CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 1/26/2024 2.a. Candidate or Committee Name: Amelia Parker

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/7/2023

4. Campaign Address: PO Box 6132

City: Knoxville State: TN Zip Code: 37914 Phone: _____

5. Candidate Home Address: 5917 Holston View Lane

City: Knoxville State: TN Zip Code: 37914 Phone: (865) 851-8561

Candidate Email Address: VoteAmeliaParker@gmail.com

6. Office Sought: (include district number, if applicable) City Council at Large Seat C

7. Name of Political Treasurer (may be candidate): Amelia Parker

Political Treasurer Email Address: voteameliaparker@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: 10/29/2023 End Date: 1/15/2024

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	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

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12. Summary:

a.	Balance On Hand Last Report	$ $3,782.46
b.	Total Receipts This Period	$ $1,000.55
c.	Total Disbursements This Period	$ $3,377.80
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $1,405.21
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Amelia Parker

14. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $600.55
(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) ..... $ $400.00

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.) ..... $ $1,000.55

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $3,377.80
(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.)..... $ $3,377.80

17. In-Kind Contributions:

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

b. Itemized In-Kind Contributions Received This Period ..... $ $500.00

c. Total In-Kind Contributions Received This Period ..... $ $500.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Amelia Parker

2. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

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: Robert Middle Name: _____ Last Name: French

Address: 3742 Ivy Ave City: Knoxville State: TN Zip Code: 37914

Occupation: Software Engineer Employer: Cisco

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

Amount of Contribution: $ $200.00 Date of Contribution: 11/6/2023 Aggregate This Election: $ $600.00

Business or Organization Name: _____ **OR**

First Name: Robert Middle Name: _____ Last Name: French

Address: 3742 Ivy Ave City: Knoxville State: TN Zip Code: 37914

Occupation: Software Engineer Employer: Cisco

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

Amount of Contribution: $ $200.00 Date of Contribution: 12/6/2023 Aggregate This Election: $ $800.00

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: $ _____

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: $ $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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Amelia Parker

2. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

3. Total in-kind contributions from preceding page (enter $0 if first page) $ $0.00

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: People Power PAC **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: 2415 Brooks Ave City: Knoxville State: TN Zip Code: 37915

Occupation: None Employer: None

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

In-Kind Contribution Value: $ $500.00 In-Kind Contribution Date: 11/1/2023 Aggregate This Election: $ $1,500.00

Description of In-Kind Contribution: Campaign office space on MLK

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: $ $500.00

(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: Amelia Parker

2. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

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: GoUnionPrinting **OR**

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

Address: 2600 9th St N #501 City: St. Petersburg State: FL Zip Code: 33704

Purpose of Expenditure: Campaign yard signs

Amount of Expenditure: $ $1,120.25 Date of Expenditure: $ 10/30/2023

Business or Organization Name: USPS **OR**

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

Address: 300 Macedonia Lane City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Postage

Amount of Expenditure: $ $5.25 Date of Expenditure: $ 11/1/2023

Business or Organization Name: TN Dems **OR**

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

Address: 4900 Centennial Blvd Suite 300 City: Nashvile State: TN Zip Code: 37209

Purpose of Expenditure: Voter outreach software

Amount of Expenditure: $ $163.88 Date of Expenditure: $ 11/2/2023

Business or Organization Name: ActBlue **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Fundraisig fees

Amount of Expenditure: $ $44.69 Date of Expenditure: $ 11/3/2023

Business or Organization Name: ActBlue **OR**

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

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Fundraising fees

Amount of Expenditure: $ $7.58 Date of Expenditure: $ 12/4/2023

Total Expenditures: $ $1,341.65

(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: Amelia Parker

2. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,341.65

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: _____

Address: 366 Summer Street City: Somerville State: MA Zip Code: 02144

Purpose of Expenditure: Fundraising fees

Amount of Expenditure: $ $5.33 Date of Expenditure: $ 1/4/2024

Business or Organization Name: South Coast Pizza **OR**

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

Address: 1103 Sevier Ave SE City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign event food

Amount of Expenditure: $ $113.08 Date of Expenditure: $ 11/5/2023

Business or Organization Name: South Coast Pizza **OR**

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

Address: 1103 Sevier Ave SE City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign event food

Amount of Expenditure: $ $60.75 Date of Expenditure: $ 11/6/2023

Business or Organization Name: South Coast Pizza **OR**

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

Address: 1103 Sevier Ave SE City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign event food

Amount of Expenditure: $ $483.39 Date of Expenditure: $ 11/7/2023

Business or Organization Name: Habaneros **OR**

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

Address: 4704 Asheville Highway City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Post-election lunch

Amount of Expenditure: $ $59.63 Date of Expenditure: $ 11/8/2023

Total Expenditures: $ $2,063.83

(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: Amelia Parker

2. Reporting Period: Start Date: 10/29/2023 End Date: 1/15/2024

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $2,063.83

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: Vantiv **OR**

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

Address: Vantiv.com City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Fundraising fees

Amount of Expenditure: $ $82.95 Date of Expenditure: $ 11/9/2023

Business or Organization Name: Vantiv **OR**

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

Address: vantiv.com City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Fundraising fees

Amount of Expenditure: $ $20.49 Date of Expenditure: $ 12/11/2023

Business or Organization Name: Vantiv **OR**

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

Address: vantiv.com City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Fundraising fees

Amount of Expenditure: $ $14.39 Date of Expenditure: $ 1/9/2024

Business or Organization Name: Ruth Chris **OR**

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

Address: 950 Volunteer Landing City: Knoxville State: TN Zip Code: 37915

Purpose of Expenditure: Post-election campaign team dinner

Amount of Expenditure: $ $936.14 Date of Expenditure: $ 11/15/2023

Business or Organization Name: Better Help **OR**

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

Address: 990 Villa St City: Mountain View State: CA Zip Code: 94041

Purpose of Expenditure: Executive coaching

Amount of Expenditure: $ $260.00 Date of Expenditure: $ 12/30/2023

Total Expenditures: $ $3,377.80

(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.)