



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/3/2025 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: 4/1/2025 End Date: 6/30/2025
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

6F46-4949-8F0A-EDAF
07/03/25 - 1:29 PM

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- | | |
|---|-----------------------|
| a. Balance On Hand Last Report | \$ <u>\$8,125.87</u> |
| b. Total Receipts This Period | \$ <u>\$15,750.00</u> |
| c. Total Disbursements This Period | \$ <u>\$8,365.14</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$15,510.73</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: 4/1/2025 End Date: 6/30/2025

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) \$ \$15,750.00
- 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.) \$ \$15,750.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$8,365.14
(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.)..... \$ \$8,365.14

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$1,024.00
- c. Total In-Kind Contributions Received This Period \$ \$1,024.00

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: 4/1/2025 End Date: 6/30/2025
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: Vote Matthew Debardeleben **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1418 Cornelia St City: Knoxville State: TN Zip Code: 37917
Occupation: Real Estate Broker Employer: Avison Young
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Renick Middle Name: _____ Last Name: Adams
Address: 501 Lake Wood Drive City: Gadsen State: AL Zip Code: 35901
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/11/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Cash Middle Name: _____ Last Name: Cash
Address: NA City: Knoxville State: TN Zip Code: 37920
Occupation: NA Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$25.00 Date of Contribution: 4/11/2025 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Phillip Middle Name: _____ Last Name: Lawson
Address: 755 Kenesaw Ave City: Knoxville State: TN Zip Code: 37919
Occupation: Chairman Employer: LHP Capital LLC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$3,800.00 Date of Contribution: 4/11/2025 Aggregate This Election: \$ \$3,800.00

Total Contributions: \$ \$4,025.00
(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,025.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Lynette Middle Name: _____ Last Name: Purdue

Address: 2304 West Blount Ave. 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: 4/14/2025 Aggregate This Election: \$ \$700.00

Business or Organization Name: _____ **OR**

First Name: Benjamin Middle Name: _____ Last Name: Mullins

Address: 10721 Wood Oak Court City: Knoxville State: TN Zip Code: 37922

Occupation: Attorney Employer: Frantz McConnell & Seymour LLP

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 4/14/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Jack Middle Name: _____ Last Name: Vaughan

Address: 429 Hiwassee 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: \$ \$100.00 Date of Contribution: 4/17/2025 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Smith

Address: 1940 Lyons Bend Road City: Knoxville State: TN Zip Code: 37919

Occupation: Teacher Employer: Natures way Montessori school

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/18/2025 Aggregate This Election: \$ \$300.00

Total Contributions: \$ \$4,325.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,325.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Bergmeier

Address: 244 DRUID DR City: Knoxville State: TN Zip Code: 37920

Occupation: Executive Director Employer: Bijou Theatre

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 4/24/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Lauren Middle Name: _____ Last Name: Stone

Address: 705 Valley Dale Rd City: Knoxville State: TN Zip Code: 37923

Occupation: Optometrist Employer: Campbell Cunningham Taylor and Haun

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 4/27/2025 Aggregate This Election: \$ \$50.00

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: \$ \$25.00 Date of Contribution: 5/5/2025 Aggregate This Election: \$ \$153.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Butler

Address: 3516 Raines Lane Southwest 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: 5/5/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$4,460.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,460.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Nadim Middle Name: _____ Last Name: Jubran

Address: 121 E. Jackson Ave. City: Knoxville State: TN Zip Code: 37915

Occupation: CEO Employer: PIER Group

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/7/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: virginia Middle Name: _____ Last Name: couch

Address: 109 Driftwood Court City: Lenoir City State: TN Zip Code: 37772

Occupation: lawyer Employer: the trust company of tennessee

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/7/2025 Aggregate This Election: \$ \$100.00

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: 5/7/2025 Aggregate This Election: \$ \$253.00

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: \$ \$250.00 Date of Contribution: 5/7/2025 Aggregate This Election: \$ \$350.00

Total Contributions: \$ \$5,160.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,160.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Frank Middle Name: _____ Last Name: Ramey
Address: 5405 Newberry rd City: Knoxville State: TN Zip Code: 37921
Occupation: Business Professional Employer: RBMHC Holdings LLC
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 5/7/2025 Aggregate This Election: \$ \$100.00

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: \$ \$50.00 Date of Contribution: 5/7/2025 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**
First Name: William Middle Name: _____ Last Name: Hahnemann
Address: 2110 Spence 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: \$ \$500.00 Date of Contribution: 5/10/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: Kurt Middle Name: _____ Last Name: Zinser
Address: 2118 Fisher Pl City: Knoxville State: TN Zip Code: 37920
Occupation: Freelance graphic designer Employer: Self employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 5/10/2025 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$5,860.00
(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,860.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Sarah Middle Name: _____ Last Name: Keith

