



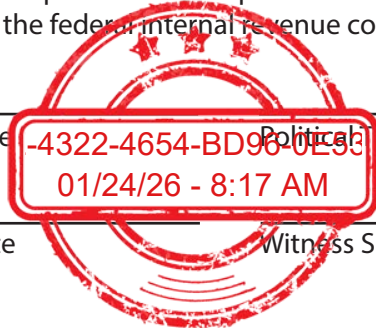
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/24/2026 2.a. Candidate or Committee Name: Kimberly Frazier
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: PMB 302 10629 HARDIN VALLEY RD
City: Knoxville State: TN Zip Code: 37932 Phone: _____
5. Candidate Home Address: 11835 Couch Mill Road
City: KNOXVILLE State: TN Zip Code: 37932 Phone: _____
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: 9/15/2025 End Date: 1/15/2026
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>\$0.00</u> |
| b. Total Receipts This Period | \$ <u>\$114,612.07</u> |
| c. Total Disbursements This Period | \$ <u>\$19,886.88</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$94,725.19</u> |
| e. Total Loans Outstanding | \$ <u>\$88,717.07</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: 9/15/2025 End Date: 1/15/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ \$2,345.00
(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) \$ \$23,550.00
- c. Loans Received This Reporting Period..... \$ \$88,717.07
- 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.) \$ \$114,612.07

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$19,886.88
(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.)..... \$ \$19,886.88

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: 9/15/2025 End Date: 1/15/2026
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: TERRY Middle Name: _____ Last Name: HILL

Address: 8609 Garrison Dr City: KNOXVILLE State: TN Zip Code: 37931

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1 000 0 Date of Contribution: 9/16/2025 Aggregate This Election: \$ \$1 000 0

Business or Organization Name: BARBER MCMURRAY ARCHITECTS **OR**

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

Address: 505 Market St ste 300 City: KNOXVILLE State: TN Zip Code: 37902

Occupation: ARCHITECTS Employer: BARBER MC MURRY

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

Amount of Contribution: \$ \$500 00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$500 00

Business or Organization Name: _____ **OR**

First Name: WAYNE Middle Name: _____ Last Name: RUSHING

Address: 401 Flamingo Dr City: DESTIN State: FL Zip Code: 32541

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1 800 0 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$1 800 0

Business or Organization Name: _____ **OR**

First Name: KEVIN Middle Name: _____ Last Name: MURPHY

Address: 4508 Murphy Rd City: KNOXVILLE State: TN Zip Code: 37918

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1 900 0 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$1 900 0

Total Contributions: \$ \$5,200.00

(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$5,200.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: KEVIN Middle Name: _____ Last Name: MURPHY

Address: 4508 Murphy Rd City: KNOXVILLE State: TN Zip Code: 37918

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$3,800.00

Business or Organization Name: _____ **OR**

First Name: LILLIAN Middle Name: _____ Last Name: WILLIAMS

Address: 1719 Greenwell Dr City: KNOXVILLE State: TN Zip Code: 37938

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1,000.00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**

First Name: JIMMIE Middle Name: _____ Last Name: GILES

Address: 401 Flamingo Dr City: DESTIN State: FL Zip Code: 32541

Occupation: UNKNOWN Employer: UNKNOWN

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

Amount of Contribution: \$ \$1,800.00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$1,800.00

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

Occupation: RETIRED Employer: RETIRED

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

Amount of Contribution: \$ \$1,900.00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$11,800.00

(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$11,800.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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
Occupation: RETIRED Employer: RETIRED
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$600.00 Date of Contribution: 10/16/2025 Aggregate This Election: \$ \$2,500.00

Business or Organization Name: _____ **OR**
First Name: BRUCE Middle Name: _____ Last Name: WILLIAMS
Address: 1719 Greenwell Drive City: KNOXVILLE State: TN Zip Code: 37938
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$500.00 Date of Contribution: 12/10/2025 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**
First Name: F Middle Name: TINDEL Last Name: CARL
Address: 7751 Norris Freeway City: KNOXVILLE State: TN Zip Code: 37938
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/12/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: TERESA Middle Name: _____ Last Name: WALLACE
Address: 1302 Four Mile Post Rd SE City: HUNTSVILLE State: AL Zip Code: 35802
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: Primary Election ☒ General Election ☐ Runoff (Local Elections Only) ☐
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/12/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$13,400.00
(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$13,400.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: DAVID Middle Name: _____ Last Name: HOBBS
Address: 11707 Couch Mill Rd City: KNOXVILLE State: TN Zip Code: 37932
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1 000 0 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$1 000 0

