



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/28/2026 2.a. Candidate or Committee Name: Betsy Henderson (2026)
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 11124 Kingston Pike Suite 119-115
City: Knoxville State: TN Zip Code: 37934 Phone: _____
5. Candidate Home Address: 12301 Conner Springs Lane
City: Knoxville State: TN Zip Code: 37932 Phone: _____
Candidate Email Address: info@betsyhenderson.com
6. Office Sought: (include district number, if applicable) County Mayor
7. Name of Political Treasurer (may be candidate): Zane Duncan
Political Treasurer Email Address: zanejduncan@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: 4/1/2026 End Date: 4/25/2026
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>\$86,258.59</u>
b. Total Receipts This Period	\$ <u>\$30,000.00</u>
c. Total Disbursements This Period	\$ <u>\$89,544.52</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$26,714.07</u>
e. Total Loans Outstanding	\$ <u>\$70,000.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Betsy Henderson (2026)

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

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) \$ \$10,000.00
- c. Loans Received This Reporting Period..... \$ \$20,000.00
- 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.) \$ \$30,000.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$89,544.52
(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.)..... \$ \$89,544.52

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$506.65
- c. Total In-Kind Contributions Received This Period \$ \$506.65

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Christopher Middle Name: _____ Last Name: Lambert

Address: 12616 Midland Pass Street City: Knoxville State: TN Zip Code: 37932

Occupation: Director of Recruit Employer: UBS

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

Amount of Contribution: \$ \$1 000 0 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$1.000 0

Business or Organization Name: _____ **OR**

First Name: Bryan Middle Name: K Last Name: Bailey

Address: 6306 Norwood Dr City: Knoxville State: TN Zip Code: 37914

Occupation: House Hasson Employer: Warehouse manager

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

Amount of Contribution: \$ \$50 00 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Bruce Middle Name: _____ Last Name: Wagner

Address: 11015 Crown Point Dr City: Farragut State: TN Zip Code: 37934

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/3/2026 Aggregate This Election: \$ \$100 00

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: _____ Last Name: Smith

Address: 9821 Crestline Dr City: Knoxville State: TN Zip Code: 37922

Occupation: NHC Employer: Corporate chef

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/4/2026 Aggregate This Election: \$ \$50 00

Total Contributions: \$ \$1,200.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Marilyn Middle Name: _____ Last Name: Lynch

Address: 1 West Exchange St City: Providence State: RI Zip Code: 12903

Occupation: Hogan Law Associates Employer: Attorney

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/8/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Carroll

Address: 11344 Woodcliff Dr City: Farragut State: TN Zip Code: 37934

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/9/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: DAVID Middle Name: _____ Last Name: Proffitt

Address: 9905 Rainbow Dr City: Knoxville State: TN Zip Code: 37922

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/9/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: Herrera Still PLLC **OR**

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

Address: 1518 N Broadway City: Knoxville State: TN Zip Code: 37917

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$1,000.0 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$1,000.0

Total Contributions: \$ \$2,800.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Horn

Address: 12705 Coral Reef Cir City: Knoxville State: TN Zip Code: 37922

Occupation: Christ Covenant Church Employer: Women's Min Director

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/10/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Michele Carringer Committee to Elect **OR**

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

Address: 5329 Beverly Oaks Drive City: Knoxville State: TN Zip Code: 37918

Occupation: N/A Employer: N/A

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

Amount of Contribution: \$ \$1.000.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$1.000.00

Business or Organization Name: _____ **OR**

First Name: Suzanne Middle Name: _____ Last Name: Roten

Address: 1904 Cherokee Bluff Drive City: Knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: _____ Last Name: Williams

Address: 721 Virtue Road City: Knoxville State: TN Zip Code: 37934

Occupation: The Williams Company Employer: real estate

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

Amount of Contribution: \$ \$1.900.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$1.900.00

Total Contributions: \$ \$6,050.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,050.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: CHARLES Middle Name: _____ Last Name: IRVINE

Address: 862 Hansmore Place City: Knoxville State: TN Zip Code: 37919

Occupation: Business Owner Employer: Self

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: SCOTT Middle Name: _____ Last Name: YATES

Address: 1817 Rockford Ln City: Knoxville State: TN Zip Code: 37922

Occupation: Business Owner Employer: Self

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Steinberger

Address: 12609 Hunters Creek Ln City: Knoxville State: TN Zip Code: 37922

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/18/2026 Aggregate This Election: \$ \$900.00

