



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/8/2026 2.a. Candidate or Committee Name: JOE GRANDY
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 620 OLD EMBREEVILLE RD
City: JONESBOROUGH State: TN Zip Code: 37659 Phone: _____
5. Candidate Home Address: 620 OLD EMBREEVILLE RD
City: JONESBOROUGH State: TN Zip Code: 37659 Phone: _____
Candidate Email Address: jgrandy@washingtoncountyttn.org
6. Office Sought: (include district number, if applicable) County Mayor
7. Name of Political Treasurer (may be candidate): Clarence Mabe
Political Treasurer Email Address: clarencem@smamusements.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: 1/16/2026 End Date: 3/31/2026
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.
11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

Candidate Signature _____ Date _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>13,584.59</u>
b. Total Receipts This Period	\$ <u>14,779.70</u>
c. Total Disbursements This Period	\$ <u>9,836.62</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>18,527.67</u>
e. Total Loans Outstanding	\$ <u>0.00</u>
f. Total Obligations Outstanding	\$ <u>0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: JOE GRANDY

14. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$14,779.70
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$14,779.70

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$9,836.62
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$9,836.62

17. In-Kind Contributions:

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

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: JOE GRANDY
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Melissa Middle Name: _____ Last Name: Williams

Address: 109 Bob Clark Road City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Dick Middle Name: _____ Last Name: Cecil

Address: 109 Bob Clark Road City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Vickie Middle Name: _____ Last Name: Teague

Address: 196 Shanks Road City: Telford State: TN Zip Code: 37690

Occupation: Housewife Employer: Housewife

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: P Last Name: Roe

Address: 216 Magnolia Ridge Drive City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$6,200.00

(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: JOE GRANDY
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Clarinda Middle Name: P Last Name: Jeanes

Address: 216 Magnolia Ridge Drive City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Tom Middle Name: _____ Last Name: Krieger

Address: 304 Jim Range Road City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: William Middle Name: T Last Name: Williams

Address: 179 Hayfield Drive City: Johnson City State: TN Zip Code: 37615

Occupation: Physician Employer: Pain Medicine Associates

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Kerry Middle Name: _____ Last Name: Reichardt

Address: 179 Hayfield Drive City: Johnson City State: TN Zip Code: 37615

Occupation: Housewife Employer: Housewife

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$12,400.00

(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: JOE GRANDY
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$12,400.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Marion Middle Name: C Last Name: Bradley
Address: 4428 Town and Country Drive City: Charlotte State: NC Zip Code: 28226
Occupation: Retired Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**
First Name: Bob Middle Name: _____ Last Name: Cooper
Address: 203 E Holston Avenue City: Johnson City State: TN Zip Code: 37601
Occupation: Agent Employer: Cooper Family Investments, LLC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$479.70 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$479.70

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: \$ \$14,779.70
(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: JOE GRANDY
2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

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: Shell & Miller Advertising **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4014 North Roan Street City: Johnson City State: TN Zip Code: 37601
Purpose of Expenditure: Printing Charges
Amount of Expenditure: \$ \$1,229.69 Date of Expenditure: \$ 3/15/2026

Business or Organization Name: Shell & Miller Advertising **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4014 North Roan Street City: Johnson City State: TN Zip Code: 37601
Purpose of Expenditure: Data management service, broadcast production and agency fees
Amount of Expenditure: \$ \$7,300.00 Date of Expenditure: \$ 3/15/2026

Business or Organization Name: Shell & Miller Advertising **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4014 North Roan Street City: Johnson City State: TN Zip Code: 37601
Purpose of Expenditure: Website revision and hosting fees
Amount of Expenditure: \$ \$1,187.00 Date of Expenditure: \$ 3/15/2026

Business or Organization Name: _____ **OR**
First Name: Sherry Middle Name: _____ Last Name: Greene
Address: 222 Olde Farm Drive City: Jonesborough State: TN Zip Code: 37659
Purpose of Expenditure: Printer purchased
Amount of Expenditure: \$ \$119.93 Date of Expenditure: \$ 2/2/2026

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: \$ \$9,836.62

(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.)