Business or Organization Name: _____ **OR**
First Name: TONYA Middle Name: _____ Last Name: HOBBS
Address: 11707 Couch Mill Rd City: KNOXVILLE State: TN Zip Code: 37932
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1 000 0 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$1 000 0

Business or Organization Name: _____ **OR**
First Name: MARTIN Middle Name: _____ Last Name: KUTTesch
Address: 78052 Rio Grande Dr City: POWELL State: TN Zip Code: 37849
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1 900 0 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$1 900 0

Business or Organization Name: _____ **OR**
First Name: JACQUELYN Middle Name: _____ Last Name: GOEBEL
Address: 11920 Couch Mill Rd City: KNOXVILLE State: TN Zip Code: 37932
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300.00 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$300 00

Total Contributions: \$ \$17,600.00
(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$17,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: CHRYSTY Middle Name: _____ Last Name: HUSTON
Address: 2336 Misty Mountain Circle City: KNOXVILLE State: TN Zip Code: 37932
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: WILLIAM Middle Name: _____ Last Name: ARMS
Address: PO Box 23893 City: KNOXVILLE State: TN Zip Code: 37933
Occupation: UNKNOWN Employer: UNKNOWN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/15/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**
First Name: JODI Middle Name: _____ Last Name: CLARKE
Address: 8656 Abraham Ln City: KNOXVILLE State: TN Zip Code: 37931
Occupation: SELF EMPLOYED Employer: GRACE COUNSELING
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 1/11/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: CHERYL Middle Name: _____ Last Name: WALKER
Address: 760 Sedgley Drive City: KNOXVILLE State: TN Zip Code: 37922
Occupation: RETIRED Employer: RETIRED
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$250.00 Date of Contribution: 1/11/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$19,300.00
(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$19,300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: WADE Middle Name: _____ Last Name: SEXTON

Address: 11821 Couch Mill Rd City: KNOXVILLE State: TN Zip Code: 37932

Occupation: KNOX HYDROVAC Employer: KNOX HYDRO VAC

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

Amount of Contribution: \$ \$250.00 Date of Contribution: 1/11/2026 Aggregate This Election: \$ \$250.00

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

Occupation: SELF Employer: SELF

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

Amount of Contribution: \$ \$300.00 Date of Contribution: 10/29/2025 Aggregate This Election: \$ \$300.00

Business or Organization Name: _____ **OR**

First Name: GARY Middle Name: _____ Last Name: HOEFLER

Address: 7217 Joyce Ln City: POWELL State: TN Zip Code: 37849

Occupation: MMC Employer: MMC

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

Amount of Contribution: \$ \$400.00 Date of Contribution: 12/27/2025 Aggregate This Election: \$ \$400.00

Business or Organization Name: _____ **OR**

First Name: NANCY Middle Name: _____ Last Name: MCBEE

Address: 9780 Washington Pike City: CORRYTON State: TN Zip Code: 37721

Occupation: TRANE Employer: TRANE

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

Amount of Contribution: \$ \$500.00 Date of Contribution: 11/19/2025 Aggregate This Election: \$ \$500.00

Total Contributions: \$ \$20,750.00

(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: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$20,750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: GREGORY Middle Name: _____ Last Name: DUNN
Address: 739 Valley Hill LN City: KNOXVILLE State: TN Zip Code: 37922
Occupation: CAG Employer: CAG
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 11/26/2025 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: BRAD Middle Name: _____ Last Name: SAGRAVES
Address: 11726 couch mill rd City: KNOXVILLE State: TN Zip Code: 37932
Occupation: TN TAX LAW Employer: TN TAX LAW
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,800.00 Date of Contribution: 10/19/2025 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: \$ _____

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: \$ \$23,550.00
(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: 9/15/2025 End Date: 1/15/2026
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: 360ONLINE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: ONLINE City: ONLINR State: TN Zip Code: 12345
Purpose of Expenditure: BUSINESS CARDS
Amount of Expenditure: \$ \$44.28 Date of Expenditure: \$ 10/8/2025

