CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 8/20/2025 2.a. Candidate or Committee Name: Doug Lloyd

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/26/2025

4. Campaign Address: PO Box 3161

City: Knoxville State: TN Zip Code: 37930 Phone: _____

5. Candidate Home Address: 5012 Cain Rd

City: Knoxville State: TN Zip Code: 37921 Phone: _____

Candidate Email Address: doug26lloyd@gmail.com

6. Office Sought: (include district number, if applicable) City Council, District 3

7. Name of Political Treasurer (may be candidate): Chrissey Stephens

Political Treasurer Email Address: clstephenstn@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: 7/1/2025 End Date: 8/16/2025

10. Detailed Disclosure: (Check one)

☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total $1,000 or less AND expenditures total $1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)

☑ This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than $1,000 and/or expenditures total more than $1,000 for this reporting period.

11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.

FC31-4CD2-AAEF-39B
08/20/25 - 5:15 AM

Candidate Signature	Date	Political Treasurer Signature	Date
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $13,157.49
b.	Total Receipts This Period	$ $5,294.70
c.	Total Disbursements This Period	$ $11,762.31
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $6,689.88
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Doug Lloyd

14. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at $2,000. See *Instructions* for more information.)

b. Itemized Contributions (over $100 from each source this period) ..... $ $5,294.70

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.) ..... $ $5,294.70

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $11,762.31
(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.)..... $ $11,762.31

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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Herrera Still PLLC **OR**

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

Address: 1518 N Broadway City: Knoxville State: TN Zip Code: 37917

Occupation: N/A Employer: N/A

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

Amount of Contribution: $ $521.15 Date of Contribution: 7/1/2025 Aggregate This Election: $ $521.15

Business or Organization Name: _____ **OR**

First Name: John Middle Name: _____ Last Name: Elliott

Address: 7350 Glastonbury Rd City: Knoxville State: TN Zip Code: 37931

Occupation: Owner/President Employer: Elliotts

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

Amount of Contribution: $ $521.15 Date of Contribution: 7/8/2025 Aggregate This Election: $ $521.15

Business or Organization Name: _____ **OR**

First Name: Kyle Middle Name: _____ Last Name: Nahrebne

Address: 7827 McMillan Rd City: Knoxville State: TN Zip Code: 37914

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $52.40 Date of Contribution: 7/10/2025 Aggregate This Election: $ $52.40

Business or Organization Name: _____ **OR**

First Name: Glen Middle Name: _____ Last Name: Stafford

Address: 7916 Whitcomb Road City: Powell State: TN Zip Code: 37849

Occupation: Business Owner Employer: Stafford Family Care

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

Amount of Contribution: $ $50.00 Date of Contribution: 7/11/2025 Aggregate This Election: $ $50.00

Total Contributions: $ $1,144.70

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,144.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Glen Middle Name: _____ Last Name: Stafford

Address: 7916 Whitcomb Road City: Powell State: TN Zip Code: 37849

Occupation: Business Owner Employer: Stafford Family Care

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

Amount of Contribution: $ $50.00 Date of Contribution: 7/11/2025 Aggregate This Election: $ $50.00

Business or Organization Name: _____ **OR**

First Name: Wanda Middle Name: _____ Last Name: Coker

Address: 6402 Mountain Laurel Rd City: Knoxville State: TN Zip Code: 37924

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $300.00 Date of Contribution: 7/14/2025 Aggregate This Election: $ $300.00

Business or Organization Name: _____ **OR**

First Name: Michael Middle Name: _____ Last Name: Bittel

Address: 309 Governors Ln City: Farragut State: TN Zip Code: 37934

Occupation: Retired Employer: Retired

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

Amount of Contribution: $ $300.00 Date of Contribution: 7/14/2025 Aggregate This Election: $ $300.00

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: Moran

Address: 1602 Emerson Park Dr City: Knoxville State: TN Zip Code: 37922

Occupation: Owner Employer: Self

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

Amount of Contribution: $ $1,500.0 Date of Contribution: 7/14/2025 Aggregate This Election: $ $1,500.0

