



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/19/2025 2.a. Candidate or Committee Name: Karyn Adams
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/26/2025
4. Campaign Address: 211 Druid Drive
City: Knoxville State: TN Zip Code: 37920 Phone: _____
5. Candidate Home Address: 211 Druid Drive
City: Knoxville State: TN Zip Code: 37920 Phone: _____
Candidate Email Address: aow@aowebster.com
6. Office Sought: (include district number, if applicable) City Council, District 1
7. Name of Political Treasurer (may be candidate): Adrienne Webster
Political Treasurer Email Address: aow@aowebster.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: 11/13/2024 End Date: 1/15/2025
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>\$0.00</u>
b. Total Receipts This Period	\$ <u>\$11,755.00</u>
c. Total Disbursements This Period	\$ <u>\$3,251.65</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$8,503.35</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: Karyn Adams

14. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025

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) \$ \$11,755.00
- 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.) \$ \$11,755.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$3,251.65
(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.)..... \$ \$3,251.65

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$250.00
- c. Total In-Kind Contributions Received This Period \$ \$250.00

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
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: Karyn Middle Name: _____ Last Name: Adams
Address: 211 Druid Dr City: Knoxville State: TN Zip Code: 37920
Occupation: Principal Employer: HA ThirtyOne
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 11/26/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**
First Name: Kenneth Middle Name: _____ Last Name: Stephenson
Address: 212 Linford Rd City: Knoxville State: TN Zip Code: 37920
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 12/1/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Mark Middle Name: _____ Last Name: Hill
Address: 142 Tall Oaks Drive City: Knoxville State: TN Zip Code: 37920
Occupation: Executive Recruiter Employer: Alta Search
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Jack Middle Name: _____ Last Name: Vaughan
Address: 429 Hiawassee Ave City: Knoxville State: TN Zip Code: 37917
Occupation: Consultant Employer: Morgan Street Strategies
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$1,975.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,975.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Matt Middle Name: _____ Last Name: Shears
Address: 8604 Fulp Rd City: Stokesdale State: NC Zip Code: 27357
Occupation: Area Director Employer: PFCC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Shannon Middle Name: _____ Last Name: Noble
Address: 2108 Terrace Avenue City: Knoxville State: TN Zip Code: 37916
Occupation: Contract manager Employer: RVO Health
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: ann Middle Name: _____ Last Name: viera
Address: 3542 SouthWood dr City: Knoxville State: TN Zip Code: 37920
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Judy Middle Name: _____ Last Name: Barnette
Address: 339 Greenwood Ave F-19 City: Knoxville State: TN Zip Code: 37920
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$2,125.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,125.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: George Middle Name: _____ Last Name: Brown

Address: 218 Echodale Lane City: Knoxville State: TN Zip Code: 37920

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$10.00

Business or Organization Name: _____ **OR**

First Name: Robert Middle Name: _____ Last Name: Carpenter

Address: Po box 191 City: Knoxville State: TN Zip Code: 37901

Occupation: Attorney Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Chyna Middle Name: _____ Last Name: Brackeen

Address: 702 Lake Forest Dr City: Knoxville State: TN Zip Code: 37920

Occupation: Concert Promoter Employer: Sofar Sounds

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Craig

Address: 2455 E. Magnolia Avenue City: Knoxville State: TN Zip Code: 37917

Occupation: Management Employer: NewStat PLLC

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$2,385.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,385.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Martin

Address: 6804 Sherwood Dr. City: Knoxville State: TN Zip Code: 37919

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Madeline Middle Name: _____ Last Name: Rogero

