



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/28/2026 2.a. Candidate or Committee Name: Gina Oster
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 9536 Briarwood Dr
City: Knoxville State: TN Zip Code: 37923 Phone: _____
5. Candidate Home Address: 9536 Briarwood Dr
City: Knoxville State: TN Zip Code: 37923 Phone: _____
Candidate Email Address: voteginaoster@gmail.com
6. Office Sought: (include district number, if applicable) County Commission, District 3
7. Name of Political Treasurer (may be candidate): Sybil Brown
Political Treasurer Email Address: akasyb@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>\$35,325.76</u>
b. Total Receipts This Period	\$ <u>\$4,448.91</u>
c. Total Disbursements This Period	\$ <u>\$20,903.21</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$18,871.46</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: Gina Oster

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) \$ \$4,448.91
- 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.) \$ \$4,448.91

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$20,903.21
(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.)..... \$ \$20,903.21

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$150.00
- c. Total In-Kind Contributions Received This Period \$ \$150.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Gina Oster
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: Marsha Middle Name: _____ Last Name: Joiner
Address: 1114 Firethorne Way City: Knoxville State: TN Zip Code: 37923
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$400.00

Business or Organization Name: _____ **OR**
First Name: Kimberly Middle Name: _____ Last Name: Frazier
Address: 1300 Four Mile Post Rd SE City: Huntsville State: AL Zip Code: 35802
Occupation: Commissioner Employer: Knox County TN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$47.00 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$47.00

Business or Organization Name: _____ **OR**
First Name: Terry Middle Name: _____ Last Name: Hill
Address: 8609 Garrison Dr City: Knoxville State: TN Zip Code: 37931
Occupation: Commissioner Employer: Knox County TN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$47.00 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$1 047.00

Business or Organization Name: _____ **OR**
First Name: Charles Middle Name: _____ Last Name: Reynolds
Address: 212 Winmont Turn City: Knoxville State: TN Zip Code: 37922
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$594.00
(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: Gina Oster
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) \$ \$594.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Lansden Landmarks **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1201 Clinch Ave City: Knoxville State: TN Zip Code: 37916
Occupation: Owner Employer: Lansden Landmarks
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: Big Red PAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1505 Hall Acres Dr City: Knoxville State: TN Zip Code: 37918
Occupation: PAC Employer: PAC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$3,354.9 Date of Contribution: 4/23/2026 Aggregate This Election: \$ \$3,354.9

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: \$ \$4,448.91
(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: Gina Oster
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: Knoxville Focus **OR**

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Occupation: Owner Employer: Knoxville Focus

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

In-Kind Contribution Value: \$ \$150.00 In-Kind Contribution Date: 4/20/2026 Aggregate This Election: \$ \$150.00

Description of In-Kind Contribution: Political Ad Publication

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: \$ \$150.00

(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: Gina Oster
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: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/2/2026

Business or Organization Name: Walmart **OR**

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

Address: 8445 Walbrook Dr City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Office Supplies for Campaign

Amount of Expenditure: \$ \$37.90 Date of Expenditure: \$ 4/3/2026

Business or Organization Name: Weigel's **OR**

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

Address: 1000 N Cedar Bluff Rd City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: \$ \$6.64 Date of Expenditure: \$ 4/4/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/4/2026

Business or Organization Name: Dunkin' Donuts **OR**

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

Address: 401 N Cedar Bluff Rd City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: \$ \$101.53 Date of Expenditure: \$ 4/5/2006

Total Expenditures: \$ \$262.07

(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: Gina Oster
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) \$ \$262.07

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: Abridged Beer Company **OR**

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

Address: 320 N Peters Rd Ste 103 City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: \$ \$180.00 Date of Expenditure: \$ 4/5/2026

Business or Organization Name: Knoxville Focus **OR**

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$186.60 Date of Expenditure: \$ 4/5/2026

Business or Organization Name: Parrott Printing Inc **OR**

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

Address: 2007 Riverside Dr City: Knoxville State: TN Zip Code: 37915

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: \$ \$373.31 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: Parker Wolford **OR**

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

Address: 9625 Stringtown Road City: Strawberry Plains State: TN Zip Code: 37871

Purpose of Expenditure: Social Media

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 4/6/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/6/2026

Total Expenditures: \$ \$1,559.98

(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: Gina Oster
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) \$ \$1,559.98

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: Juuce Inc **OR**

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

Address: 8 The Green Ste 21104 City: Dover State: DE Zip Code: 19901

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 4/8/2026

Business or Organization Name: Art and Copy Partners LLC **OR**

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

Address: 3245 Peachtree Pkwy Ste D 238 City: Suwanee State: GA Zip Code: 30024

Purpose of Expenditure: Campaign Mailer

Amount of Expenditure: \$ \$3,354.91 Date of Expenditure: \$ 4/8/2026

Business or Organization Name: Corner 16 **OR**

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

Address: 1640 Bob Kirby Rd City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: \$ \$57.31 Date of Expenditure: \$ 4/8/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/9/2026

