



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/8/2026 2.a. Candidate or Committee Name: Larsen Jay
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: P.O. Box 52331
City: Knoxville State: TN Zip Code: 37950 Phone: 8653842656
5. Candidate Home Address: 3908 Wilani Road
City: Knoxville State: TN Zip Code: 37919 Phone: 8653842656
Candidate Email Address: larsen@larsenjay.com
6. Office Sought: (include district number, if applicable) County Mayor
7. Name of Political Treasurer (may be candidate): Kirk Huddleston
Political Treasurer Email Address: KirkHudd@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>\$219,622.68</u>
b. Total Receipts This Period	\$ <u>\$4,350.00</u>
c. Total Disbursements This Period	\$ <u>\$223,972.68</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$0.00</u>
e. Total Loans Outstanding	\$ <u>\$13,216.87</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Larsen Jay

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) \$ \$4,350.00
- 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.) \$ \$4,350.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$87,189.05
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ \$136,783.63
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$223,972.68

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: Larsen Jay
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: Melissa Middle Name: _____ Last Name: White

Address: PO Box 30359 City: Knoxville State: TN Zip Code: 37930

Occupation: Owner Employer: Bridgewater

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

Amount of Contribution: \$ \$1,500.00 Date of Contribution: 4/17/2026 Aggregate This Election: \$ \$1,500.00

Business or Organization Name: _____ **OR**

First Name: Jim Middle Name: _____ Last Name: Atchley

Address: 1286 Kensington Drive City: Knoxville State: TN Zip Code: 37922

Occupation: Banker Employer: First Horizon

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 5/4/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: Duo-Fast **OR**

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

Address: 3906 Papermill Dr NW City: Knoxville State: TN Zip Code: 37909

Occupation: Duo-Fast Employer: Duo-Fast

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 4/5/2024 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: Christian Middle Name: _____ Last Name: Clevenger

Address: 12414 Union Rd. City: Knoxville State: TN Zip Code: 37934

Occupation: President Employer: Integrity Laboratories

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/15/2024 Aggregate This Election: \$ \$1,800.00

Total Contributions: \$ \$2,950.00

(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: Larsen Jay
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) \$ \$2,950.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Christian Middle Name: _____ Last Name: Clevenger

Address: 12414 Union Rd. City: Knoxville State: TN Zip Code: 37934

Occupation: President Employer: Integrity Laboratories

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/15/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Tracy Middle Name: _____ Last Name: Clevenger

Address: 12414 Union Rd. City: Knoxville State: TN Zip Code: 37934

Occupation: V.P. Employer: Integrity Laboratories

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/15/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Tracy Middle Name: _____ Last Name: Clevenger

Address: 12414 Union Rd. City: Knoxville State: TN Zip Code: 37934

Occupation: V.P. Employer: Integrity Laboratories

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 3/15/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Clayton

Address: 1630 Westland Lakes Way City: Knoxville State: TN Zip Code: 37922

Occupation: CEO Employer: Clayton Homes

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/19/2024 Aggregate This Election: \$ \$1,800.00

Total Contributions: \$ \$3,750.00

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Larsen Jay
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) \$ \$3,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Kevin Middle Name: _____ Last Name: Clayton

Address: 1630 Westland Lakes Way City: Knoxville State: TN Zip Code: 37922

Occupation: CEO Employer: Clayton Homes

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/19/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Chelly Middle Name: _____ Last Name: Clayton

Address: 1630 Westland Lakes Way City: Knoxville State: TN Zip Code: 37922

Occupation: Owner Employer: Salubrious Farms

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/22/2024 Aggregate This Election: \$ \$1,800.00

Business or Organization Name: _____ **OR**

First Name: Chelly Middle Name: _____ Last Name: Clayton

Address: 1630 Westland Lakes Way City: Knoxville State: TN Zip Code: 37922

Occupation: Owner Employer: Salubrious Farms

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

Amount of Contribution: \$ \$200.00 Date of Contribution: 5/22/2024 Aggregate This Election: \$ \$1,800.00

