

SS-1109 (Rev. 8/2023)

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates **For Single-Candidate Committees**

1. Date: 10/26/24 2.a. Candidate or Committee Name: Eric Craddock for Sheriff
2.b. If Committee, Name of Candidate: Eric Craddock 3. Election Date: 11-5-24
4. Campaign Address: 1269 Barry Lane
City: Gallatin State: TN Zip Code: 37066 Phone: 615-290-9035
5. Candidate Home Address:
City: State: Zip Code: Phone:
Candidate Email Address: Craddock 4 sheriff pgmail.com
6. Office Sought: (include district number, if applicable) Sheriff
7. Name of Political Treasurer (may be candidate): Cheryl Collins
Political Treasurer Email Address: Cherylcollins Zeaol, 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: 10/1/2024 End Date: 10/26/2024
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. Candidate Signature Date Calling Date Date
Honde McDuell 10/28/2024 Phonde McDuell 10/28/2024 Witness Signature Date
12. Summary:
a. Balance On Hand Last Report
b. Total Receipts This Period
c. Total Disbursements This Period\$ 1,585.09
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)
e. Total Loans Outstanding\$
f. Total Obligations Outstanding \$
SS-1109 (Rev. 8/2023)

SUMMARY PAGE - CANDIDATE

13. Na	me of Candidate or Committee: Eric Craddock for Sherif	F	
14. Rep	porting Period: Start Date: 10/1/2024 End Date: 10/26/	200	24
15. Rec			
a.	Unitemized Contributions (\$100 or less from each source this period)	ructio	ns for more information.)
b.	Itemized Contributions (over \$100 from each source this period)	\$_	3340.15
c.	Loans Received This Reporting Period		
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.)	\$_	3995. 5
16. Dis	bursements:		
a.	Total Expenditures (other than loan payments)	. \$_	15.85
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.)	. \$_	1585.04
17. ln-l	Kind Contributions:		
a.	Unitemized In-Kind Contributions Received This Period	. \$_	0
b.	Itemized In-Kind Contributions Received This Period	. \$_	513.95
c.	Total In-Kind Contributions Received This Period	. \$_	0
18. Ob	ligations:		513 55
a.	Total Obligations Outstanding (must be shown in item 12.f.)	\$_	015

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Eric Craddock for Sheriff
2. Reporting Period: Start Date: 10/1/2024 End Date: 10/26/2024
3. Total campaign contributions from preceding page (enter \$0 if first page) \$
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.
Business or Organization Name: OR
First Name: Robert Middle Name: Last Name: Pospisil, Jr
Address: 178 River Chase City: Hendersonville State: TN Zip Code: 37075
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $$500^{\circ}$$ Date of Contribution: $10/4/24$ Aggregate This Election: $$500^{\circ}$$
Business or Organization Name:OR
First Name: H. Wayne Middle Name: Last Name: Padgett Address: 279 Burshy Branch Rd. City: Gallatin State: TN Zip Code: 37066
Occupation: Retired Employer: Retired
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: $$500, =$ Date of Contribution: $10/4/24$ Aggregate This Election: $$500, =$
Business or Organization Name:OR
First Name: Luther Middle Name: Last Name: Bratton
Address: 1/3 Grad Cf. City: Portland State: TN Zip Code: 37148 Occupation: Self Employer: Braffor & Association
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$500. Date of Contribution: 10 14/24 Aggregate This Election: \$500
Business or Organization Name:OR
First Name: William Middle Name: Last Name: Lamberth
First Name: William Middle Name: Last Name: Lamberth Address: Pool Boy 8/2 City: Portland State: TN Zip Code: 37/48
Occupation: State Rep. Employer: The Two Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500. Date of Contribution: 10/3/24 Aggregate This Election: \$ 500 =
Total Contributions: \$ 2,000 -
(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.)
amount mast be shown in the saminary on mist page.

