TN Zip Code: 37122

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 50.00 Date of Contribution: 1/30/2024 Aggregate This Election: \$ 50.00

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Kaplan

Address: 7405 Lebanon Rd City: Mt. Juliet State: TN Zip Code: 37122

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 100.00 Date of Contribution: 2/5/2024 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ **OR**

First Name: Thi Middle Name: _____ Last Name: Dar

Address: 2111 Greenslope Trail NE City: Huntsville State: AL Zip Code: 35811

Occupation: Crew Member Employer: KFC

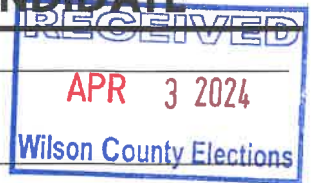
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 10.00 Date of Contribution: 2/12/2024 Aggregate This Election: \$ 20.00

Total Contributions: \$ 207.00

(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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 207.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Thi Middle Name: _____ Last Name: Dar
Address: 2111 Greenslope Trial NE City: Huntsville State: AL Zip Code: 35811
Occupation: Crew Member Employer: KFC
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 10.00 Date of Contribution: 3/10/2024 Aggregate This Election: \$ 30.00

Business or Organization Name: _____ **OR**
First Name: Donald Middle Name: _____ Last Name: Rochford
Address: 244 Meriwether Blvd City: Nashville State: TN Zip Code: 37221
Occupation: Manager Employer: The Rochford Companies
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 2/20/2024 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ **OR**
First Name: Jeremy Middle Name: _____ Last Name: Hayes
Address: 120 S.W. Cooks Rd. City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Teacher Employer: RePublic Schools
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,800.00 Date of Contribution: 3/24/2024 Aggregate This Election: \$ 1,800.00

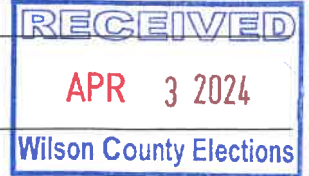
Business or Organization Name: _____ **OR**
First Name: William Middle Name: _____ Last Name: Morris
Address: 1014 Benton Harbor Blvd City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Architect Employer: KBJM Architects
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 100.00

Total Contributions: \$ 2,617.00

(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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,617.00



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Matthew Middle Name: _____ Last Name: Power
Address: 2223 Monthermer Ct City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Project Manager Employer: JR Builders
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,800.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,800.00

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: Murphy
Address: 209 Deerfield Lane City: Franklin State: TN Zip Code: 37069
Occupation: Owner Employer: Cumberland Advisors, LLC
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,500.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,500.00

Business or Organization Name: _____ **OR**
First Name: Ben Middle Name: _____ Last Name: Forkum
Address: 129 Tate Lane City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Owner Employer: Summit Realty Group, LLC
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ **OR**
First Name: Nixon Middle Name: _____ Last Name: Pressley
Address: 623 Ridgecrest Lane City: Lebanon State: TN Zip Code: 37090
Occupation: Staff Counsel Employer: Lawyer's Escrow Service, Inc.
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 500.00

Total Contributions: \$ 7,417.00

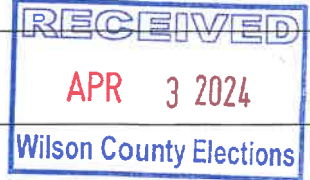
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: James Maness

2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024

3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 7,417.00



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kenneth Middle Name: _____ Last Name: Powers

Address: 1984 Providence Pkwy, Ste 203 City: Mt. Juliet State: TN Zip Code: 37122

Occupation: Owner Employer: Commercial Realty Services

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

Amount of Contribution: \$ 1,800.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,800.00

Business or Organization Name: _____ **OR**

First Name: Frank Middle Name: _____ Last Name: Horton

Address: 216 Deep Woods Ct. City: Nashville State: TN Zip Code: 37214

Occupation: Development Manager Employer: CPS Land, LLC

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

Amount of Contribution: \$ 1,000.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,000.00

Business or Organization Name: _____ **OR**

First Name: Diane Middle Name: _____ Last Name: Journell

Address: 3571 Murfreesboro Road City: Lebanon State: TN Zip Code: 37090

Occupation: Realtor Employer: Keller Williams

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

Amount of Contribution: \$ 500.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ **OR**

