



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 2/3/26 2.a. Candidate or Committee Name: Chas for Clarksville
2.b. If Committee, Name of Candidate: Charles Uffelman 3. Election Date: 11/3/2026

Candidate Email Address: chas@chasforclarksville.com

6. Office Sought: (include district number, if applicable) Clarksville City Council Ward 6

7. Name of Political Treasurer (may be candidate): Mary Scott

Political Treasurer Email Address: mascott46@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: 1/5/2026 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.

Chas Uffelman 2/3/26
Candidate Signature Date

Political Treasurer Signature Date

Christina McKenney 2/3/26
Witness Signature Date

Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	\$ 0.00
b. Total Receipts This Period	\$ 6,135.00
c. Total Disbursements This Period	\$ 369.91
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ 5,765.09
e. Total Loans Outstanding	\$ 200.00
f. Total Obligations Outstanding	\$ 0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Chas for Clarksville

14. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 1,455.00
 (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) \$ 4480.00
- c. Loans Received This Reporting Period..... \$ 200.00
- d. Interest Received This Reporting Period..... \$ 0.00
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 6,135.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 363.91
 (Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0.00
- c. Total Obligation Payments Made This Period..... \$ 0.00
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 363.91

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0.00
- b. Itemized In-Kind Contributions Received This Period \$ 0.00
- c. Total In-Kind Contributions Received This Period \$ 0.00

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Chas for Clarksville
2. Reporting Period: Start Date: 1/05/2025 End Date: 1/15/2025
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: Rod Middle Name: _____ Last Name: Mills

City: Clarksville State: TN Zip Code: 37043

Occupation: Professor Employer: APSU

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

Amount of Contribution: \$ 100 Date of Contribution: _____ Aggregate This Election: \$ 100

Business or Organization Name: _____ OR

First Name: Wesley Middle Name: _____ Last Name: King

City: Nashville State: TN Zip Code: 37207

Occupation: Minister Employer: Disciples of Christ

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

Amount of Contribution: \$ 200 Date of Contribution: _____ Aggregate This Election: \$ 200

Business or Organization Name: _____ OR

First Name: Karen Middle Name: _____ Last Name: Sorenson

City: Clarksville State: TN Zip Code: 37043

Occupation: Professor Employer: APSU

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

Amount of Contribution: \$ 250 Date of Contribution: _____ Aggregate This Election: \$ 250

Business or Organization Name: _____ OR

First Name: William Middle Name: _____ Last Name: Karnes

City: Nashville State: TN Zip Code: 37211

Occupation: Strategist Employer: Cooley Public Strategies

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

Amount of Contribution: \$ 100 Date of Contribution: _____ Aggregate This Election: \$ 100

Total Contributions: \$ 650

(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: Chas For Clarksville
2. Reporting Period: Start Date: 1/05/2026 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 650

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

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

City: Gallatin State: TN Zip Code: 37066

Occupation: Self Employer: Megan Lange

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

Amount of Contribution: \$ 10 Date of Contribution: 1/12/26 Aggregate This Election: \$ 10

Business or Organization Name: _____ OR

First Name: Christine Middle Name: _____ Last Name: McKinney

City: Clarksville State: TN Zip Code: 37042

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 100 Date of Contribution: 1/12/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR

First Name: Karem Middle Name: _____ Last Name: Waycoff

City: Clarksville State: tn Zip Code: 37043

Occupation: Eligibility Worker Employer: State of TN

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

Amount of Contribution: \$ 100 Date of Contribution: 1/12/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR

First Name: Brian Middle Name: _____ Last Name: Cordova

City: Nashville State: TN Zip Code: 37218

Occupation: Executive Director Employer: Tennessee Democratic Party

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

Amount of Contribution: \$ 100 Date of Contribution: 1/12/26 Aggregate This Election: \$ 100

Total Contributions: \$ 960

(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: Chas For Clarksville
2. Reporting Period: Start Date: 01/05/2026 End Date: 01/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 960

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Stefi Middle Name: _____ Last Name: Outlaw

City: Clarksville State: TN Zip Code: 37042
Occupation: Teacher Employer: CMCSS
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50 Date of Contribution: 1/12/26 Aggregate This Election: \$ 50