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Eric Craddock for Sherif	C					
2. Reporting Period: Start Date: 10/1/2024 End Date: 10/26/2	024					
3. Total campaign contributions from preceding page (enter \$0 if first page) \$	2.0					
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.						
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.						
Business or Organization Name:	OR OR					
First Name: Tommy Middle Name:	Last Name: WhiHaker					
Address: 615 Ranch Rd. City: Portland						
Occupation: Retired Employer: Retired						
Contribution Received For: Primary Election General Election						
Amount of Contribution: $\frac{500,9}{}$ Date of Contribution: $\frac{10/4/24}{}$	_ Aggregate This Election: \$ 500					
Business or Organization Name:	OR					
First Name: Daniel Middle Name:	Last Name: Sanders					
Address: 165 Keytown Rd City: Portland	State: <u>₹</u> Zip Code: 37/48					
Occupation: Employer:						
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)					
Amount of Contribution: $$200 = Date of Contribution: 10/4/24$	_ Aggregate This Election: \$ _2 00 *					
Business or Organization Name:	OR					
First Name: Nathan Middle Name:						
Address: 119 Wind Wood Dr. City: Portland	State: Telescope Zip Code: 37/48					
Occupation: Veterinarian Employer: Portland	Animal Hospital					
Contribution Received For: Primary Election	Runoff (Local Elections Only)					
Amount of Contribution: \$ 150.99 Date of Contribution: $10/4/24$	Aggregate This Election: \$ 150 **					
Business or Organization Name:	OR					
First Name: Mark Middle Name:	Last Name: Harrison					
Address: 105 Blooms bury Dr. City: Portland	State: Tw Zip Code: 37/48					
Occupation: Banker Employer: The Far						
Contribution Received For: Primary Election General Election	Runoff (Local Elections Only)					
Amount of Contribution: $$\frac{240.5}{}$ Date of Contribution: $108/24$	_ Aggregate This Election: \$ 486.30					
Total Contributions: \$ 3090.15						
(Carry forward to the next page if additional pages of this form are used. If the amount must be shown in the summary on first page.)	nis is the last page of contributions, this					

Page <u>4</u> of <u>9</u>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee N	lame: Eric Craddock for Sheri	ff					
	rate: 10/1/24 End Date: 10/26/20						
3. Total campaign contribution	ons from preceding page (enter \$0 if first page)	\$ 3090.15					
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3090. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION. Business or Organization Name:							
COMPLETE THE APPROPRIAT	E ITEMS FOR EACH ITEMIZED CONTRIBUTION.						
First Name: Christoph	Middle Name:	Last Name: Tarjeckey					
Address: 251 B Martin	Chapel Rd City: Portland	State: Zip Code: 37/48					
Occupation: LE.	Employer: Sumoe	County					
Amount of Contribution: \$_<	Date of Contribution: $10/4/24$	Aggregate This Election: \$_250					
Business or Organization Nar	me:	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 Nar	me:	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 Nar	me:	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: \$					
	340. 5 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:	Eric Craddock-	for Sheriff		
2. Reporting Period: Start Date: 10		1 .		
3. Total in-kind contributions from pr	• /		0 -	
COMPLETE THE APPROPRIATE ITEMS I dollars (\$100) from any contributor during the	FOR EACH IN-KIND CON period must be reported.	TRIBUTION. In-kind cor	ntributions totaling more than c	one hundred
Business or Organization Name:				OR
First Name: Jaska				
Address: 107 N. Russell S				
Occupation: Business Owner				
In-Kind Contribution Received For:				
In-Kind Contribution Value: \$ 500 000	_ In-Kind Contribution	Date: 10/4/24 A	ggregate This Election: \$ _	500=
Description of In-Kind Contribution:				
			No.	
Business or Organization Name:				OR
First Name: John Address: 195 Oak Dr.				
Occupation: Self				1170
				tions Only
In-Kind Contribution Received For:				
In-Kind Contribution Value: \$ 4. 5 Description of In-Kind Contribution:		Date: 10/10/29 A	ggregate This Election: \$ 7	0 7.
Description of In-Kind Contribution.	WINKELL			
Business or Organization Name:				OR
First Name: Mark	Middle Name:	L	ast Name: Harrisa	
Address: 105 Bloomsbury	Or City: Por	Hand s	State: 📈 Zip Code: 3	7148
Occupation: Banker				
In-Kind Contribution Received For:	☐ Primary Election	General Election	Runoff (Local Elect	tions Only)
In-Kind Contribution Value: \$ 9.85	_ In-Kind Contribution	Date: A	ggregate This Election: \$	500 00
Description of In-Kind Contribution:	WINCED			
Business or Organization Name:				OP
First Name:				
Address:				
Occupation:				
In-Kind Contribution Received For:				
In-Kind Contribution Value: \$				
Description of In-Kind Contribution:				
Total In-Kind Contributions: \$ 5/3	3.45			
(Carry forward to the next page if add	itional pages of this forr		e last page of in-kind	
contributions, this amount must be sh	lown in the summary or	i first page.)		