Address: 418 WOODLAWN PIKE City: Knoxville State: TN Zip Code: 37920

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Holden

Address: 1548 Autumn Path Lane City: Knoxville State: TN Zip Code: 37918

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Murphy

Address: 4508 Murphy Rd City: Knoxville State: TN Zip Code: 37918

Occupation: Retired Employer: self

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$3,485.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,485.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Jessica Middle Name: _____ Last Name: Strutz
Address: 333 W. Depot Avenue Unit 312 City: Knoxville State: TN Zip Code: 37917
Occupation: Restaurateur Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Brandon Middle Name: _____ Last Name: Bruce
Address: 9532 Clingmans Dome Drive City: Knoxville State: TN Zip Code: 37922
Occupation: Entrepreneur Employer: Brandon Bruce
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Annette Middle Name: _____ Last Name: Strait
Address: 1045 Sunset Road City: Brentwood State: TN Zip Code: 37027
Occupation: Accountant Employer: HCA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Kelly Middle Name: _____ Last Name: Johnson
Address: 1736 Waldens creek Road City: Sevierville State: TN Zip Code: 37862
Occupation: President Employer: Smokey Mountain Food Services
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$4,385.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,385.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Grier Middle Name: _____ Last Name: Novinger

Address: 931 Highland Point Drive City: Knoxville State: TN Zip Code: 37919

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/2/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Debbie Middle Name: _____ Last Name: Helsley

Address: 210 Ailsie Dr. City: Knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/3/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Judson Middle Name: _____ Last Name: Laughter

Address: 1983 Maplewood Dr City: Knoxville State: TN Zip Code: 37920

Occupation: Professor Employer: UTK

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/3/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Sanjay Middle Name: _____ Last Name: Gandhi

Address: 2980 Greenwich Rd City: Winston Salem State: NC Zip Code: 27104

Occupation: Physician Employer: Veteran's Administration

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 12/5/2024 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$5,185.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,185.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Lela Middle Name: _____ Last Name: Young
Address: 401 Kendall Rd City: Knoxville State: TN Zip Code: 37919
Occupation: Lawyer Employer: University of Tennessee
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 12/5/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Karen Middle Name: _____ Last Name: Wells
Address: 929 Keowee Ave City: Knoxville State: TN Zip Code: 37919
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/5/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Jim Middle Name: _____ Last Name: Sessions
Address: 3117 Foster Lane City: Knoxville State: TN Zip Code: 37920
Occupation: Not employed Employer: Not employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/6/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Matthew Middle Name: _____ Last Name: Kellogg
Address: 6110 Burnett Creek Road City: Knoxville State: TN Zip Code: 37920
Occupation: Director Employer: AMBC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/11/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$5,685.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,685.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: William Middle Name: _____ Last Name: Adams

Address: 3347 Whisperwood Circle City: Kingsport State: TN Zip Code: 37660

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 12/14/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Janice Middle Name: _____ Last Name: Tocher

Address: 326 Taylor Road City: Knoxville State: TN Zip Code: 37920

Occupation: Owner Employer: Averra Media

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 12/16/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: james Middle Name: _____ Last Name: higdon

Address: po box 5372 City: maryville State: TN Zip Code: 37802

Occupation: consultant Employer: L'Espace Inc

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 12/16/2024 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Shane Middle Name: _____ Last Name: Jackson