Business or Organization Name: Matt Oster **OR**

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

Address: 1505 Red Maple Court City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Social Media/Co Campaign Mgr

Amount of Expenditure: \$ \$3,500.00 Date of Expenditure: \$ 4/9/2026

Total Expenditures: \$ \$8,780.20

(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: Gina Oster
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) \$ \$8,780.20

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: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/10/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$76.11 Date of Expenditure: \$ 4/12/2026

Business or Organization Name: Knoxville Focus OR

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$186.60 Date of Expenditure: \$ 4/12/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$54.00 Date of Expenditure: \$ 4/13/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$58.00 Date of Expenditure: \$ 4/14/2026

Total Expenditures: \$ \$9,212.91

(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: Gina Oster
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) \$ \$9,212.91

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: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$81.00 Date of Expenditure: \$ 4/15/2026

Business or Organization Name: Tractor Supply Company **OR**

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

Address: 101 N Seven Oaks Drive City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Sign Hardware

Amount of Expenditure: \$ \$109.03 Date of Expenditure: \$ 4/15/2026

Business or Organization Name: GOP 250th Dinner **OR**

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

Address: PO Box 50153 City: Knoxville State: TN Zip Code: 37950

Purpose of Expenditure: Republican 250th Celebration

Amount of Expenditure: \$ \$850.00 Date of Expenditure: \$ 4/16/2026

Business or Organization Name: Parker Wolford **OR**

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

Address: 9625 Stringtown Road City: Strawberry Plains State: TN Zip Code: 37871

Purpose of Expenditure: Social Media

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 4/16/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$116.00 Date of Expenditure: \$ 4/16/2026

Total Expenditures: \$ \$10,868.94

(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: Gina Oster
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) \$ \$10,868.94

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: Eternal Marketing Group LLC **OR**

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

Address: PO Box 3786 City: Knoxville State: TN Zip Code: 37927

Purpose of Expenditure: Campaign Mailer

Amount of Expenditure: \$ \$611.80 Date of Expenditure: \$ 4/17/2026

Business or Organization Name: Victory Phones LLC **OR**

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

Address: 190 Monroe Ave NW Ste 300 City: Grand Rapids State: MI Zip Code: 49503

Purpose of Expenditure: Campaign Texts

Amount of Expenditure: \$ \$287.11 Date of Expenditure: \$ 4/17/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$116.00 Date of Expenditure: \$ 4/17/2026

Business or Organization Name: Eternal Marketing Group LLC **OR**

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

Address: PO Box 3786 City: Knoxville State: TN Zip Code: 37927

Purpose of Expenditure: Campaign Mailer

Amount of Expenditure: \$ \$3,661.43 Date of Expenditure: \$ 4/18/2026

Business or Organization Name: Kroger Fuel Center **OR**

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

Address: 9161 Middlebrook Pike City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Reimbursement for door to door

Amount of Expenditure: \$ \$57.20 Date of Expenditure: \$ 4/18/2026

Total Expenditures: \$ \$15,602.48

(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: Gina Oster
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) \$ \$15,602.48

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: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$116.00 Date of Expenditure: \$ 4/18/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$177.00 Date of Expenditure: \$ 4/19/2026

Business or Organization Name: Knoxville Focus OR

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Purpose of Expenditure: Advertising

Amount of Expenditure: \$ \$186.60 Date of Expenditure: \$ 4/19/2026

Business or Organization Name: Sam's Club OR

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

Address: 8435 Walbrook Dr City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Volunteer Womens Republican Lunch

Amount of Expenditure: \$ \$148.47 Date of Expenditure: \$ 4/19/2026

Business or Organization Name: Art and Copy Partners LLC OR

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

Address: 3245 Peachtree Pkwy Ste D 238 City: Suwanee State: GA Zip Code: 30024

Purpose of Expenditure: Campaign Mailer

Amount of Expenditure: \$ \$3,455.54 Date of Expenditure: \$ 4/20/2026

Total Expenditures: \$ \$19,686.09

(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: Gina Oster
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) \$ \$19,686.09

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: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$118.00 Date of Expenditure: \$ 4/20/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$177.00 Date of Expenditure: \$ 4/21/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$118.00 Date of Expenditure: \$ 4/22/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$177.00 Date of Expenditure: \$ 4/23/2026

Business or Organization Name: Eternal Marketing Group LLC **OR**

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

Address: PO Box 3786 City: Knoxville State: TN Zip Code: 37927

Purpose of Expenditure: Campaign Mailer

Amount of Expenditure: \$ \$332.12 Date of Expenditure: \$ 4/24/2026

Total Expenditures: \$ \$20,608.21

(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: Gina Oster
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) \$ \$20,608.21

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: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$118.00 Date of Expenditure: \$ 4/24/2026

Business or Organization Name: Facebook OR

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: \$ \$177.00 Date of Expenditure: \$ 4/25/2026

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: \$ \$20,903.21

(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.)