Business or Organization Name: _____ **OR**

First Name: Roy Middle Name: _____ Last Name: Miller

Address: 3111 Rush Miller Road City: Knoxville State: TN Zip Code: 37914

Occupation: Dean Employer: Johnson University

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/22/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$7,100.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,100.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Martin Middle Name: _____ Last Name: Ammons

Address: 3111 Saratoga Dr City: Knoxville State: TN Zip Code: 37920

Occupation: Tarp Mfg Employer: Trailer Specialists of Knoxville

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$1,250.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: Dramm

Address: 106 Sunali Lane City: Loudon State: TN Zip Code: 37774

Occupation: Retired Employer: N/A

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Alois Middle Name: _____ Last Name: Metler

Address: 271 Moss Grove Blvd APT 334 City: Knoxville State: TN Zip Code: 37922

Occupation: Best Effort Employer: Best Effort

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Romi Middle Name: _____ Last Name: Patel

Address: 9222 Dragon Boat Road City: Knoxville State: TN Zip Code: 37931

Occupation: Business Owner Employer: Self

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$1,000.00

Total Contributions: \$ \$9,000.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Hitesh Middle Name: _____ Last Name: Patidar

Address: 2924 Boyds Creek Highway City: Sevierville State: TN Zip Code: 37876

Occupation: Business Owner Employer: Self

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

Amount of Contribution: \$ \$400.00 Date of Contribution: 4/24/2026 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Darshuna Middle Name: _____ Last Name: Dasadia

Address: 2924 Boyds Creek Highway City: Sevierville State: TN Zip Code: 37876

Occupation: Business Owner Employer: Self

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

Amount of Contribution: \$ \$600.00 Date of Contribution: 4/24/2026 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: \$ _____

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: \$ \$10,000.00

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: _____ **OR**

First Name: Betsy Middle Name: _____ Last Name: Henderson

Address: 12301 Conner Springs Lane City: Knoxville State: TN Zip Code: 37932

Occupation: School Board Employer: Knox County School

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

In-Kind Contribution Value: \$ \$252.51 In-Kind Contribution Date: 4/3/2026 Aggregate This Election: \$ \$14,463.86

Description of In-Kind Contribution: Social Media

Business or Organization Name: _____ **OR**

First Name: Betsy Middle Name: _____ Last Name: Henderson

Address: 12301 Conner Springs Lane City: Knoxville State: TN Zip Code: 37932

Occupation: School Board Employer: Knox County School

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

In-Kind Contribution Value: \$ \$254.14 In-Kind Contribution Date: 4/13/2026 Aggregate This Election: \$ \$14,718.00

Description of In-Kind Contribution: Social Media

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: \$ \$506.65

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: i360 **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2300 Clarendon Blvd Ste 800 City: Arlington State: VA Zip Code: 22201
Purpose of Expenditure: Data
Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Logan Middle Name: _____ Last Name: Barton
Address: 66 Pin Oak Ln City: Mount Union State: PA Zip Code: 17066
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$96.04 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Jade Middle Name: _____ Last Name: Bass
Address: 67 North Locust Ave City: Marlton State: NJ Zip Code: 18053
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$508.14 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Emily Middle Name: _____ Last Name: Blanton
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$337.49 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Caleb Middle Name: _____ Last Name: Choma
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$359.21 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$1,900.88

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$1,900.88

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: _____ **OR**
First Name: Reagan Middle Name: _____ Last Name: Gibson
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$348.28 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Dillon Middle Name: _____ Last Name: Gimple
Address: 231 Spangler Rd City: Mayfield State: KY Zip Code: 42066
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$328.74 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Caleb Middle Name: _____ Last Name: Grinstead
Address: 323 Greystone Rd City: Marion State: VA Zip Code: 24354
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$137.28 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Daniel Middle Name: _____ Last Name: Guth
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$103.43 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: David Middle Name: _____ Last Name: Jaster
Address: 18101 Lincoln Rd City: New Lothrop State: MI Zip Code: 48460
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$197.61 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$3,016.22

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$3,016.22

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: _____ **OR**
First Name: Patty Middle Name: Jean Last Name: King
Address: 7604 Breckenridge Ln City: Knoxville State: TN Zip Code: 37938
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$361.88 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Josh Middle Name: _____ Last Name: McKee
Address: 559 Quaker Rd City: Macedon State: NY Zip Code: 14502
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$190.54 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Henry Middle Name: _____ Last Name: Parisi
Address: 1149 Lovell View Dr City: Knoxville State: TN Zip Code: 37932
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$312.76 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Bethany Middle Name: _____ Last Name: Peart
Address: 9993 Hwy 221 City: Woodruff State: SC Zip Code: 29388
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$131.73 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Kalyn Middle Name: _____ Last Name: Putman
Address: 1940 E Snover Rd City: Maryville State: MI Zip Code: 48744
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$247.48 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$4,260.61

