



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/28/2026 2.a. Candidate or Committee Name: Kimberly Calcote
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/6/2026
4. Campaign Address: 419 Childe Harolds Ln
City: Brentwood State: TN Zip Code: 37027 Phone: _____
5. Candidate Home Address: 419 Childe Harolds Lane
City: Brentwood State: TN Zip Code: 37027 Phone: 6155616079
Candidate Email Address: kimberlycalcote@gmail.com
6. Office Sought: (include district number, if applicable) Wmson Cty School Board-Dist 06
7. Name of Political Treasurer (may be candidate): James Calcote
Political Treasurer Email Address: brian.calcote@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: 7/1/2026 End Date: 7/27/2026
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

6C17-498A-8896-1783

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$4,789.01</u> |
| b. Total Receipts This Period | \$ <u>\$3,750.00</u> |
| c. Total Disbursements This Period | \$ <u>\$4,402.21</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$4,136.80</u> |
| e. Total Loans Outstanding | \$ <u>\$1,000.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Kimberly Calcote

14. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026

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) \$ \$2,700.00
- c. Loans Received This Reporting Period..... \$ \$1,000.00
- 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.) \$ \$3,750.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$4,402.21
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$4,402.21

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 Calcote
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Shauna Middle Name: _____ Last Name: Graham

Address: 1108 Sneed Glen Dr. City: Franklin State: TN Zip Code: 37069

Occupation: Healthcare Executive Employer: HCA

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

Amount of Contribution: \$ \$150.00 Date of Contribution: 7/5/2026 Aggregate This Election: \$ \$150.00

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Clifford

Address: 2002 Cedarmon Dr City: Franklin State: TN Zip Code: 37067

Occupation: Deputy Commissioner Employer: State of Tennessee

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 7/10/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Williamson County Republican Party **OR**

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

Address: 130 Seaboard Ln, A9 City: Franklin State: TN Zip Code: 37067

Occupation: Republican Party Employer: Republican Party

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

Amount of Contribution: \$ \$2,300.00 Date of Contribution: 7/16/2026 Aggregate This Election: \$ \$2,300.00

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: \$ _____

Total Contributions: \$ \$2,700.00

(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 Calcote
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Battle Ground Strategies OR

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

Address: PO Box 680805 City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Campaign Manager

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 7/6/2026

Business or Organization Name: Allegra Graphics OR

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

Address: 7104 Crossroads Blvd Ste 121 City: Brentwood State: TN Zip Code: 37027

Purpose of Expenditure: Mailer

Amount of Expenditure: \$ \$1,214.68 Date of Expenditure: \$ 7/18/2026

Business or Organization Name: THM Consulting OR

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

Address: 23971 64th ave City: Mattawan State: MI Zip Code: 49071

Purpose of Expenditure: Texts

Amount of Expenditure: \$ \$150.66 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Battle Ground Strategies OR

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

Address: PO Box 680805 City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Mailer Design

Amount of Expenditure: \$ \$838.36 Date of Expenditure: \$ 7/27/2026

Business or Organization Name: Allegra Graphics OR

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

Address: 7104 Crossroads Blvd Ste 121 City: Brentwood State: TN Zip Code: 37027

Purpose of Expenditure: Mailer

Amount of Expenditure: \$ \$1,099.51 Date of Expenditure: \$ 7/27/2026

Total Expenditures: \$ \$4,303.21

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Kimberly Calcote
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,303.21

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

Business or Organization Name: Ecanvasser **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Brentwood State: TN Zip Code: 37027
Purpose of Expenditure: Walking App
Amount of Expenditure: \$ \$99.00 Date of Expenditure: \$ 7/27/2026

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

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

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

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: \$ \$4,402.21

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

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: Kimberly Calcote
2. Reporting Period: Start Date: 7/1/2026 End Date: 7/27/2026
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: Kimberly Last Name: Calcote

Address: 419 Childe Harolds Lane City: Brentwood State: TN Zip Code: 37027

Outstanding Loan Balance (Beginning) \$ \$1,000.00

Loans Received \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00

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

Date of Loan: 12/19/2025

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) \$ \$1,000.00

Loans Received \$ \$1,000.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$1,000.00