First Name: Dale Middle Name: _____ Last Name: Mcculloch

Address: 631 NW Rutland Rd City: Mt. Juliet State: TN Zip Code: 37122

Occupation: President Employer: Jones Bros., Inc

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

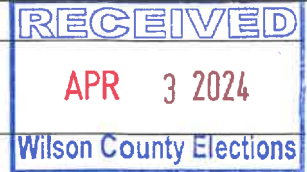
Amount of Contribution: \$ 1,000.00 Date of Contribution: 3/27/2024 Aggregate This Election: \$ 1,000.00

Total Contributions: \$ 11,717.00

(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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 11,717.00



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Jeff Middle Name: _____ Last Name: Rowlett
Address: 1105 Shadow Lane City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Broker Employer: Coldwell Banker Barnes
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500.00 Date of Contribution: 3/27/24 Aggregate This Election: \$ 500.00

Business or Organization Name: _____ **OR**
First Name: Robert Middle Name: _____ Last Name: Porter
Address: 728 General Kershaw Dr. City: Old Hickory State: TN Zip Code: 37138
Occupation: President Employer: Civil Site Design Group
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000.00 Date of Contribution: 3/27/24 Aggregate This Election: \$ 1,000.00

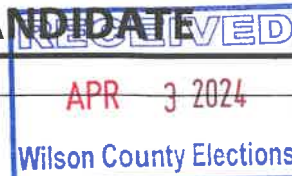
Business or Organization Name: _____ **OR**
First Name: Melissa Middle Name: _____ Last Name: Hester
Address: 977 Chandler Rd. City: Mt. Juliet State: TN Zip Code: 37122
Occupation: Manager Employer: Commercial Realty Services
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1,600.00 Date of Contribution: 3/27/24 Aggregate This Election: \$ 1,600.00

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: \$

Total Contributions: \$ 14,817

(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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
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: My Domain **OR**

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

Address: 10 Corporate Dr Suite #300 City: Burlington State: MA Zip Code: 01803

Purpose of Expenditure: Domain Name

Amount of Expenditure: \$ 14.26 Date of Expenditure: 1/19/24

Business or Organization Name: United States Postal Service **OR**

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

Address: 2491 N Mt Juliet Rd, City: Mt. Juliet State: TN Zip Code: 37122

Purpose of Expenditure: Postage

Amount of Expenditure: \$ 5.32 Date of Expenditure: 1/29/24

Business or Organization Name: NationBuilder **OR**

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

Address: 520 S Grand Ave City: Los Angeles State: CA Zip Code: 90071

Purpose of Expenditure: Web hosting, Database, Phone

Amount of Expenditure: \$ 1,266.00 Date of Expenditure: 2/16/2024

Business or Organization Name: Stripe **OR**

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

Address: 510 Townsend St. City: San Francisco State: CA Zip Code: 94103

Purpose of Expenditure: Processing Fee

Amount of Expenditure: \$ 1.66 Date of Expenditure: 1/26/24

Business or Organization Name: Stripe **OR**

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

Address: 510 Townsend St. City: San Francisco State: CA Zip Code: 94103

Purpose of Expenditure: Processing Fee

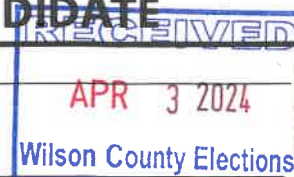
Amount of Expenditure: \$ 1.75 Date of Expenditure: 1/30/2024

Total Expenditures: \$ 1288.99

(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: James Maness
2. Reporting Period: Start Date: 1/16/2024 End Date: 3/31/2024
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,288.99



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: Stripe **OR**

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

Address: 510 Townsend St. City: San Francisco State: CA Zip Code: 94103

Purpose of Expenditure: Processing Fee

Amount of Expenditure: \$ 14.80 Date of Expenditure: 2/20/24

Business or Organization Name: Stripe **OR**

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

Address: 510 Townsend St. City: San Francisco State: CA Zip Code: 94103

Purpose of Expenditure: Processing Fee

Amount of Expenditure: \$.59 Date of Expenditure: 2/12/24

Business or Organization Name: Stripe **OR**

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

Address: 510 Townsend St. City: San Francisco State: CA Zip Code: 94103

Purpose of Expenditure: Processing Fee

Amount of Expenditure: \$.59 Date of Expenditure: 3/11/24

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: \$ 1,304.97

(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.)