



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 1/31/2025 2.a. Candidate or Committee Name: Larsen Jay (Current)
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 8/4/2022
4. Campaign Address: PO 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 Commission, At Large Seat 10
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: 7/1/2024 End Date: 1/15/2025
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.

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

12. Summary:

a. Balance On Hand Last Report	\$ <u>\$3,903.48</u>
b. Total Receipts This Period	\$ <u>\$19,576.81</u>
c. Total Disbursements This Period	\$ <u>\$23,349.83</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$130.46</u>
e. Total Loans Outstanding	\$ <u>\$0.00</u>
f. Total Obligations Outstanding	\$ <u>\$0.00</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Larsen Jay (Current)

14. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025

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) \$ \$19,576.81
- 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.) \$ \$19,576.81

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$23,349.83
(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.)..... \$ \$23,349.83

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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
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: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.1 Date of Contribution: 7/5/2024 Aggregate This Election: \$ \$1,052.1

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.1 Date of Contribution: 7/19/2024 Aggregate This Election: \$ \$2,104.2

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,000.0 Date of Contribution: 8/2/2024 Aggregate This Election: \$ \$3,104.2

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.1 Date of Contribution: 8/2/2024 Aggregate This Election: \$ \$4,156.3

Total Contributions: \$ \$4,156.33

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,156.33

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$2 000 0 Date of Contribution: 8/15/2024 Aggregate This Election: \$ \$6 156 3

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1 052 1 Date of Contribution: 8/16/2024 Aggregate This Election: \$ \$7 208 4

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1 066 1 Date of Contribution: 8/30/2024 Aggregate This Election: \$ \$8 274 5

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1 052 1 Date of Contribution: 9/13/2024 Aggregate This Election: \$ \$9 326 6

Total Contributions: \$ \$9,326.66

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$9,326.66

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,500.00 Date of Contribution: 9/16/2024 Aggregate This Election: \$ \$10,826.66

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.11 Date of Contribution: 9/27/2024 Aggregate This Election: \$ \$11,878.77

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.11 Date of Contribution: 10/10/2024 Aggregate This Election: \$ \$12,930.88

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.11 Date of Contribution: 10/25/2024 Aggregate This Election: \$ \$13,982.99

Total Contributions: \$ \$13,982.99

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$13,982.99

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,052.1 Date of Contribution: 11/8/2024 Aggregate This Election: \$ \$15,035

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,340.3 Date of Contribution: 11/22/2024 Aggregate This Election: \$ \$16,375

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,066.1 Date of Contribution: 12/6/2024 Aggregate This Election: \$ \$17,441

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,066.1 Date of Contribution: 12/20/2024 Aggregate This Election: \$ \$18,507

Total Contributions: \$ \$18,507.62

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$18,507.62

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

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

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

Occupation: Commissioner Employer: Knox County

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

Amount of Contribution: \$ \$1,069.1 Date of Contribution: 1/3/2025 Aggregate This Election: \$ \$19,576.

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

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

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

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

Business or Organization Name: _____ **OR**

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

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

Occupation: _____ Employer: _____

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

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

Total Contributions: \$ \$19,576.81

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
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: Knoxville Ice Bears **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 500 Howard Baker Jr. Drive City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 9/10/2024

Business or Organization Name: Music Outlet **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1050 Winfield Dunn Pkwy City: Sevierville State: TN Zip Code: 37876
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 12/9/2024

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: Sponsorships
Amount of Expenditure: \$ \$324.14 Date of Expenditure: \$ 12/4/2024

Business or Organization Name: Leadership Knoxville **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 17 Market Street #201 City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 9/6/2024

Business or Organization Name: Leadership Knoxville **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 17 Market Street #201 City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 9/6/2024

Total Expenditures: \$ \$2,674.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$2,674.14

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: Leadership Knoxville **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 17 Market Street #201 City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 9/18/2024

Business or Organization Name: Ball Camp Elementary PTA **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9801 Middlebook Pike City: Knoxville State: TN Zip Code: 37931
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 9/30/2024

Business or Organization Name: BFAA **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 216 Abner Cruze Road City: Knoxville State: TN Zip Code: 37920
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$275.00 Date of Expenditure: \$ 11/22/2024

Business or Organization Name: CAC Office on Aging **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 51650 City: Knoxville State: TN Zip Code: 37950
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$175.00 Date of Expenditure: \$ 9/4/2024

Business or Organization Name: Carter HS Football **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 210 N Carter School Road City: Strawberry Plains State: TN Zip Code: 37871
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 8/1/2024

Total Expenditures: \$ \$4,474.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$4,474.14

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: Central Football **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5321 Jacksboro Pike City: Knoxville State: TN Zip Code: 37918
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$425.00 Date of Expenditure: \$ 8/9/2024

Business or Organization Name: Corryton Community Center **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 215 City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 8/19/2024