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: \$ \$4,350.00

(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: Larsen Jay
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: _____ **OR**
First Name: Olivia Middle Name: _____ Last Name: Graves
Address: 112 Yorkwood Lane City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Administrative Support
Amount of Expenditure: \$ \$575.00 Date of Expenditure: \$ 4/30/2026

Business or Organization Name: _____ **OR**
First Name: Emma Middle Name: _____ Last Name: Moutaw
Address: 312 Grandview Drive City: Maryville State: TN Zip Code: 37803
Purpose of Expenditure: Administrative Support
Amount of Expenditure: \$ \$3,192.00 Date of Expenditure: \$ 4/30/2026

Business or Organization Name: _____ **OR**
First Name: Emma Middle Name: _____ Last Name: Moutaw
Address: 312 Grandview Drive City: Maryville State: TN Zip Code: 37803
Purpose of Expenditure: Administrative Support
Amount of Expenditure: \$ \$513.00 Date of Expenditure: \$ 4/30/2026

Business or Organization Name: _____ **OR**
First Name: Olivia Middle Name: _____ Last Name: Graves
Address: 112 Yorkwood Lane City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Administrative Support
Amount of Expenditure: \$ \$1,725.00 Date of Expenditure: \$ 5/8/2026

Business or Organization Name: Red Oak Political Strategies LLC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5923 Kingston Pike City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Consulting
Amount of Expenditure: \$ \$2,000.00 Date of Expenditure: \$ 4/28/2026

Total Expenditures: \$ \$8,005.00

(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: Larsen Jay
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) \$ \$8,005.00

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: Targeted Strategy **OR**

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Consulting

Amount of Expenditure: \$ \$2,000.00 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Anedot **OR**

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

Address: Online City: Online State: Onli Zip Code: 37950

Purpose of Expenditure: Credit Card Fees

Amount of Expenditure: \$ \$10.30 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Bridgewater Place **OR**

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

Address: 205 Bridgewater Rd. City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Event

Amount of Expenditure: \$ \$7,935.76 Date of Expenditure: \$ 5/8/2026

Business or Organization Name: All Occassions Party Rentals **OR**

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

Address: 5825 Middlebrook Pike City: Knoxville State: TN Zip Code: 37921

Purpose of Expenditure: Event

Amount of Expenditure: \$ \$14,148.55 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Targeted Strategy **OR**

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$2,673.00 Date of Expenditure: \$ 4/27/2026

Total Expenditures: \$ \$34,772.61

(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: Larsen Jay
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) \$ \$34,772.61

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: Targeted Strategy OR

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$6,619.28 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Targeted Strategy OR

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$9,662.00 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Targeted Strategy OR

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$12,690.00 Date of Expenditure: \$ 4/27/2026

Business or Organization Name: Targeted Strategy OR

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$5,490.00 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: Targeted Strategy OR

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

Address: 1810 Water Mill Trail City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$12,996.00 Date of Expenditure: \$ 5/6/2026

Total Expenditures: \$ \$82,229.89

(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: Larsen Jay
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) \$ \$82,229.89

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: Temple Photography **OR**

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

Address: 2323 Winners Drive City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$700.00 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Name-Cheap **OR**

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

Address: Online City: Online State: Onli Zip Code: 37950

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$18.68 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: Paragon Printing **OR**

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

Address: 4701-C Wilson Road City: Chattanooga State: TN Zip Code: 37410

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$700.79 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Paragon Printing **OR**

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

Address: 4701-C Wilson Road City: Chattanooga State: TN Zip Code: 37410

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ \$557.45 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Office Depot **OR**

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

Address: 7111 KINGSTON PIKE City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Office Supplies

Amount of Expenditure: \$ \$14.62 Date of Expenditure: \$ 5/5/2026

Total Expenditures: \$ \$84,221.43

(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: Larsen Jay
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) \$ \$84,221.43