Address: 7231 Olive Branch Ln City: Knoxville State: TN Zip Code: 37931

Occupation: Lawyer Employer: Law Office of Sarah W. Keith

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/10/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Lynette Middle Name: _____ Last Name: Purdue

Address: 2304 West Blount Ave. 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: 5/14/2025 Aggregate This Election: \$ \$700.00

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Smith

Address: 1940 Lyons Bend Road City: Knoxville State: TN Zip Code: 37919

Occupation: Teacher Employer: Natures way Montessori school

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/18/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Alan Middle Name: _____ Last Name: Cheatham

Address: 445 W Blount Ave 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: 5/18/2025 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$6,110.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$6,110.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Conner Middle Name: _____ Last Name: Coffey

Address: 6807 Sherwood City: Knoxville State: TN Zip Code: 37919

Occupation: Consultant Employer: Self employed

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 5/20/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Stephen Middle Name: _____ Last Name: Bales

Address: 1801 Kemper Lane City: knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: NA

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/20/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: duncan

Address: 1009 kensington circle 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: \$ \$50.00 Date of Contribution: 5/20/2025 Aggregate This Election: \$ \$110.00

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: 5/20/2025 Aggregate This Election: \$ \$750.00

Total Contributions: \$ \$7,010.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,010.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kent Middle Name: _____ Last Name: Minault

Address: 311 W. Glenwood Ave. City: Knoxville State: TN Zip Code: 37917

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: 5/20/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Sisse Middle Name: _____ Last Name: Parker

Address: 5612 Green Valley Drive City: Knoxville State: TN Zip Code: 37914

Occupation: Teacher Employer: Natures Way Montessori School

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

Amount of Contribution: \$ \$25.00 Date of Contribution: 5/20/2025 Aggregate This Election: \$ \$25.00

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: Retired Employer: Retired

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/20/2025 Aggregate This Election: \$ \$350.00

Business or Organization Name: _____ **OR**

First Name: David and Judy Middle Name: _____ Last Name: Lee

Address: 4519 Owana Dr City: Knoxville State: TN Zip Code: 37914

Occupation: not employed Employer: none

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 5/22/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$7,285.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,285.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Bergmeier

Address: 244 DRUID DR City: Knoxville State: TN Zip Code: 37920

Occupation: Executive Director Employer: Bijou Theatre

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 5/24/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: 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: \$ \$100.00 Date of Contribution: 5/26/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Cadotte

Address: 2548 Scottish Pike City: Knoxville State: TN Zip Code: 37920

Occupation: Engineer Employer: Shift Thermal

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/27/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Yvonne Middle Name: _____ Last Name: Reall

Address: 2317 Dillon Street City: Knoxville State: TN Zip Code: 37915

Occupation: Administrative Employer: UT Knoxville

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

Amount of Contribution: \$ \$20.00 Date of Contribution: 5/28/2025 Aggregate This Election: \$ \$20.00

Total Contributions: \$ \$7,465.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,465.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: William Middle Name: _____ Last Name: Skelton

Address: 4064 Kingston Park Drive City: Knoxville State: TN Zip Code: 37919

Occupation: Retired Employer: none

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/28/2025 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Catherine Middle Name: _____ Last Name: Henschen

Address: 2009 Lyons Ridge Rd 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: 5/28/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Stephen Middle Name: _____ Last Name: Copeland

Address: PO Box 20319 City: Knoxville State: TN Zip Code: 37940

Occupation: IT Employer: Celeris Networks

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 5/28/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Amy Middle Name: _____ Last Name: Neff

Address: 2003 Island Home 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: \$ \$50.00 Date of Contribution: 6/2/2025 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$7,715.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$7,715.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Simmons

Address: 2126 Fisher Place City: Knoxville State: TN Zip Code: 37920

Occupation: Commercial Real Estate Employer: Brian Simmons

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 6/3/2025 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

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

Address: NA City: Knoxville State: TN Zip Code: 37920

Occupation: NA Employer: NA

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

Amount of Contribution: \$ \$90.00 Date of Contribution: 6/3/2025 Aggregate This Election: \$ \$90.00

Business or Organization Name: _____ **OR**

First Name: Paulette Middle Name: _____ Last Name: Anderson

Address: 2026 Island Home City: knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: NA

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/3/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Glenda Middle Name: _____ Last Name: Ross

Address: 3036 Ginnbrooke 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: 6/9/2025 Aggregate This Election: \$ \$100.00

Total Contributions: \$ \$8,205.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$8,205.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Robert Middle Name: _____ Last Name: Young