Business or Organization Name: Cumulus Knoxville **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4711 Old Kingston Pike City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 9/10/2024

Business or Organization Name: Emerald Youth Foundation **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1014 Heiskell Avenue City: Knoxville State: TN Zip Code: 37921
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 11/26/2024

Business or Organization Name: Farragut High School Football Boosters **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 22635 City: Knoxville State: TN Zip Code: 37933
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$650.00 Date of Expenditure: \$ 7/11/2024

Total Expenditures: \$ \$6,249.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$6,249.14

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: Fulton High School **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2509 Broadway NE City: Knoxville State: TN Zip Code: 37917
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$350.00 Date of Expenditure: \$ 8/9/2024

Business or Organization Name: Fulton High School Baseball/Softball **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2509 Broadway NE City: Knoxville State: TN Zip Code: 37917
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$300.00 Date of Expenditure: \$ 10/15/2024

Business or Organization Name: Grace Christian Academy **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5914 Beaver Ridge Road City: Knoxville State: TN Zip Code: 37931
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 8/9/2024

Business or Organization Name: Halls High Stadium Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 70051 City: Knoxville State: TN Zip Code: 37938
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$1,300.00 Date of Expenditure: \$ 7/30/2024

Business or Organization Name: Hardin Valley **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 11345 Hardin Valley Road City: Knoxville State: TN Zip Code: 37932
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 11/8/2024

Total Expenditures: \$ \$9,699.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$9,699.14

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: Hardin Valley Academy Athletic Council **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 11345 Hardin Valley Road City: Knoxville State: TN Zip Code: 37932
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$1,500.00 Date of Expenditure: \$ 7/31/2024

Business or Organization Name: Knox County CAC **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2247 Western Avenue City: Knoxville State: TN Zip Code: 37921
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 11/3/2024

Business or Organization Name: Knox County Republican Party **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 5410 Kingston Pike City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ (\$1,000.00) Date of Expenditure: \$ 8/6/2024

Business or Organization Name: Knoxville Catholic High School **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 9245 Fox Lonas Road City: Knoxville State: TN Zip Code: 37923
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 8/15/2024

Business or Organization Name: Knoxville Christian School **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 11549 Snyder Rd. City: Knoxville State: TN Zip Code: 37932
Purpose of Expenditure: Sponsorships
Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 8/15/2024

Total Expenditures: \$ \$12,199.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$12,199.14

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: Northshore Elementary School PTO **OR**

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

Address: 1889 Thunderhead Road City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 8/9/2024

Business or Organization Name: Pioneer Productions **OR**

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

Address: PO Box175 City: Knoxville State: TN Zip Code: 37901

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 11/5/2024

Business or Organization Name: SDHS Touchdown Club **OR**

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

Address: 2020 Tipton Station RD City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 8/15/2024

Business or Organization Name: South Doyle High School **OR**

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

Address: 2020 Tipton Station Rd City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$200.00 Date of Expenditure: \$ 9/30/2024

Business or Organization Name: Two Bikes **OR**

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

Address: 118 S Central St. City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$1,000.00 Date of Expenditure: \$ 1/6/2025

Total Expenditures: \$ \$14,999.14

(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: Larsen Jay (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$14,999.14

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: West High Athletic Council OR

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

Address: 3300 Sutherland Avenue City: Knoxville State: TN Zip Code: 37919

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$600.00 Date of Expenditure: \$ 7/11/2024

Business or Organization Name: WJBE Radio OR

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

Address: PO Box 6597 City: Knoxville State: TN Zip Code: 37914

Purpose of Expenditure: Sponsorships

Amount of Expenditure: \$ \$1,500.00 Date of Expenditure: \$ 9/16/2024

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: Consulting

Amount of Expenditure: \$ \$877.81 Date of Expenditure: \$ 7/18/2024

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: Consulting

Amount of Expenditure: \$ \$234.00 Date of Expenditure: \$ 8/1/2024

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: Consulting

Amount of Expenditure: \$ \$378.00 Date of Expenditure: \$ 8/15/2024

Total Expenditures: \$ \$18,588.95

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$18,588.95

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: _____ **OR**
First Name: Emma Middle Name: _____ Last Name: Moutaw
Address: 312 Grandview Drive City: Maryville State: TN Zip Code: 37803
Purpose of Expenditure: Consulting
Amount of Expenditure: \$ \$198.00 Date of Expenditure: \$ 9/4/2024

Business or Organization Name: Gibbs Ruritan Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7312 Boruff Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$44.00 Date of Expenditure: \$ 7/1/2024

Business or Organization Name: Gibbs Ruritan Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7312 Boruff Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$45.00 Date of Expenditure: \$ 9/16/2024

Business or Organization Name: Gibbs Ruritan Club **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7312 Boruff Road City: Corryton State: TN Zip Code: 37721
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$65.00 Date of Expenditure: \$ 1/8/2025