Total Contributions: $ $3,294.70

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign contributions from preceding page (enter $0 if first page) $ $3,294.70

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Connie Middle Name: _____ Last Name: Goddard

Address: 7628 Goddard Rd City: Knoxville State: TN Zip Code: 37920

Occupation: Owner Employer: Self

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

Amount of Contribution: $$1,000.0 Date of Contribution: 7/25/2025 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Tim Middle Name: _____ Last Name: Graham

Address: PO Box 12489 City: Knoxville State: TN Zip Code: 37912

Occupation: Business Owner Employer: Graham Corporation

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

Amount of Contribution: $$500.00 Date of Contribution: 7/28/2025 Aggregate This Election: $ $500.00

Business or Organization Name: Stanley Homes LLC **OR**

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

Address: 6313 Clinton Hwy Apt 410 City: Knoxville State: TN Zip Code: 37912

Occupation: N/A Employer: N/A

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

Amount of Contribution: $$500.00 Date of Contribution: 8/14/2025 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

Amount of Contribution: $_____ Date of Contribution: _____ Aggregate This Election: $ _____

Total Contributions: $ $5,294.70

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $0.00

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

Business or Organization Name: Wind Consulting **OR**

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

Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Consultant

Amount of Expenditure: $ $2,500.00 Date of Expenditure: $ 7/2/2025

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: Wiatr

Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $165.00 Date of Expenditure: $ 7/7/2025

Business or Organization Name: _____ **OR**

First Name: Elijah Middle Name: _____ Last Name: Boatwright

Address: 221 E Blount Ave Apt 609 City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $342.38 Date of Expenditure: $ 7/11/2025

Business or Organization Name: _____ **OR**

First Name: Jonah Middle Name: _____ Last Name: Davis

Address: 9271 Davis Ferry Rd City: Loudon State: TN Zip Code: 37774

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $59.10 Date of Expenditure: $ 7/11/2025

Business or Organization Name: _____ **OR**

First Name: Patty Middle Name: Jean Last Name: King

Address: 950 Wildwood Garden Dr City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $163.66 Date of Expenditure: $ 7/11/2025

Total Expenditures: $ $3,230.14

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

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $3,230.14

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: IRS **OR**

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

Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280

Purpose of Expenditure: Payroll Taxes

Amount of Expenditure: $ $111.89 Date of Expenditure: $ 7/11/2025

Business or Organization Name: Professional Payroll Services **OR**

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

Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605

Purpose of Expenditure: Payroll Services

Amount of Expenditure: $ $23.28 Date of Expenditure: $ 7/11/2025

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: Wiatr

Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $82.50 Date of Expenditure: $ 7/21/2025

Business or Organization Name: _____ **OR**

First Name: Cheri Middle Name: _____ Last Name: Wiatr

Address: 5965 Babelay Rd City: Knoxville State: TN Zip Code: 37924

Purpose of Expenditure: Campain Worker

Amount of Expenditure: $ $15.00 Date of Expenditure: $ 7/22/2025

Business or Organization Name: MyRouteOnline **OR**

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

Address: 241 Perkins St City: Boston State: MA Zip Code: 02130

Purpose of Expenditure: Technology Subscription

Amount of Expenditure: $ $92.58 Date of Expenditure: $ 7/23/2025

Total Expenditures: $ $3,555.39

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $3,555.39

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: Bunker Middle Name: _____ Last Name: Seyfert

Address: 2658 Scottish Pike City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $97.89 Date of Expenditure: $ 7/16/2025

Business or Organization Name: _____ **OR**

First Name: Peter Middle Name: _____ Last Name: Wild

Address: 1043 Richland Rd City: Blaine State: TN Zip Code: 37990

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $96.04 Date of Expenditure: $ 7/16/2025