Address: 2233 Delta Way City: Knoxville State: TN Zip Code: 37919

Occupation: Banker Employer: Pinnalce

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 12/17/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$6,360.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,360.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Deborah Middle Name: _____ Last Name: Welsh
Address: 5337 Hickory Hollow Road City: Knoxville State: TN Zip Code: 37919
Occupation: Professor Employer: Univ of Tennessee
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/18/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Rebecca Middle Name: _____ Last Name: Napier-Brown
Address: 804 Oliver Rd City: Knoxville State: TN Zip Code: 37920
Occupation: Instructor Employer: PSCC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 12/18/2024 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Tony Middle Name: _____ Last Name: Murchison
Address: 2416 Sherrod Rd. City: Knoxville State: TN Zip Code: 37920
Occupation: Higher Ed admin Employer: University of Tennessee
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/19/2024 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Jered Middle Name: _____ Last Name: Sprecher
Address: 147 Druid Dr City: Knoxville State: TN Zip Code: 37920
Occupation: Professor/Artist Employer: University of Tennessee
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 12/19/2024 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$6,710.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,710.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Amy Middle Name: _____ Last Name: Midis
Address: 5015 West Summit Circlr City: Knoxville State: TN Zip Code: 37919
Occupation: Analyst Employer: Covenant Heath
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 12/20/2024 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: rachel Middle Name: _____ Last Name: craig
Address: 2222 Island Home Boulevard City: Knoxville State: TN Zip Code: 37920
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 12/22/2024 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: Michael Middle Name: _____ Last Name: P Fuller
Address: 312 Chamberlain Blvd City: Knoxville State: TN Zip Code: 37920
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 12/22/2024 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Marriah Middle Name: _____ Last Name: Mabe
Address: 1910 Dixie St APT 103 City: Knoxville State: TN Zip Code: 37920
Occupation: Social worker Employer: Covenant health
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 12/28/2024 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$7,860.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,860.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Jim Middle Name: _____ Last Name: Sessions
Address: 3117 Foster Lane City: Knoxville State: TN Zip Code: 37920
Occupation: Not employed Employer: Not employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/2/2025 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Leanne Middle Name: _____ Last Name: Kersey
Address: 2334 Peachtree Street City: Knoxville State: TN Zip Code: 37920
Occupation: ER Doc Employer: Retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 1/2/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Jack Middle Name: _____ Last Name: Allen
Address: 100 Market Street 404 City: Chattanooga State: TN Zip Code: 37402
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 1/2/2025 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Ross Middle Name: _____ Last Name: Young
Address: 750 Cheowa Cir City: Knoxville State: TN Zip Code: 37919
Occupation: CIO Employer: Travis Meats Inc.
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$20.00 Date of Contribution: 1/2/2025 Aggregate This Election: \$ \$20.00

Total Contributions: \$ \$8,105.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,105.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Ringer

Address: 315 Kingston Ct City: Knoxville State: TN Zip Code: 37919

Occupation: Musician Employer: Knoxville Symphony

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/2/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: tommy Middle Name: _____ Last Name: smith

Address: 2240 Hillsboro Heights City: Knoxville State: TN Zip Code: 37920

Occupation: marketing Employer: bforeai

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 1/3/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Jeannette Middle Name: _____ Last Name: Bouchard

Address: 2128 Island Home Blvd City: Knoxville State: TN Zip Code: 37920

Occupation: Manager Employer: ORAU

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/4/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Harriett Middle Name: _____ Last Name: Field

Address: 2121 Island Home Blvd City: Knoxville State: TN Zip Code: 37920

Occupation: Artist Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/4/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$8,655.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,655.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Patience Middle Name: _____ Last Name: Melnik

Address: 1420 Fremont Pl City: Knoxville State: TN Zip Code: 37917

Occupation: Grant Professional Employer: Self

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/5/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Bush

Address: 206 Chamberlain Blvd City: Knoxville State: TN Zip Code: 37920

Occupation: Engineer Employer: OTS Energy LLC

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/5/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Alicia Middle Name: _____ Last Name: Basler

Address: 2017 ponderosa Lane City: Maryville State: TN Zip Code: 37803

Occupation: Real estate Employer: Basler Properties

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 1/6/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Lisa Middle Name: _____ Last Name: Horn

Address: 2000 Watson Place City: Knoxville State: TN Zip Code: 37920

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/6/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$9,205.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,205.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Susie and Charlie Middle Name: _____ Last Name: Smith

Address: 445 W Blount Ave Apt 103 City: Knoxville State: TN Zip Code: 37920

Occupation: Not Employed Employer: Not Employed

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/6/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Douglas Middle Name: _____ Last Name: Bengston

Address: 4100 Westmount Dr City: Greensboro State: NC Zip Code: 27410

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$1.000.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$1.000.00

Business or Organization Name: _____ **OR**

First Name: Jon Middle Name: _____ Last Name: Brock

Address: 7412 Bellingham Dr City: Knoxville State: TN Zip Code: 37919

Occupation: Realtor Employer: Realty Executives Associates

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Paul Middle Name: _____ Last Name: Smith

Address: 2201 Spence Place City: Knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: Retired