Business or Organization Name: Powell Business and Professional Assn **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 771 City: Powell State: TN Zip Code: 37849
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 1/14/2025

Total Expenditures: \$ \$18,990.95

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$18,990.95

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: Dragonaire OR

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

Address: PO Box 1231 City: Dandridge State: TN Zip Code: 37725

Purpose of Expenditure: Marketing & Advertising

Amount of Expenditure: \$ \$900.00 Date of Expenditure: \$ 11/22/2024

Business or Organization Name: Joy620WRJZ OR

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

Address: 1621 Magnolia Ave. City: Knoxville State: TN Zip Code: 37917

Purpose of Expenditure: Marketing & Advertising

Amount of Expenditure: \$ \$750.00 Date of Expenditure: \$ 12/20/2024

Business or Organization Name: Farragut Press OR

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

Address: PO Box 22847 City: Knoxville State: TN Zip Code: 37933

Purpose of Expenditure: Marketing & Advertising

Amount of Expenditure: \$ \$150.00 Date of Expenditure: \$ 11/5/2024

Business or Organization Name: the frame theory OR

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

Address: 2216 West Blount Avenue City: Knoxville State: TN Zip Code: 37920

Purpose of Expenditure: Marketing & Advertising

Amount of Expenditure: \$ \$450.00 Date of Expenditure: \$ 10/15/2024

Business or Organization Name: MailChimp OR

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

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

Purpose of Expenditure: Marketing & Advertising

Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 7/1/2024

Total Expenditures: \$ \$21,361.13

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$21,361.13

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: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 8/1/2024

Business or Organization Name: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 9/3/2024

Business or Organization Name: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 11/1/2024

Business or Organization Name: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 12/2/2024

Total Expenditures: \$ \$21,962.03

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$21,962.03

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: MailChimp **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$120.18 Date of Expenditure: \$ 1/2/2025

Business or Organization Name: _____ **OR**
First Name: Larsen Middle Name: _____ Last Name: Jay
Address: 3908 Wilani Road City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$459.69 Date of Expenditure: \$ 12/11/2024

Business or Organization Name: Farragut West Knox Chamber of Commence **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 11826 Kingston Pike Suite 110 City: Knoxville State: TN Zip Code: 37934
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$230.00 Date of Expenditure: \$ 7/23/2024

Business or Organization Name: Friends of the Knox County Library **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 500 W Church Avenue City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Dues
Amount of Expenditure: \$ \$50.00 Date of Expenditure: \$ 10/21/2024

Business or Organization Name: Checkforless **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Office Supplies
Amount of Expenditure: \$ \$33.82 Date of Expenditure: \$ 11/12/2024

Total Expenditures: \$ \$22,855.72

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$22,855.72

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: Post Office **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Sutherland Avenue City: Knoxville State: TN Zip Code: 37919
Purpose of Expenditure: Office Supplies
Amount of Expenditure: \$ \$40.80 Date of Expenditure: \$ 7/15/2024

Business or Organization Name: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$36.05 Date of Expenditure: \$ 7/29/2024

Business or Organization Name: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$36.05 Date of Expenditure: \$ 8/27/2024

Business or Organization Name: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$36.05 Date of Expenditure: \$ 9/30/2024

Business or Organization Name: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$33.00 Date of Expenditure: \$ 10/28/2024

Total Expenditures: \$ \$23,037.67

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$23,037.67

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: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$33.00 Date of Expenditure: \$ 11/27/2024

Business or Organization Name: Envato Market **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: Online City: Online State: Onli Zip Code: 37950
Purpose of Expenditure: Web Site Templates
Amount of Expenditure: \$ \$33.00 Date of Expenditure: \$ 12/27/2024

Business or Organization Name: Parrott Printing Inc. **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2007 Riverside Drive City: Knoxville State: TN Zip Code: 37915
Purpose of Expenditure: Marketing & Advertising
Amount of Expenditure: \$ \$186.16 Date of Expenditure: \$ 12/9/2024

Business or Organization Name: Home Federal **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 515 Market Street City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Banking
Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 10/1/2024

Business or Organization Name: Home Federal **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 515 Market Street City: Knoxville State: TN Zip Code: 37902
Purpose of Expenditure: Banking
Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 11/1/2024

Total Expenditures: \$ \$23,319.83

(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 (Current)
2. Reporting Period: Start Date: 7/1/2024 End Date: 1/15/2025
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$23,319.83

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: Home Federal OR

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

Address: 515 Market Street City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Banking

Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 12/2/2024

Business or Organization Name: Home Federal OR

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

Address: 515 Market Street City: Knoxville State: TN Zip Code: 37902

Purpose of Expenditure: Banking

Amount of Expenditure: \$ \$15.00 Date of Expenditure: \$ 1/2/2025

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: \$ _____

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: \$ \$23,349.83

(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.)