Address: 2419 Park Oak Dr City: Los Angeles State: CA Zip Code: 90068

Occupation: Self Employed Employer: Self employed

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

Amount of Contribution: \$ \$3,900.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$3,900.00

Business or Organization Name: Tennessee Strategies LLC **OR**

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

Address: PO Box 23893 City: Knoxville State: TN Zip Code: 37933

Occupation: Tennessee Strategies LLC Employer: Tennessee Strategies LLC

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$300.00

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: NA

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$850.00

Business or Organization Name: _____ **OR**

First Name: Drew Middle Name: _____ Last Name: Mcelroy

Address: 4745 Calumet Dr City: Knoxville State: TN Zip Code: 37919

Occupation: Retired Employer: NA

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$200.00

Total Contributions: \$ \$12,855.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$12,855.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: William Middle Name: _____ Last Name: Owen
Address: 5233 Lance Dr City: Knoxville State: TN Zip Code: 37909
Occupation: Retired Employer: NA
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Christopher Middle Name: _____ Last Name: Foell
Address: 1437 Bexhill Dr 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: \$ \$25.00 Date of Contribution: 6/11/2025 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**
First Name: Lynette Middle Name: _____ Last Name: Purdue
Address: 2304 West Blount Ave. 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: 6/14/2025 Aggregate This Election: \$ \$700.00

Business or Organization Name: _____ **OR**
First Name: Elizabeth Middle Name: _____ Last Name: DeGeorge
Address: 116 Kingston St. City: Loudon State: TN Zip Code: 37774
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: 6/16/2025 Aggregate This Election: \$ \$75.00

Total Contributions: \$ \$13,055.00
(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$13,055.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Smith

Address: 1940 Lyons Bend Road City: Knoxville State: TN Zip Code: 37919

Occupation: Teacher Employer: Natures way Montessori school

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/18/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: Michaela Middle Name: _____ Last Name: Barnett

Address: 201 W Red Bud road City: Knoxville State: TN Zip Code: 37920

Occupation: Fellow Employer: AFPI

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

Amount of Contribution: \$ \$50.00 Date of Contribution: 6/21/2025 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Susan Middle Name: _____ Last Name: Orwick-Barnes

Address: 1312 Wenlock Road City: Knoxville State: TN Zip Code: 37922

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: 6/22/2025 Aggregate This Election: \$ \$25.00

Business or Organization Name: _____ **OR**

First Name: Courtney Middle Name: _____ Last Name: Bergmeier

Address: 244 DRUID DR City: Knoxville State: TN Zip Code: 37920

Occupation: Executive Director Employer: Bijou Theatre

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

Amount of Contribution: \$ \$10.00 Date of Contribution: 6/24/2025 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$13,190.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$13,190.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Mary Middle Name: _____ Last Name: Sullivan

Address: 1039 Scenic Dr City: Knoxville State: TN Zip Code: 37919

Occupation: Retired Employer: none

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 6/25/2025 Aggregate This Election: \$ \$1,900.00

Business or Organization Name: _____ **OR**

First Name: Jessica Middle Name: _____ Last Name: Rodocker

Address: 2140 Island Home Blvd. City: Knoxville State: TN Zip Code: 37920

Occupation: Real Estate Broker Employer: First Neighborhoods Realty

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

Amount of Contribution: \$ \$100.00 Date of Contribution: 6/26/2025 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: duncan

Address: 1009 kensington circle 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: \$ \$10.00 Date of Contribution: 6/27/2025 Aggregate This Election: \$ \$110.00

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: _____ Last Name: duncan

Address: 1009 kensington circle 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: \$ \$50.00 Date of Contribution: 6/27/2025 Aggregate This Election: \$ \$110.00

Total Contributions: \$ \$15,250.00

(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: 4/1/2025 End Date: 6/30/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$15,250.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Ogle Land General Partnership **OR**

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

Address: 1629 Parkway City: Sevierville State: TN Zip Code: 37862

Occupation: Ogle Land General Partnership Employer: Ogle Land General Partnership

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 6/30/2025 Aggregate This Election: \$ \$500.00

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: \$ \$15,750.00

(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: 4/1/2025 End Date: 6/30/2025
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: Stewart Middle Name: _____ Last Name: Smith

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

Occupation: Retired Employer: none

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

In-Kind Contribution Value: \$ \$82.00 In-Kind Contribution Date: 6/30/2025 Aggregate This Election: \$ \$82.00

Description of In-Kind Contribution: printed car decal

Business or Organization Name: _____ **OR**

First Name: Sara Middle Name: _____ Last Name: Baskin

Address: 4125 Woodlaws Pike Apt F22 City: Knoxville State: TN Zip Code: 37920

Occupation: Retired Employer: none

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

In-Kind Contribution Value: \$ \$392.00 In-Kind Contribution Date: 6/30/2025 Aggregate This Election: \$ \$517.00

