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

1. Date: 4/6/2026 2.a. Candidate or Committee Name: Kimberly L Calcote

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 419 Childe Harolds Ln

City: Brentwood State: TN Zip Code: 37027 Phone: _____

5. Candidate Home Address: 419 Childe Harolds Lane

City: Brentwood State: TN Zip Code: 37027 Phone: 6155616079

Candidate Email Address: kimberlylcalcote@gmail.com

6. Office Sought: (include district number, if applicable) Wmson Cty School Board-Dist 06

7. Name of Political Treasurer (may be candidate): James Calcote

Political Treasurer Email Address: brian.calcote@gmail.com

8. Category or Report: (check one)

☑ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General

☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election

9. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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

-48A5-4F78-9D76-8D0E
04/06/26 - 12:38 PM

12. Summary:

a.	Balance On Hand Last Report	$ $1,700.00
b.	Total Receipts This Period	$ $5,790.15
c.	Total Disbursements This Period	$ $2,523.81
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $4,966.34
e.	Total Loans Outstanding	$ $1,000.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Kimberly L Calcote

14. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $600.00
(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) ..... $ $5,190.15

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.) ..... $ $5,790.15

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $2,523.81
(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.) ..... $ $2,523.81

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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Nelson Middle Name: _____ Last Name: Andrews

Address: 1242 Monarch Way City: Brentwood State: TN Zip Code: 37027

Occupation: President Employer: Andrews Cadillac

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

Amount of Contribution: $ $500.00 Date of Contribution: 1/22/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Jack Middle Name: _____ Last Name: Johnson

Address: 915 Lewisburg Pk City: Franklin State: TN Zip Code: 37064

Occupation: State Senator Employer: State of TN

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 1/23/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: _____ **OR**

First Name: Claire Middle Name: _____ Last Name: Reeves

Address: 1402 Championship Blvd City: Franklin State: TN Zip Code: 37064

Occupation: Vice President of Education Employer: Lifestyles Unlimited

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

Amount of Contribution: $ $240.15 Date of Contribution: 2/2/2026 Aggregate This Election: $ $240.15

Business or Organization Name: _____ **OR**

First Name: Clarence Middle Name: _____ Last Name: Jeyaratnem

Address: 9718 Turner Lane City: Brentwood State: TN Zip Code: 37027

Occupation: Music Producer Employer: Self

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

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

Total Contributions: $ $2,040.15

(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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,040.15

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Dennis Middle Name: _____ Last Name: Drigers

Address: 7004 Kidman Ln City: Spring Hill State: TN Zip Code: 37172

Occupation: School Board Member Employer: Williamson County

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

Amount of Contribution: $ $250.00 Date of Contribution: 2/10/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Brian Middle Name: _____ Last Name: Hammond

Address: 301 Sterling Ct City: Mt Juliet State: TN Zip Code: 37122

Occupation: Realtor Employer: Self

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

Amount of Contribution: $ $250.00 Date of Contribution: 2/12/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Adam Middle Name: _____ Last Name: Wright

Address: 153 Timberline City: Franklin State: TN Zip Code: 37069

Occupation: Clinical AI and Informatics Resea Employer: Vanderbilt

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

Amount of Contribution: $ $250.00 Date of Contribution: 2/20/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Jay Middle Name: _____ Last Name: Marcy

Address: 1462 Crimson Clover Ct City: Brentwood State: TN Zip Code: 37027

Occupation: Sales Employer: Astra Zeneca

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

Amount of Contribution: $ $150.00 Date of Contribution: 2/22/2026 Aggregate This Election: $ $150.00

Total Contributions: $ $2,940.15

(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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $2,940.15

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Jacob Middle Name: _____ Last Name: McCalmon

Address: 5105 Aberleigh Ln City: Franklin State: TN Zip Code: 37064

Occupation: State Representative Employer: State of TN

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

Amount of Contribution: $ $500.00 Date of Contribution: 2/19/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Lorelie Middle Name: _____ Last Name: Friedheim

Address: 153 Harold Ct City: Franklin State: TN Zip Code: 37064

Occupation: Homemaker Employer: Self

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

Amount of Contribution: $ $1,000.0 Date of Contribution: 3/2/2026 Aggregate This Election: $ $1,000.0

Business or Organization Name: A Moment's Peace Salon **OR**

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

Address: 9050 Carothers Pkwy, #108 City: Franklin State: TN Zip Code: 37067

Occupation: Owner Employer: A Moment's Peace Salon

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/5/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Traci Middle Name: _____ Last Name: Anderson

Address: 6105 Lookaway Ct City: Franklin State: TN Zip Code: 37067

Occupation: Homemaker Employer: Self

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/28/2026 Aggregate This Election: $ $500.00

Total Contributions: $ $5,190.15

(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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Republican Women of Williamson County **OR**

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

Address: 625 Bakers Bridge Rd, Ste 123-23 City: Franklin State: TN Zip Code: 37027

Purpose of Expenditure: Just Desserts Campaigning Event.

Amount of Expenditure: $ $133.26 Date of Expenditure: $ 3/10/2026

Business or Organization Name: Campaign Compliance Ledger **OR**

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

Address: 123 Bulifants City: Williamsburg State: VA Zip Code: 23188

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: $ $1,201.11 Date of Expenditure: $ 3/17/2026

Business or Organization Name: First Horizon Bank **OR**

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

Address: 231 Public Square City: Franklin State: TN Zip Code: 37064

Purpose of Expenditure: Debit Card Initial Fee

Amount of Expenditure: $ $2.97 Date of Expenditure: $ 3/30/2026

Business or Organization Name: Battle Ground Strategies **OR**

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

Address: PO Box 680805 City: Franklin State: TN Zip Code: 37068

Purpose of Expenditure: Campaign Manager

Amount of Expenditure: $ $1,000.00 Date of Expenditure: $ 3/23/2026

Business or Organization Name: HeyDel's Bakery **OR**

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

Address: 4037 Jefferson Hwy City: New Orleans State: LA Zip Code: 70121

Purpose of Expenditure: cake for Just Desserts Auction

Amount of Expenditure: $ $87.47 Date of Expenditure: $ 3/19/2026

Total Expenditures: $ $2,424.81

(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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $2,424.81

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: Encanvasser **OR**
First Name: ______ Middle Name: ______ Last Name: ______
Address: Unit 6A South Ring Business Park City: Cork State: N/A Zip Code: 37027
Purpose of Expenditure: App for Canvassing
Amount of Expenditure: $ $99.00 Date of Expenditure: $ 3/30/2026

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

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

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

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

Total Expenditures: $ $2,523.81
(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 L Calcote

2. Reporting Period: Start Date: 1/16/2026 End Date: 3/31/2026

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: Calcote

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

Outstanding Loan Balance (Beginning) $ $1,000.00

Loans Received $ $0.00

Loan Payments $ $0.00

Outstanding Loan (End) $ $1,000.00

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

Date of Loan: 12/19/2025

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

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Business or Organization Name: ______ **OR**

First Name: ______ Middle Name: ______ Last Name: ______

Address: ______ City: ______ State: ______ Zip Code: ______

Amount Guaranteed Outstanding: $______

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) $ $1,000.00

Loans Received $ $0.00

Loan Payments $ $0.00

Outstanding Loan (End) $ $1,000.00