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: Zacarias Middle Name: _____ Last Name: Waggoner
Address: 528 Harless Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$144.00 Date of Expenditure: \$ 4/30/2026

Business or Organization Name: _____ **OR**
First Name: Kailei Middle Name: _____ Last Name: Beeler
Address: 180 Front Street City: Luttrell State: TN Zip Code: 37779
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$756.00 Date of Expenditure: \$ 5/2/2026

Business or Organization Name: _____ **OR**
First Name: Zagarias Middle Name: _____ Last Name: Waggoner
Address: 528 Harless Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$612.00 Date of Expenditure: \$ 5/2/2026

Business or Organization Name: _____ **OR**
First Name: Felicia Middle Name: _____ Last Name: Cooper
Address: 150 Hansard Road City: Maynardville State: TN Zip Code: 37807
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$612.00 Date of Expenditure: \$ 5/2/2026

Business or Organization Name: _____ **OR**
First Name: Charles Middle Name: Miguel Last Name: Waggoner
Address: 528 Harless Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$612.00 Date of Expenditure: \$ 5/2/2026

Total Expenditures: \$ \$86,957.43

(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: Larsen Jay
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) \$ \$86,957.43

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: Kadyn Middle Name: E. Last Name: Langan
Address: 12108 Leatherwood Ln City: Farragut State: TN Zip Code: 37934
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$180.00 Date of Expenditure: \$ 5/2/2026

Business or Organization Name: _____ **OR**
First Name: J. Middle Name: M. Last Name: Evans
Address: 1409 Bales Road City: Knoxville State: TN Zip Code: 37914
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: _____ **OR**
First Name: J. Middle Name: M. Last Name: Evans
Address: 1409 Bales Road City: Knoxville State: TN Zip Code: 37914
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 5/12/2026

Business or Organization Name: Chick-Fil-A **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7520 Kingston Pike City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ \$39.32 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: U.S. Postal Service **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1237 E. Weisgarber Road City: RM 9831 State: Kno Zip Code: 37950
Purpose of Expenditure: Postage
Amount of Expenditure: \$ \$78.00 Date of Expenditure: \$ 4/28/2026

Total Expenditures: \$ \$89,254.75

(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: Larsen Jay
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) \$ \$89,254.75

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: CSD of Knoxville **OR**

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

Address: 5200 Buckhead Trail City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Postage

Amount of Expenditure: \$ \$15.60 Date of Expenditure: \$ 5/11/2026

Business or Organization Name: I-360.com Arlington **OR**

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

Address: Online City: Online State: Onli Zip Code: 37950

Purpose of Expenditure: Data

Amount of Expenditure: \$ \$1,365.63 Date of Expenditure: \$ 5/4/2026

Business or Organization Name: CSD of Knoxville **OR**

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

Address: 5200 Buckhead Trail City: Knoxvllle State: TN Zip Code: 37919

Purpose of Expenditure: Adminstrative Support

Amount of Expenditure: \$ \$106.40 Date of Expenditure: \$ 6/11/2026

Business or Organization Name: CSD of Knoxville **OR**

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

Address: 5200 Buckhead Trail City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Accounting fees

Amount of Expenditure: \$ \$5,181.66 Date of Expenditure: \$ 5/31/2026

Business or Organization Name: Corley McFarland **OR**

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

Address: 1021 Waterford Place City: Kingston State: TN Zip Code: 37763

Purpose of Expenditure: Legal

Amount of Expenditure: \$ \$1,850.00 Date of Expenditure: \$ 11/25/2024

Total Expenditures: \$ \$97,774.04

(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: Larsen Jay
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) \$ \$97,774.04

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: New Frame Creative **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9237 Middlebrook Pike City: Knoxville State: TN Zip Code: 37931
Purpose of Expenditure: Marketing - Advertising
Amount of Expenditure: \$ \$125.00 Date of Expenditure: \$ 6/23/2026