Business or Organization Name: _____ **OR**
First Name: KIMBERLY Middle Name: _____ Last Name: FRAZIER
Address: 11835 Couch Mill Road City: KNOXVILLE State: TN Zip Code: 37932
Purpose of Expenditure: AD IN PROGRAM BOOK
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 10/16/2025

Business or Organization Name: GOOGLE WORKSPACE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: ONLINE City: ONLINE State: TN Zip Code: 12345
Purpose of Expenditure: GOOGLE WORKSPACE
Amount of Expenditure: \$ \$18.36 Date of Expenditure: \$ 1/7/2026

Business or Organization Name: PRINT EDGE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9147 CROSS PARK City: KNOXVILLE State: TN Zip Code: 37923
Purpose of Expenditure: HOLIDAY MAILER
Amount of Expenditure: \$ \$1,040.75 Date of Expenditure: \$ 12/15/2025

Business or Organization Name: PRINT EDGE **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9147 CROSS PARK City: KNOXVILLE State: TN Zip Code: 37923
Purpose of Expenditure: SIGNS
Amount of Expenditure: \$ \$3,703.58 Date of Expenditure: \$ 11/12/2025

Total Expenditures: \$ \$5,056.97

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$5,056.97

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: ANY PROMO **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: SIGNS

Amount of Expenditure: \$ \$169.10 Date of Expenditure: \$ 11/17/2025

Business or Organization Name: UPRINTING **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: SIGNS

Amount of Expenditure: \$ \$171.15 Date of Expenditure: \$ 11/21/2025

Business or Organization Name: PARROTT PRINTING **OR**

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

Address: 2007 RIVERSIDE DRIVE City: KNOXVILLE State: TN Zip Code: 37915

Purpose of Expenditure: SIGNS

Amount of Expenditure: \$ \$7,254.20 Date of Expenditure: \$ 12/4/2025

Business or Organization Name: KNOXVILLE SCREEN PRINTING **OR**

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

Address: 1613 DEMPSEY RD City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: SIGNS

Amount of Expenditure: \$ \$480.00 Date of Expenditure: \$ 12/21/2025

Business or Organization Name: BRH LLC **OR**

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

Address: PO BOX 22743 City: KNOXVILLE State: TN Zip Code: 37933

Purpose of Expenditure: ADS

Amount of Expenditure: \$ \$400.00 Date of Expenditure: \$ 11/12/2025

Total Expenditures: \$ \$13,531.42

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$13,531.42

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: SOCIAL BEE **OR**

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

Address: 801 GARDEN STREET City: SANTA BARBARA State: CA Zip Code: 93101

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: \$ \$539.70 Date of Expenditure: \$ 1/4/2026

Business or Organization Name: PRINTS PPS **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: ADVERTISING

Amount of Expenditure: \$ \$342.43 Date of Expenditure: \$ 11/3/2025

Business or Organization Name: WALMART **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: ADVERTISING

Amount of Expenditure: \$ \$28.32 Date of Expenditure: \$ 11/12/2025

Business or Organization Name: SIGNS N SUCH **OR**

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

Address: 10932 Murdock Dr A104 City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: SHIRTS

Amount of Expenditure: \$ \$786.60 Date of Expenditure: \$ 11/14/2025

Business or Organization Name: EARLY & ASSOCIATES **OR**

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

Address: 908 HICKORY GROVE COURT City: KNOXVILLE State: TN Zip Code: 37922

Purpose of Expenditure: VIDEO

Amount of Expenditure: \$ \$1,700.00 Date of Expenditure: \$ 12/4/2025

Total Expenditures: \$ \$16,928.47

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$16,928.47

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: ANEDOT FEES **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: MERCHANT FEES

Amount of Expenditure: \$ \$272.00 Date of Expenditure: \$ 1/15/2026

Business or Organization Name: ROCKY HILL CHRISTMAS PARADE **OR**

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

Address: UNKNOWN City: KNOXVILLE State: TN Zip Code: 37931

Purpose of Expenditure: PARADE

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 10/30/2025

Business or Organization Name: AMAZON **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: PARADE SUPPLIES

Amount of Expenditure: \$ \$130.95 Date of Expenditure: \$ 11/12/2025

Business or Organization Name: AMAZON **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: PARADE SUPPLIES