Business or Organization Name: IRS **OR**

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

Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280

Purpose of Expenditure: Payroll Taxes

Amount of Expenditure: $ $32.14 Date of Expenditure: $ 7/16/2025

Business or Organization Name: Professional Payroll Services **OR**

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

Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605

Purpose of Expenditure: Payroll Services

Amount of Expenditure: $ $46.36 Date of Expenditure: $ 7/16/2025

Business or Organization Name: _____ **OR**

First Name: Elijah Middle Name: _____ Last Name: Boatwright

Address: 221 E Blount Ave Apt 609 City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $379.56 Date of Expenditure: $ 7/25/2025

Total Expenditures: $ $4,207.38

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $4,207.38

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: Pierce Middle Name: _____ Last Name: Broussard

Address: 2042 Gusty Wind Ln City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $414.62 Date of Expenditure: $ 7/25/2025

Business or Organization Name: _____ **OR**

First Name: Patty Middle Name: Jean Last Name: King

Address: 950 Wildwood Garden Dr City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $91.34 Date of Expenditure: $ 7/25/2025

Business or Organization Name: _____ **OR**

First Name: Bunker Middle Name: _____ Last Name: Seyfert

Address: 2658 Scottish Pike City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $140.06 Date of Expenditure: $ 7/25/2025

Business or Organization Name: IRS **OR**

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

Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280

Purpose of Expenditure: Payroll Taxes

Amount of Expenditure: $ $157.71 Date of Expenditure: $ 7/25/2025

Business or Organization Name: Professional Payroll Services **OR**

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

Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605

Purpose of Expenditure: Payroll Services

Amount of Expenditure: $ $18.75 Date of Expenditure: $ 7/25/2025

Total Expenditures: $ $5,029.86

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $5,029.86

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: El Burro Flojo Mexican **OR**

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

Address: 8079 Kingston Pike City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Meals

Amount of Expenditure: $ $10.91 Date of Expenditure: $ 7/26/2025

Business or Organization Name: _____ **OR**

First Name: Cheri Middle Name: _____ Last Name: Wiatr

Address: 5965 Babelay Rd City: Knoxville State: TN Zip Code: 37924

Purpose of Expenditure: Campain Worker

Amount of Expenditure: $ $15.00 Date of Expenditure: $ 7/26/2025

Business or Organization Name: _____ **OR**

First Name: Chrissey Middle Name: _____ Last Name: Stephens

Address: 2614 Sweeping Rain Ln City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $175.00 Date of Expenditure: $ 7/29/2025

Business or Organization Name: Victory Text **OR**

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

Address: 190 Monroe Ave NW Ste 300 City: Grand Rapids State: MI Zip Code: 49503

Purpose of Expenditure: Texting Services

Amount of Expenditure: $ $324.00 Date of Expenditure: $ 7/30/2025

Business or Organization Name: Hart Graphics **OR**

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

Address: 10228 Technology Dr City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Printing

Amount of Expenditure: $ $312.46 Date of Expenditure: $ 8/1/2025

Total Expenditures: $ $5,867.23

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $5,867.23

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: Hart Graphics **OR**

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

Address: 10228 Technology Dr City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Printing

Amount of Expenditure: $ $629.28 Date of Expenditure: $ 8/1/2025

Business or Organization Name: Burns Mailing & Printing **OR**

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

Address: 6131 Industrial Heights Dr NW City: Knoxville State: TN Zip Code: 37909

Purpose of Expenditure: Postage

Amount of Expenditure: $ $778.71 Date of Expenditure: $ 8/1/2025

Business or Organization Name: Hart Graphics **OR**

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

Address: 10228 Technology Dr City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Printing

Amount of Expenditure: $ $549.28 Date of Expenditure: $ 8/1/2025

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

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

Address: 9361 Kingston Pike City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Materials

Amount of Expenditure: $ $221.89 Date of Expenditure: $ 8/1/2025

Business or Organization Name: _____ **OR**

First Name: Elijah Middle Name: _____ Last Name: Boatwright

Address: 221 E Blount Ave Apt 609 City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $459.89 Date of Expenditure: $ 8/8/2025