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$10,905.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$10,905.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: norman Middle Name: _____ Last Name: millar
Address: 640 Gulfwood Road City: Knoxville State: TN Zip Code: 37923
Occupation: Not Employed Employer: Not Employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Steven Middle Name: _____ Last Name: Friedlander
Address: 8207 Gallaher Station Drive City: Knoxville State: TN Zip Code: 37919
Occupation: Editor Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Lisa Middle Name: _____ Last Name: Smith
Address: 4340 Michael's Ranch Way City: Knoxville State: TN Zip Code: 37918
Occupation: Self employed Employer: Big Fatty's
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 1/7/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Patrick Middle Name: _____ Last Name: Hunt
Address: 603 Kenesaw Avenue City: Knoxville State: TN Zip Code: 37919
Occupation: Executive Employer: Smartria
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 1/8/2025 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$11,555.00
(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$11,555.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jim Middle Name: _____ Last Name: Holleman

Address: 3202 Orlando St City: Knoxville State: TN Zip Code: 37917

Occupation: Principal Employer: Avison Young

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 1/15/2025 Aggregate This Election: \$ \$200.00

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: \$ _____

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: \$ \$11,755.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
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: Adrienne Middle Name: _____ Last Name: Webster

Address: 1528 Highland Ave City: Knoxville State: TN Zip Code: 37916

Occupation: Accountant Employer: Self

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

In-Kind Contribution Value: \$ \$250.00 In-Kind Contribution Date: 1/15/2025 Aggregate This Election: \$ \$250.00

Description of In-Kind Contribution: Accounting

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: \$ \$250.00

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
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: SquareSpace.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 Clarkson St. City: New York State: NY Zip Code: 10014
Purpose of Expenditure: Website Subscription
Amount of Expenditure: \$ \$241.22 Date of Expenditure: \$ 11/29/2024

Business or Organization Name: SquareSpace.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 Clarkson St. City: New York State: NY Zip Code: 10014
Purpose of Expenditure: Email Campaign Subscription
Amount of Expenditure: \$ \$401.17 Date of Expenditure: \$ 11/29/2024

Business or Organization Name: SquareSpace.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 8 Clarkson St. City: New York State: NY Zip Code: 10014
Purpose of Expenditure: Domain
Amount of Expenditure: \$ \$14.00 Date of Expenditure: \$ 12/3/2024

Business or Organization Name: NameBadge.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 12240 SW 53rd St. #511 City: Cooper City State: FL Zip Code: 33330
Purpose of Expenditure: name tags
Amount of Expenditure: \$ \$39.58 Date of Expenditure: \$ 12/3/2024

Business or Organization Name: DeluxeCheck.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 801 S Marquette Ave. City: Minneapolis State: MN Zip Code: 55402
Purpose of Expenditure: checks
Amount of Expenditure: \$ \$28.50 Date of Expenditure: \$ 12/3/2024

Total Expenditures: \$ \$724.47

(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: Karyn Adams
2. Reporting Period: Start Date: 11/13/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$724.47

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: Jack Middle Name: _____ Last Name: Vaughn
Address: 429 Hiawassee Ave City: Knoxville State: TN Zip Code: 37917
Purpose of Expenditure: campaign management
Amount of Expenditure: \$ \$2,250.00 Date of Expenditure: \$ 12/15/2024

Business or Organization Name: ActBlue.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 366 Summer St. City: Somerville State: MA Zip Code: 21440
Purpose of Expenditure: merchant fees
Amount of Expenditure: \$ \$75.92 Date of Expenditure: \$ 12/28/2024

Business or Organization Name: Stripe.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 354 Oyster Point Blvd City: South San Fransiscc State: CA Zip Code: 94080
Purpose of Expenditure: merchant fees
Amount of Expenditure: \$ \$119.83 Date of Expenditure: \$ 12/28/2024

Business or Organization Name: ActBlue.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 366 Summer St. City: Somerville State: MA Zip Code: 21440
Purpose of Expenditure: merchant fees
Amount of Expenditure: \$ \$31.43 Date of Expenditure: \$ 1/8/2025

Business or Organization Name: Stripe.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 354 Oyster Point Blvd City: South San Fransiscc State: CA Zip Code: 94080
Purpose of Expenditure: merchant fees
Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 1/8/2025

Total Expenditures: \$ \$3,251.65

(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.)