



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/9/2026 2.a. Candidate or Committee Name: Kimberly Frazier
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 11835 Couch Mill Road
City: Knoxville State: TN Zip Code: 37932 Phone: _____
5. Candidate Home Address: 11835 Couch Mill Rd
City: Knoxville State: TN Zip Code: 37932 Phone: 8658051005
Candidate Email Address: HVPA2018@GMAIL.COM
6. Office Sought: (include district number, if applicable) County Mayor
7. Name of Political Treasurer (may be candidate): Patrick Sanford
Political Treasurer Email Address: patrick.c.sanford@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 _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$26,609.47</u>
b. Total Receipts This Period	\$ <u>\$1,950.33</u>
c. Total Disbursements This Period	\$ <u>\$28,559.80</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$0.00</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: Kimberly Frazier

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) \$ \$50.00
(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) \$ \$1,900.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ \$0.33
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$1,950.33

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$16,705.20
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ \$11,854.60
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$28,559.80

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: Kimberly Frazier
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: CARSON Middle Name: _____ Last Name: KIRBY
Address: 4508 Murphy Rd City: KNOXVILLE State: TN Zip Code: 37918
Occupation: BUSINESS ANALYST Employer: TVA
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 4/27/2026 Aggregate This Election: \$ \$1,900.00

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: \$ \$1,900.00

(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: Kimberly Frazier
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: FARRAGUT PRESS **OR**

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

Address: 11863 KINGSTON PIKE City: KNOXVILLE State: TN Zip Code: 37931

Purpose of Expenditure: AD

Amount of Expenditure: \$ \$70.62 Date of Expenditure: \$ 6/29/2026

Business or Organization Name: LAMAR **OR**

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

Address: PO BOX 746966 City: ATLANTA State: GA Zip Code: 30374

Purpose of Expenditure: BILLBOARDS

Amount of Expenditure: \$ \$165.00 Date of Expenditure: \$ 6/22/2026

Business or Organization Name: SYNERTUDE **OR**

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

Address: 11433 COUCH MILL RD City: KNOXVILLE State: TN Zip Code: 37931

Purpose of Expenditure: EMAIL MARKETING

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 5/19/2026

Business or Organization Name: FACEBOOK **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 11111

Purpose of Expenditure: SOCIAL MEDIA ADS

Amount of Expenditure: \$ \$12,863.32 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: WALMART **OR**

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

Address: 10900 PARKSIDE DR City: KNOXVILLE State: TN Zip Code: 37934

Purpose of Expenditure: EVENT SUPPLIES

Amount of Expenditure: \$ \$140.22 Date of Expenditure: \$ 5/4/2026

Total Expenditures: \$ \$14,239.16

(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: Kimberly Frazier
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) \$ \$14,239.16

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: SPACES IN THE CITY **OR**

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

Address: 922 CENTRAL STREET City: KNOXVILLE State: TN Zip Code: 37917

Purpose of Expenditure: ELECTION NIGHT EVENT

Amount of Expenditure: \$ \$411.01 Date of Expenditure: \$ 4/28/2026

Business or Organization Name: SPACES IN THE CITY **OR**

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

Address: 922 CENTRAL STREET City: KNOXVILLE State: TN Zip Code: 37917

Purpose of Expenditure: ELECTION NIGHT EVENT

Amount of Expenditure: \$ \$757.31 Date of Expenditure: \$ 5/13/2026

Business or Organization Name: GOOGLE WORKSPACE **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 11111

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: \$ \$36.72 Date of Expenditure: \$ 6/2/2026

Business or Organization Name: USPS **OR**

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

Address: 9039 CROSSPARK DR City: KNOXVILLE State: TN Zip Code: 37923

Purpose of Expenditure: POSTAGE

Amount of Expenditure: \$ \$61.00 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: _____ **OR**

First Name: WILLIAM Middle Name: _____ Last Name: ARROWOOD

Address: 795 MAIN STREET W STE 200 City: OAK RIDGE State: TN Zip Code: 37830

Purpose of Expenditure: REFUND OF CAMPAIGN DONATION

Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 5/26/2026

Total Expenditures: \$ \$16,105.20

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Kimberly Frazier
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) \$ \$16,105.20

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: _____ **OR**
First Name: NADINE Middle Name: _____ Last Name: PORTER
Address: 7406 Battle Creek Ln City: CORRYTON State: TN Zip Code: 37721
Purpose of Expenditure: CAMPAIGN HELP
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: _____ **OR**
First Name: PHIL Middle Name: _____ Last Name: DALTON
Address: 1659 WAYSIDE RD City: KNOXVILLE State: TN Zip Code: 37931
Purpose of Expenditure: CAMPAIGN HELP
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: _____ **OR**
First Name: BRYAN Middle Name: _____ Last Name: SPEARS
Address: 8809 Cove Point Ln City: KNOXVILLE State: TN Zip Code: 37922
Purpose of Expenditure: CAMPAIGN HELP
Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 5/26/2026

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$16,705.20

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Kimberly Frazier
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: KIMBERLY Middle Name: _____ Last Name: FRAZIER

Address: 11835 Couch Mill Road City: KNOXVILLE State: TN Zip Code: 37923

Outstanding Loan Balance (Beginning) \$ \$88,717.07

Loans Received \$ \$0.00

Loan Payments \$ \$11,854.60

Outstanding Loan (End) \$ \$0.00

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

Date of Loan: 9/29/2025

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

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

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

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans.)

Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ \$88,717.07

Loans Received \$ \$0.00

Loan Payments \$ \$11,854.60

Outstanding Loan (End) \$ \$0.00