Description of In-Kind Contribution: postcard stamps

Business or Organization Name: _____ **OR**

First Name: Adrienne Middle Name: _____ Last Name: Webster

Address: 4111 Martin Mill Pike City: Knoxville State: TN Zip Code: 37920

Occupation: Accountant Employer: Self

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

In-Kind Contribution Value: \$ \$550.00 In-Kind Contribution Date: 6/30/2025 Aggregate This Election: \$ \$1,350.00

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: _____

Total In-Kind Contributions: \$ \$1,024.00

(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: 4/1/2025 End Date: 6/30/2025
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: Morgan Street Strategies OR

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

Address: 429 Hiwassee Ave City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: campaign management

Amount of Expenditure: \$ \$2,250.00 Date of Expenditure: \$ 4/16/2025

Business or Organization Name: TN Democrats OR

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

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

Purpose of Expenditure: voter database

Amount of Expenditure: \$ \$120.99 Date of Expenditure: \$ 4/21/2025

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: \$ \$5.40 Date of Expenditure: \$ 4/30/2025

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: \$ \$9.30 Date of Expenditure: \$ 4/30/2025

Business or Organization Name: _____ OR

First Name: Jack Middle Name: _____ Last Name: Vaughn

Address: 429 Hiwassee Ave City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: printing/postage reimbursement

Amount of Expenditure: \$ \$99.19 Date of Expenditure: \$ 5/8/2025

Total Expenditures: \$ \$2,484.88

(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: Karyn Adams
2. Reporting Period: Start Date: 4/1/2025 End Date: 6/30/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,484.88

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: Office Depot **OR**

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

Address: 4212 N Broadway City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: office supplies

Amount of Expenditure: \$ \$62.60 Date of Expenditure: \$ 5/9/2025

Business or Organization Name: Morgan Street Strategies **OR**

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

Address: 429 Hiwassee Ave City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: campaign management

Amount of Expenditure: \$ \$2,250.00 Date of Expenditure: \$ 5/15/2025

Business or Organization Name: Campaign Verify **OR**

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

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

Purpose of Expenditure: Professional Fees

Amount of Expenditure: \$ \$95.00 Date of Expenditure: \$ 5/15/2025

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: \$ \$44.71 Date of Expenditure: \$ 5/31/2025

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: \$ \$69.10 Date of Expenditure: \$ 5/31/2025

Total Expenditures: \$ \$5,006.29

(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: Karyn Adams
2. Reporting Period: Start Date: 4/1/2025 End Date: 6/30/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,006.29

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: MakeStickers.com **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 18621 81st Ave City: Tinley Park State: IL Zip Code: 60487
Purpose of Expenditure: stickers
Amount of Expenditure: \$ \$154.62 Date of Expenditure: \$ 6/9/2025

Business or Organization Name: Borderland Tees **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 802 Sevier Ave City: Knoxville State: TN Zip Code: 37920
Purpose of Expenditure: shirts
Amount of Expenditure: \$ \$456.67 Date of Expenditure: \$ 6/16/2025

Business or Organization Name: Morgan Street Strategies **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 429 Hiwassee Ave City: Knoxville State: TN Zip Code: 37917
Purpose of Expenditure: campaign management
Amount of Expenditure: \$ \$2,250.00 Date of Expenditure: \$ 6/16/2025

Business or Organization Name: Parrot Printing **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2007 Riverside Dr City: Knoxville State: TN Zip Code: 37915
Purpose of Expenditure: Printing
Amount of Expenditure: \$ \$131.10 Date of Expenditure: \$ 6/17/2025

Business or Organization Name: _____ **OR**
First Name: Jack Middle Name: _____ Last Name: Vaughn
Address: 4212 N Broadway City: Knoxville State: TN Zip Code: 37917
Purpose of Expenditure: postage reimbursement
Amount of Expenditure: \$ \$291.20 Date of Expenditure: \$ 6/24/2025

Total Expenditures: \$ \$8,289.88

(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: Karyn Adams
2. Reporting Period: Start Date: 4/1/2025 End Date: 6/30/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$8,289.88

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: 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: \$ \$8.56 Date of Expenditure: \$ 6/30/2025

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: \$ \$16.70 Date of Expenditure: \$ 6/30/2025

Business or Organization Name: SDHS Booster Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2020 Tipton Station Rd City: Knoxville State: TN Zip Code: 37920
Purpose of Expenditure: Advertising
Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 4/1/2025

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: \$ \$8,365.14

(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.)