Page 6 of 9

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Eric Cr	addock for Sheriff			
2. Reporting Period: Start Date: 10/1/24		State III The		
Total campaign expenditures from preceding p		_0	-	
5. Total campaign experiotions from preceding p	age (enter 50 ii iiist page) 5			-
COMPLETE THE APPROPRIATE ITEMS FOR EACH E kind contribution to a candidate, please remember to include candidate's name in the purpose of the expenditure section	de the purpose of the expenditure (e.g	ust be itemized ., postage, printi	. If the expen ng, etc.) along	diture is an in- gwith the
Business or Organization Name: Souther	Occastons Event	Center		OR
First Name: Middle	Name:	Last Name:		
Address: 107 N Russell St.	City: Portlant	State: T∼	Zip Code:	37148
Purpose of Expenditure: Food for Fu	ndraiser	178-19		
Purpose of Expenditure: Food for Fu Amount of Expenditure: \$ 1085 04	Date of Expenditure: \$	14/24		
Business or Organization Name: Portland	High School	W 1		OR
Business or Organization Name: Portland First Name: Middle	Name:	Last Name:		
Address: 600 College St	City: Portland	State: 🔼	Zip Code:	37148
Purpose of Expenditure: Sign tov 5	coreboard Banners			
Amount of Expenditure: \$ 500 °	Date of Expenditure: \$	121/24		
Business or Organization Name:				
First Name: Middle				
Address:				
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: \$		1	
Total Expenditures: \$ 1,585.04				
(Carry forward to the next page if additional page		the last page	of expendi	tures, this
amount must be shown in the summary on first p	age.)			

Page <u>7</u> of <u>9</u>

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name:	Te Craddock +	or Sheriff		
2. Reporting Period: Start Date: 10/1	/24 End Date: 10	120/24		
3. Complete the appropriate items for e		, ,	\$100).	
Complete the following for the source of each I	oan received and/or outstandi	ng 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	on General Election	Runoff (Local Election	ons Only)	
Date of Loan:				
List all endorsers or guarantors for above loan	(If more space is needed, pleas	e attach additional pages.)		
Business or Organization Name:				OR
First Name:				
Address:				
Amount Guaranteed Outstanding: \$				
Business or Organization Name:				OR
First Name:				
Address:				
Amount Guaranteed Outstanding: \$			Zip code.	
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:	<u> </u>	
Address:	City:	State:	Zip Code:	
Amount Guaranteed Outstanding: \$				
Totals for all loans (Complete this page for ea Total loans received and loan payments should be				
Balance (Beginning)			, ,	
Loans Received				
Loan Payments				
Outstanding Loan (End)				
SS-1132 (Rev. 1/2023)			Page 8 of	9

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE 1. Candidate or Committee Name: Enc Craddock for Sheriff End Date: 10/26/24 2. Reporting Period: Start Date: 10/1/24 3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period. Description of Business Name: _____ Obligation: First Name: Middle Name: ____ Last Name: Outstanding Debt **Payments** Outstanding Address: This Period Balance (Period Incurred Balance Beginning) This Period (Period End) \$ \$ State: Zip Code: _____ Description of Business Name: Obligation: First Name: _____ Middle Name: ____ Last Name: _____ Outstanding Debt **Payments** Outstanding Address: __ Balance (Period Incurred This Period Balance Beginning) This Period (Period End) \$ \$ \$ \$ State: Zip Code: _____ Description of Business Name: _____ Obligation: Middle Name: ____ First Name: _____ Last Name: **Payments** Outstanding Outstanding Debt Address: This Period Balance Balance (Period Incurred Beginning) This Period (Period End) \$ \$ State: _____ Zip Code: _____ Description of Business Name: _____ Obligation: First Name: Middle Name: Last Name: _____ **Payments** Outstanding Outstanding Debt Address: Balance (Period This Period Balance Incurred Beginning) This Period (Period End) \$ \$ \$ \$ State: Zip Code:

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	Debt	Payments	Outstanding
Balance (Period Beginning)	Incurred	This Period	Balance (Period End)
\$ 1	50	\$ 0	\$0