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,260.61

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: _____ **OR**
First Name: Andrew Middle Name: _____ Last Name: Schmidt
Address: 2307 W Beaver Creek Dr City: Knoxville State: TN Zip Code: 37949
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$60.95 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Jonathan Middle Name: _____ Last Name: Schmidt
Address: 3564 S 2nd St City: Milwaukee State: WI Zip Code: 53207
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$99.74 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Bunker Middle Name: _____ Last Name: Seyfert
Address: 2658 Scottish Pike City: Knoxville State: TN Zip Code: 37920
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$196.47 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Gabriel Middle Name: _____ Last Name: Stephens
Address: 1811 Harrison Rd City: Dothan State: AL Zip Code: 36303
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$403.84 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: Sweeney Jr
Address: 9604 Gulf Park Dr City: Knoxville State: TN Zip Code: 37923
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$798.01 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$5,819.62

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,819.62

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: _____ **OR**
First Name: Cameron Middle Name: _____ Last Name: Wilson
Address: 308 Jule Dr City: Chesapeake State: VA Zip Code: 23322
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$466.63 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Kat Middle Name: _____ Last Name: Worden
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$204.63 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: _____ **OR**
First Name: Chrissey Middle Name: _____ Last Name: Stephens
Address: 2614 Sweeping Rain Ln City: Knoxville State: TN Zip Code: 37931
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: IRS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280
Purpose of Expenditure: Payroll Taxes
Amount of Expenditure: \$ \$1,048.10 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: Professional Payroll Services **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605
Purpose of Expenditure: Payroll Services
Amount of Expenditure: \$ \$56.52 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$7,645.50

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$7,645.50

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: _____ **OR**
First Name: Emily Middle Name: _____ Last Name: Wiatr
Address: 2429 Bishop Bridge Road City: Knoxville State: TN Zip Code: 37922
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$105.00 Date of Expenditure: \$ 4/7/2026

Business or Organization Name: Acquire Digital LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4117 Hillsboro Pike Ste 103184 City: Nashville State: TN Zip Code: 37215
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$7,400.00 Date of Expenditure: \$ 4/7/2026

Business or Organization Name: Gipper Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 119 Innisbrook Lane City: Simpsonville State: SC Zip Code: 29681
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$1,750.00 Date of Expenditure: \$ 4/9/2026

Business or Organization Name: Gipper Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 119 Innisbrook Lane City: Simpsonville State: SC Zip Code: 29681
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$1,525.00 Date of Expenditure: \$ 4/15/2026

Business or Organization Name: Art and Copy **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3245 Peachtree Parkway Suite D City: Suwanee State: GA Zip Code: 30024
Purpose of Expenditure: Brochure
Amount of Expenditure: \$ \$2,225.00 Date of Expenditure: \$ 4/17/2026

Total Expenditures: \$ \$20,650.50

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$20,650.50

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: Acquire Digital LLC **OR**

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

Address: 4117 Hillsboro Pike Ste 103184 City: Nashville State: TN Zip Code: 37215

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$9,650.00 Date of Expenditure: \$ 4/17/2026

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: Wiatr

Address: 2429 Bishop Bridge Road City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: \$ \$90.00 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**

First Name: Logan Middle Name: _____ Last Name: Barton

Address: 66 Pin Oak Ln City: Mount Union State: PA Zip Code: 17066

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: \$ \$137.89 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**

First Name: Jade Middle Name: _____ Last Name: Bass

Address: 67 North Locust Ave City: Marlton State: NJ Zip Code: 18053

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: \$ \$103.88 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**

First Name: Caleb Middle Name: _____ Last Name: Choma

Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: \$ \$457.02 Date of Expenditure: \$ 4/21/2026

