CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 7/7/2026 2.a. Candidate or Committee Name: SARAH LAPOSKY

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026

4. Campaign Address: 1007 Baxter Street

City: Johnson City State: TN Zip Code: 37601 Phone: 4233294357

5. Candidate Home Address: 1007 Baxter Street

City: Johnson City State: TN Zip Code: 37601 Phone: 4233294357

Candidate Email Address: s.laposky9@gmail.com

6. Office Sought: (include district number, if applicable) County Commissioner

7. Name of Political Treasurer (may be candidate): Sarah Laposky

Political Treasurer Email Address: s.laposky9@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: 4/26/2026 End Date: 6/30/2026

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
		4B2C-4DCE-9D54-1197 07/07/26 - 2:50 PM	
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $160.19
b.	Total Receipts This Period	$ $670.00
c.	Total Disbursements This Period	$ $292.54
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $537.65
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: SARAH LAPOSKY

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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) ..... $ $670.00

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.) ..... $ $670.00

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $292.54
(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.)..... $ $292.54

17. In-Kind Contributions:

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

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

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

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: SARAH LAPOSKY

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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: Susan Middle Name: _____ Last Name: Taulbee

Address: 780 Camino Lakes Circle City: Boca Raton State: FL Zip Code: 33486

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: 5/19/2026 Aggregate This Election: $ $200.00

Business or Organization Name: _____ **OR**

First Name: Ashley Middle Name: _____ Last Name: Cavendar

Address: 216 Spring St City: Jonesborough State: TN Zip Code: 37659

Occupation: Director Employer: ARCD

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

Amount of Contribution: $ $50.00 Date of Contribution: 5/21/2026 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Samantha Middle Name: _____ Last Name: Fawbush

Address: 1112 Portola Meadows Rd, Apt 20 City: Livermore State: CA Zip Code: 94551

Occupation: Marketing Employer: Golden 1 Credit Union

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

Amount of Contribution: $ $100.00 Date of Contribution: 5/21/2026 Aggregate This Election: $ $100.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Laposky

Address: 306 Oak Grove Avenue City: Greeneville State: TN Zip Code: 37745

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: 5/24/2026 Aggregate This Election: $ $100.00

Total Contributions: $ $450.00

(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: SARAH LAPOSKY

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $450.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Amber Middle Name: _____ Last Name: Athon

Address: 201 E. Holston Avenue City: Johnson City State: TN Zip Code: 37601

Occupation: Engineer Employer: Ascend

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

Amount of Contribution: $ $100.00 Date of Contribution: 6/5/2026 Aggregate This Election: $ $100.00

Business or Organization Name: Washington County Democratic Party **OR**

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

Address: PO Box 1731 City: Johnson City State: TN Zip Code: 37605

Occupation: Organization Employer: Not employed

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

Amount of Contribution: $ $120.00 Date of Contribution: 6/18/2026 Aggregate This Election: $ $120.00

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: $ $670.00

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: SARAH LAPOSKY

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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: Campaign Verify **OR**

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

Address: 1215 31st Street NW PO Box 355 City: Washington State: DC Zip Code: 20007

Purpose of Expenditure: Scale to Win Verification

Amount of Expenditure: $ $95.00 Date of Expenditure: $ 6/2/2026

Business or Organization Name: Tennessee Democratic Party **OR**

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

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

Purpose of Expenditure: Donation

Amount of Expenditure: $ $100.00 Date of Expenditure: $ 6/8/2026

Business or Organization Name: Copies Plus **OR**

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

Address: 805 Sunset Dr #1 City: Johnson City State: TN Zip Code: 37604

Purpose of Expenditure: quarter sheets

Amount of Expenditure: $ $85.24 Date of Expenditure: $ 6/8/2026

Business or Organization Name: ActBlue **OR**

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

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

Purpose of Expenditure: Fees for donations - unable to add this aywhere else

Amount of Expenditure: $ $12.30 Date of Expenditure: $ 6/30/2026

Business or Organization Name: _____ **OR**

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

Address: _____ City: _____ State: ____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: $ _____ Date of Expenditure: $ _____

Total Expenditures: $ $292.54

(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.)