Business or Organization Name: Gannett Tennessee **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 631340 City: Cincinnati State: OH Zip Code: 45263
Purpose of Expenditure: Marketing - Advertising
Amount of Expenditure: \$ (\$240.09) Date of Expenditure: \$ 6/24/2026

Business or Organization Name: The Knoxville Focus **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4109 Central Avenue City: Knoxville State: TN Zip Code: 37912
Purpose of Expenditure: Marketing - Advertising
Amount of Expenditure: \$ (\$150.00) Date of Expenditure: \$ 4/1/2026

Business or Organization Name: Horne Radio **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 517 Watt Rd City: Knoxville State: TN Zip Code: 37934
Purpose of Expenditure: Marketing - Advertising
Amount of Expenditure: \$ (\$500.00) Date of Expenditure: \$ 3/13/2026

Business or Organization Name: Weigel's **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6627 Kingston Pike City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Operations Support
Amount of Expenditure: \$ (\$135.00) Date of Expenditure: \$ 3/11/2026

Total Expenditures: \$ \$96,873.95

(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: Larsen Jay
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) \$ \$96,873.95

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: Costco **OR**

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

Address: 10745 Kingston Pike City: Knoxville State: TN Zip Code: 37934

Purpose of Expenditure: Operations Support

Amount of Expenditure: \$ (\$63.35) Date of Expenditure: \$ 3/2/2026

Business or Organization Name: Home Depot **OR**

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

Address: Knoxville City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Operations Support

Amount of Expenditure: \$ (\$272.31) Date of Expenditure: \$ 3/1/2026

Business or Organization Name: Lamar Advertising **OR**

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

Address: 10311 Deerborn Ln City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ (\$5,356.00) Date of Expenditure: \$ 2/1/2026

Business or Organization Name: Shell **OR**

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

Address: 4918 Kingston Pike City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Operations Support

Amount of Expenditure: \$ (\$73.50) Date of Expenditure: \$ 2/13/2026

Business or Organization Name: Lamar Advertising **OR**

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

Address: 10311 Deerborn Ln City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Marketing - Advertising

Amount of Expenditure: \$ (\$2,369.00) Date of Expenditure: \$ 2/25/2026

Total Expenditures: \$ \$88,739.79

(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: Larsen Jay
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) \$ \$88,739.79

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: Philips OR

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

Address: 2918 Tazewell Pike City: Knoxville State: TN Zip Code: 37918

Purpose of Expenditure: Operations Support

Amount of Expenditure: \$ (\$100.00) Date of Expenditure: \$ 2/28/2026

Business or Organization Name: L Jay OR

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

Address: 3908 Wilani City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Operations Support

Amount of Expenditure: \$ (\$337.21) Date of Expenditure: \$ 4/3/2025

Business or Organization Name: Knox County Republican Party OR

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

Address: 5731 Lyons View Pike City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Dues

Amount of Expenditure: \$ (\$1,750.00) Date of Expenditure: \$ 3/20/2026

Business or Organization Name: Correction OR

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

Address: Online City: Online State: Onli Zip Code: 37950

Purpose of Expenditure: correction

Amount of Expenditure: \$ \$636.47 Date of Expenditure: \$ 1/5/2026

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: \$ \$87,189.05

(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: Larsen Jay
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: Larsen Middle Name: _____ Last Name: Jay

Address: 3908 Wilani Road City: Knoxville State: TN Zip Code: 37919

Outstanding Loan Balance (Beginning) \$ \$150,000.00

Loans Received \$ \$0.00

Loan Payments \$ \$136,783.63

Outstanding Loan (End) \$ \$13,216.87

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

Date of Loan: 6/30/2026

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

Business or Organization Name: _____ **OR**

First Name: Larsen Middle Name: _____ Last Name: Jay

Address: 3908 Wilani Road City: Knoxville State: TN Zip Code: 37919

Amount Guaranteed Outstanding: \$ \$0.00

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) \$ \$150,000.00

Loans Received \$ \$0.00

Loan Payments \$ \$136,783.63

Outstanding Loan (End) \$ \$13,216.87