Total Expenditures: \$ \$31,089.29

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$31,089.29

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: _____ **OR**
First Name: Reagan Middle Name: _____ Last Name: Gibson
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$1,071.93 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Dillon Middle Name: _____ Last Name: Gimple
Address: 231 Spangler Rd City: Mayfield State: KY Zip Code: 42066
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$86.48 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Caleb Middle Name: _____ Last Name: Grinstead
Address: 323 Greystone Rd City: Marion State: VA Zip Code: 24354
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$322.38 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Daniel Middle Name: _____ Last Name: Guth
Address: 2307 W Beaver Creek Dr City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$39.55 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Patty Middle Name: Jean Last Name: King
Address: 7604 Breckenridge Ln City: Knoxville State: TN Zip Code: 37938
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$188.88 Date of Expenditure: \$ 4/21/2026

Total Expenditures: \$ \$32,798.51

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$32,798.51

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: _____ **OR**
First Name: Josh Middle Name: _____ Last Name: McKee
Address: 559 Quaker Rd City: Macedon State: NY Zip Code: 14502
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$71.71 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Henry Middle Name: _____ Last Name: Parisi
Address: 1149 Lovell View Dr City: Knoxville State: TN Zip Code: 37932
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$222.57 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Bethany Middle Name: _____ Last Name: Peart
Address: 9993 Hwy 221 City: Woodruff State: SC Zip Code: 29388
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$150.82 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Andrew Middle Name: _____ Last Name: Schmidt
Address: 2307 W Beaver Creek Dr City: Knoxville State: TN Zip Code: 37949
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$179.16 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Jonathan Middle Name: _____ Last Name: Schmidt
Address: 3564 S 2nd St City: Milwaukee State: WI Zip Code: 53207
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$182.85 Date of Expenditure: \$ 4/21/2026

Total Expenditures: \$ \$33,605.62

(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.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$33,605.62

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: _____ **OR**
First Name: Gabriel Middle Name: _____ Last Name: Stephens
Address: 1811 Harrison Rd City: Dothan State: AL Zip Code: 36303
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$443.84 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: Sweeney Jr
Address: 9604 Gulf Park Dr City: Knoxville State: TN Zip Code: 37923
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$793.57 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Cameron Middle Name: _____ Last Name: Wilson
Address: 308 Jule Dr City: Chesapeake State: VA Zip Code: 23322
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$77.26 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Peter Middle Name: _____ Last Name: Wild
Address: 1043 Richland Rd City: Blaine State: TN Zip Code: 37990
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$241.21 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: _____ **OR**
First Name: Chrissey Middle Name: _____ Last Name: Stephens
Address: 2614 Sweeping Rain Ln City: Knoxville State: TN Zip Code: 37931
Purpose of Expenditure: Campaign Worker
Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 4/21/2026

Total Expenditures: \$ \$35,206.50

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$35,206.50

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: IRS **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280
Purpose of Expenditure: Payroll Taxes
Amount of Expenditure: \$ \$863.00 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: Professional Payroll Services **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605
Purpose of Expenditure: Payroll Services
Amount of Expenditure: \$ \$39.41 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: Wind Consulting **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37922
Purpose of Expenditure: Consulting
Amount of Expenditure: \$ \$2,500.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Gipper Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 119 Innisbrook Lane City: Simpsonville State: SC Zip Code: 29681
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$3,000.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Anedot **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1340 Poydras Street Suite 1770 City: New Orleans State: LA Zip Code: 70112
Purpose of Expenditure: Finance Fees 4-1-26 through 4-25-26
Amount of Expenditure: \$ \$248.50 Date of Expenditure: \$ 4/25/2026

Total Expenditures: \$ \$41,857.41

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$41,857.41

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: Art and Copy OR

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

Address: 3245 Peachtree Parkway Suite D City: Suwanee State: GA Zip Code: 30024

Purpose of Expenditure: Mail

Amount of Expenditure: \$ \$23,473.48 Date of Expenditure: \$ 4/7/2026

Business or Organization Name: Art and Copy OR

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

Address: 3245 Peachtree Parkway Suite D City: Suwanee State: GA Zip Code: 30024

Purpose of Expenditure: Mail

Amount of Expenditure: \$ \$24,213.63 Date of Expenditure: \$ 4/7/2026

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: \$ _____

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: \$ \$89,544.52

(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: Betsy Henderson (2026)
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
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: Betsy Middle Name: _____ Last Name: Henderson

Address: 12301 Conner Springs Lane City: Knoxville State: TN Zip Code: 37932

Outstanding Loan Balance (Beginning) \$ \$50,000.00

Loans Received \$ \$20,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$70,000.00

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

Date of Loan: 4/25/2026

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: \$ \$0.00

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) \$ \$50,000.00

Loans Received \$ \$20,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$70,000.00