Total Expenditures: $ $8,506.28

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $8,506.28

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: Pierce Middle Name: _____ Last Name: Broussard

Address: 2042 Gusty Wind Ln City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $289.28 Date of Expenditure: $ 8/8/2025

Business or Organization Name: _____ **OR**

First Name: Jonah Middle Name: _____ Last Name: Davis

Address: 9271 Davis Ferry Rd City: Loudon State: TN Zip Code: 37774

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $363.08 Date of Expenditure: $ 8/8/2025

Business or Organization Name: _____ **OR**

First Name: Patty Middle Name: Jean Last Name: King

Address: 950 Wildwood Garden Dr City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $238.44 Date of Expenditure: $ 8/8/2025

Business or Organization Name: _____ **OR**

First Name: Bunker Middle Name: _____ Last Name: Seyfert

Address: 2658 Scottish Pike City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $130.82 Date of Expenditure: $ 8/8/2025

Business or Organization Name: _____ **OR**

First Name: Albert Middle Name: _____ Last Name: Venable

Address: 904 Edmonds Ave City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $75.41 Date of Expenditure: $ 8/8/2025

Total Expenditures: $ $9,603.31

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $9,603.31

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: IRS **OR**

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

Address: PO Box 806532 City: Cincinnati State: OH Zip Code: 45280

Purpose of Expenditure: Payroll Taxes

Amount of Expenditure: $ $264.64 Date of Expenditure: $ 8/8/2025

Business or Organization Name: Professional Payroll Services **OR**

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

Address: PO Box 82 City: Johnson City State: TN Zip Code: 37605

Purpose of Expenditure: Payroll Services

Amount of Expenditure: $ $25.19 Date of Expenditure: $ 8/8/2025

Business or Organization Name: _____ **OR**

First Name: Cheri Middle Name: _____ Last Name: Wiatr

Address: 5965 Babelay Rd City: Knoxville State: TN Zip Code: 37924

Purpose of Expenditure: Campain Worker

Amount of Expenditure: $ $15.00 Date of Expenditure: $ 8/11/2025

Business or Organization Name: _____ **OR**

First Name: Emily Middle Name: _____ Last Name: Wiatr

Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37990

Purpose of Expenditure: Campaign Worker

Amount of Expenditure: $ $258.75 Date of Expenditure: $ 8/11/2025

Business or Organization Name: Victory Text **OR**

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

Address: 190 Monroe Ave NW Ste 300 City: Grand Rapids State: MI Zip Code: 49503

Purpose of Expenditure: Texting Services

Amount of Expenditure: $ $125.76 Date of Expenditure: $ 8/11/2025

Total Expenditures: $ $10,292.65

(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: Doug Lloyd

2. Reporting Period: Start Date: 7/1/2025 End Date: 8/16/2025

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $10,292.65

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: Victory Text **OR**

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

Address: 190 Monroe Ave NW Ste 300 City: Grand Rapids State: MI Zip Code: 49503

Purpose of Expenditure: Texting Services

Amount of Expenditure: $ $124.96 Date of Expenditure: $ 8/14/2025

Business or Organization Name: Wind Consulting **OR**

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

Address: 2429 Bishops Bridge Rd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Campaign Consultant

Amount of Expenditure: $ $1,300.00 Date of Expenditure: $ 8/14/2025

Business or Organization Name: Andedot/Fundraising Site **OR**

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

Address: 5555 Hilton Ave Ste 106 City: Baton Rouge State: LA Zip Code: 70808

Purpose of Expenditure: Bank Fees

Amount of Expenditure: $ $44.70 Date of Expenditure: $ 8/16/2025

Business or Organization Name: _____ **OR**

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

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

Purpose of Expenditure: _____

Amount of Expenditure: $ _____ Date of Expenditure: $ _____

Business or Organization Name: _____ **OR**

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

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

Purpose of Expenditure: _____

Amount of Expenditure: $ _____ Date of Expenditure: $ _____

Total Expenditures: $ $11,762.31

(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.)