Amount of Expenditure: \$ \$126.60 Date of Expenditure: \$ 11/14/2025

Business or Organization Name: RK SHOWS **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: REG FEE FOR TABLE

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 11/14/2025

Total Expenditures: \$ \$17,658.02

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$17,658.02

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: DOLLAR GENERAL OR

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

Address: 9224 MIDDLEBROOK PIKE City: KNOXVILLE State: TN Zip Code: 37931

Purpose of Expenditure: PARADE SUPPLIES

Amount of Expenditure: \$ \$76.20 Date of Expenditure: \$ 12/8/2025

Business or Organization Name: ASM GLOBAL OR

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: EVENT PARKING

Amount of Expenditure: \$ \$6.01 Date of Expenditure: \$ 12/15/2025

Business or Organization Name: PANERA BREAD OR

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

Address: UNKNOWN City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: MEETING

Amount of Expenditure: \$ \$13.98 Date of Expenditure: \$ 12/16/2025

Business or Organization Name: HARD KNOX PIZZA OR

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

Address: 10847 HARDIN VALLEY RD City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: MEETING

Amount of Expenditure: \$ \$45.24 Date of Expenditure: \$ 1/13/2026

Business or Organization Name: ZAPIER OR

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: \$ \$262.07 Date of Expenditure: \$ 11/5/2025

Total Expenditures: \$ \$18,061.52

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$18,061.52

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: SIGNUP GENIUS OR

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: \$ \$107.89 Date of Expenditure: \$ 11/20/2025

Business or Organization Name: HARLAND CLARKE OR

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: CHECKS

Amount of Expenditure: \$ \$30.92 Date of Expenditure: \$ 11/21/2025

Business or Organization Name: GOOGLE WORKSPACE OR

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: SOFTWARE

Amount of Expenditure: \$ \$40.40 Date of Expenditure: \$ 1/4/2026

Business or Organization Name: UPS STORE OR

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

Address: 10629 HARDIN VALLEY RD City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: PO BOX

Amount of Expenditure: \$ \$207.96 Date of Expenditure: \$ 9/30/2025

Business or Organization Name: UPS STORE OR

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

Address: 10629 HARDIN VALLEY RD City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: POSTAGE

Amount of Expenditure: \$ \$36.00 Date of Expenditure: \$ 10/22/2025

Total Expenditures: \$ \$18,484.69

(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: 9/15/2025 End Date: 1/15/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$18,484.69

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: UPS STORE **OR**

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

Address: 10629 HARDIN VALLEY RD City: KNOXVILLE State: TN Zip Code: 37932

Purpose of Expenditure: POSTAGE

Amount of Expenditure: \$ \$18.00 Date of Expenditure: \$ 12/2/2025

Business or Organization Name: AMAZON **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: PRINTING

Amount of Expenditure: \$ \$25.07 Date of Expenditure: \$ 10/16/2025

Business or Organization Name: TOTALLY PROMO **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: PRINTING

Amount of Expenditure: \$ \$25.12 Date of Expenditure: \$ 11/4/2025

Business or Organization Name: KNOX COUNTY ELECTION BOARD **OR**

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

Address: 300 MAIN ST City: KNOXVILLE State: TN Zip Code: 37902

Purpose of Expenditure: VOTER DATA

Amount of Expenditure: \$ \$41.00 Date of Expenditure: \$ 10/10/2025

Business or Organization Name: L2INC **OR**

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

Address: ONLINE City: ONLINE State: TN Zip Code: 12345

Purpose of Expenditure: VOTER DATA

Amount of Expenditure: \$ \$1,293.00 Date of Expenditure: \$ 12/23/2025

Total Expenditures: \$ \$19,886.88

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Kimberly Frazier
2. Reporting Period: Start Date: 9/15/2025 End Date: 1/15/2026
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: 37932

Outstanding Loan Balance (Beginning) \$ \$0.00

Loans Received \$ \$88,717.07

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$88,717.07

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: KIMBERLY Middle Name: _____ Last Name: FRAZIER

Address: 11835 COUCH MILL RD City: KNOXVILLE State: TN Zip Code: 37932

Amount Guaranteed Outstanding: \$ \$88,717.07

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) \$ \$0.00

Loans Received \$ \$88,717.07

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$88,717.07