Business or Organization Name: _____ **OR**
First Name: Brady Middle Name: _____ Last Name: Watson

City: Knoxville State: TN Zip Code: 37918
Occupation: Organizer Employer: Union of Concerned Scientists
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 20 Date of Contribution: 1/12/2026 Aggregate This Election: \$ 20

Business or Organization Name: _____ **OR**
First Name: Karen Middle Name: _____ Last Name: Reynolds

City: Clarksville State: TN Zip Code: 37040
Occupation: Clinical Workflow Analyst Employer: Department of Defense
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/12/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ **OR**
First Name: Robin Middle Name: _____ Last Name: Freeman

City: Cunningham State: TN Zip Code: 37052
Occupation: Retired Employer: Retired
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 1,230

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 1230

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: Katharine Middle Name: _____ Last Name: Rumble

City: Philadelphia State: PA Zip Code: 19145

Occupation: Public Engagement Manager Employer: Pattern Energy

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

In-Kind Contribution Value: \$ 100 In-Kind Contribution Date: 1/12/26 Aggregate This Election: \$ 100

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

Name: _____ Last Name: Freeman

Address: 1109B Lipscomb Drive City: Nashville State: TN Zip Code: 37204

Occupation: Real Estate Employer: Freeman Webb

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

In-Kind Contribution Value: \$ 250 In-Kind Contribution Date: 1/14/202 Aggregate This Election: \$ 250

Description of In-Kind Contribution: _____

_____ OR

First Name: Cody Middle Name: _____ Last Name: Dahl

Address: 3811 Shady Grove rd City: Clarksville State: TN Zip Code: 37043

Occupation: Realtor Employer: Cody Dahl

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

In-Kind Contribution Value: \$ 100 In-Kind Contribution Date: 1/15/26 Aggregate This Election: \$ 100

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: Terri Middle Name: _____ Last Name: Nemethy

Address: 3435 Eastbrook Dr City: La Grange State: KY Zip Code: 40031

Occupation: Retired Employer: Retired

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

In-Kind Contribution Value: \$ 100 In-Kind Contribution Date: 1/15/26 Aggregate This Election: \$ 100

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ 1,780

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1780

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Bryan Middle Name: _____ Last Name: McNamara
City: Washington State: DC Zip Code: 20002
Occupation: Contractor Employer: RWD Consulting
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/15/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: Christina Middle Name: _____ Last Name: Keith
City: Nashville State: TN Zip Code: 37218
Occupation: Finance Director Employer: Tennessee Democratic Party
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/15/2026 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: Cody Middle Name: _____ Last Name: Pruitt
City: Bowling Green State: KY Zip Code: 42103
Occupation: Director of Electoral Organizing Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/15/2026 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: Rachel Middle Name: _____ Last Name: Wainwright
City: Clarksville State: TN Zip Code: 37043
Occupation: Teacher Employer: CMCSS
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 1/15/2026 Aggregate This Election: \$ 37043

Total Contributions: \$ 2180

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2180

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Marybeth Middle Name: _____ Last Name: Hunt

City: Clarksville State: TN Zip Code: 37043

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 100 Date of Contribution: 1/15/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR

First Name: Richard Middle Name: _____ Last Name: Herron

City: Nashville State: TN Zip Code: 37208

Occupation: Office Assistant Employer: Herron Law

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

Amount of Contribution: \$ 100 Date of Contribution: 1/15/26 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR

First Name: Isaac Middle Name: _____ Last Name: Kimes

City: Mt. Juliet State: TN Zip Code: 37122

Occupation: Attorney Employer: Stranch Jennings Garvey

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

Amount of Contribution: \$ 1000 Date of Contribution: 1/15/26 Aggregate This Election: \$ 1000

Business or Organization Name: _____ OR

First Name: Gabriel Middle Name: _____ Last Name: Rutan-Ram

City: Knoxville State: TN Zip Code: 37923

Occupation: Retail Employer: Target

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

Amount of Contribution: \$ 100 Date of Contribution: 1/15/26 Aggregate This Election: \$ 100

Total Contributions: \$ 3480

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3480

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: William Middle Name: _____ Last Name: Wall III

City: Clarksville State: TN Zip Code: 37043

Occupation: Dentist Employer: Richview Family Dentistry

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

Amount of Contribution: \$ 250 Date of Contribution: 1/15/26 Aggregate This Election: \$ 250

Business or Organization Name: _____ OR

First Name: Joy Middle Name: _____ Last Name: Rice

City: Clarksville State: TN Zip Code: 37043

Occupation: Education & Training Technician Employer: TN Air National Guard

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

Amount of Contribution: \$ 250 Date of Contribution: 1/15/26 Aggregate This Election: \$ 250

Business or Organization Name: _____ OR

First Name: Jeff Middle Name: _____ Last Name: Preptit

City: Nashville State: TN Zip Code: 37204

Occupation: Attorney Employer: HSG Law PLLC

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

Amount of Contribution: \$ 150 Date of Contribution: 1/15/26 Aggregate This Election: \$ 150

Business or Organization Name: _____ OR

First Name: Russell Middle Name: _____ Last Name: Travis

City: Driftwood State: TX Zip Code: 78619

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 100 Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 4130

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4130

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Karl Middle Name: _____ Last Name: Dean

City: Nashville State: TN Zip Code: 37215

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ 250 Date of Contribution: 1/15/26 Aggregate This Election: \$ 250

Business or Organization Name: _____ OR

First Name: George Middle Name: _____ Last Name: Uribe

City: Brentwood State: TN Zip Code: 37024

Occupation: Consultant Employer: Self Employed

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

Amount of Contribution: \$ 100 Date of Contribution: 1/15/26 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR

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

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: _____

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: \$ _____

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/05/26 End Date: 1/15/26
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: Mailerlite Inc. OR

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

City: Middleton State: DE Zip Code: 19709

Purpose of Expenditure: Email services

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____
\$42.71 1/7/26

Business or Organization Name: Main Street Checks OR

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

City: Birmingham State: AL Zip Code: 35203

Purpose of Expenditure: Checks

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____
15.06 1/8/26

Business or Organization Name: Campaign Verify OR

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

City: Washington State: DC Zip Code: 20007

Purpose of Expenditure: Texting verification

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____
95.00 1/7/26

Business or Organization Name: Tennessee Democratic Party OR

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

City: Nashville State: TN Zip Code: 37209

Purpose of Expenditure: Voter File

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____
100 1/7/26

Business or Organization Name: Mailerlite Inc. OR

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

Address: 651 N Broad St, City: Middleton State: DE Zip Code: 19709

Purpose of Expenditure: Email services

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____
20.50 1/9/26

Total Expenditures: \$ _____

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 273.27

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: Actblue OR

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

City: Somerville, State: MA Zip Code: 02144

Purpose of Expenditure: Card processing

Amount of Expenditure: \$ 16.95 Date of Expenditure: \$ 1/12/26

Business or Organization Name: Actblue OR

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

City: Somerville, State: MA Zip Code: 02144

Purpose of Expenditure: Card Processing

Amount of Expenditure: \$ 3.53 Date of Expenditure: \$ 1/13/26

Business or Organization Name: Actblue OR

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

City: Somerville, State: MA Zip Code: 02144

Purpose of Expenditure: Card Processing

Amount of Expenditure: \$ 4.13 Date of Expenditure: \$ 1/14/26

Business or Organization Name: Actblue OR

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

City: Somerville, State: MA Zip Code: 02144

Purpose of Expenditure: Card Processing

Amount of Expenditure: \$ 66.03 Date of Expenditure: \$ 1/15/26

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: \$ _____

Total Expenditures: \$ _____

(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: Chas for Clarksville
2. Reporting Period: Start Date: 1/5/2026 End Date: 1/15/2026
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: Charles Middle Name: _____ Last Name: Uffelman

[REDACTED] City: Clarksville State: TN Zip Code: 37040

Outstanding Loan Balance (Beginning) \$ 0

Loans Received \$ 200

Loan Payments \$ 0

Outstanding Loan (End)..... \$ 200

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

Date of Loan: 1/5/2026

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

Loans Received \$ 200

Loan Payments \$ 0

Outstanding Loan (End)..... \$ 200