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

1. Date: 7/4/2026 2.a. Candidate or Committee Name: Gina Oster

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

4. Campaign Address: 9536 Briarwood Dr

City: Knoxville State: TN Zip Code: 37923 Phone: _____

5. Candidate Home Address: 9536 Briarwood Dr

City: Knoxville State: TN Zip Code: 37923 Phone: _____

Candidate Email Address: voteginaoster@gmail.com

6. Office Sought: (include district number, if applicable) County Commission, District 3

7. Name of Political Treasurer (may be candidate): Sybil Brown

Political Treasurer Email Address: akasyb@gmail.com

8. Category or Report: (check one)

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

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

9. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

10. Detailed Disclosure: (Check one)

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

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

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

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

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07/04/26 - 2:21 PM

12. Summary:

a.	Balance On Hand Last Report	$ $19,809.01
b.	Total Receipts This Period	$ $3,042.74
c.	Total Disbursements This Period	$ $14,045.71
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $8,806.04
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Gina Oster

14. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

15. Receipts:

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

b. Itemized Contributions (over $100 from each source this period) ..... $ $3,042.74

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.) ..... $ $3,042.74

16. Disbursements:

a. Total Expenditures (other than loan payments)..... $ $14,045.71
(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.)..... $ $14,045.71

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: Gina Oster

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Tractor Supply Company **OR**

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

Address: 101 N Seven Oaks Drive City: Knoxville State: TN Zip Code: 37922

Occupation: Refund Employer: Tractor Supply

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

Amount of Contribution: $ $42.74 Date of Contribution: 5/10/2026 Aggregate This Election: $ $42.74

Business or Organization Name: Realtors Association **OR**

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

Address: 609 N Weisgarber Rd City: Knoxville State: TN Zip Code: 37919

Occupation: Owner Employer: Realtors Association

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

Amount of Contribution: $ $3,000.0 Date of Contribution: 5/23/2026 Aggregate This Election: $ $3,000.0

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: $ $3,042.74

(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: Gina Oster

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

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

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

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $118.00 Date of Expenditure: $ 4/26/2026

Business or Organization Name: Knoxville Focus **OR**

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $186.60 Date of Expenditure: $ 4/26/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $177.00 Date of Expenditure: $ 4/27/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $118.00 Date of Expenditure: $ 4/28/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $118.00 Date of Expenditure: $ 4/29/2026

Total Expenditures: $ $717.60

(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: Gina Oster

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $717.60

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: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $128.00 Date of Expenditure: $ 4/30/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $128.00 Date of Expenditure: $ 5/2/2026

Business or Organization Name: Academy Sports **OR**

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

Address: 145 Moss Grove Blvd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Election Day Supplies

Amount of Expenditure: $ $43.69 Date of Expenditure: $ 5/2/2026

Business or Organization Name: Kroger **OR**

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

Address: 9161 Middlebrook Pike City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Election Day Food

Amount of Expenditure: $ $110.25 Date of Expenditure: $ 5/2/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $128.00 Date of Expenditure: $ 5/3/2026

Total Expenditures: $ $1,255.54

(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: Gina Oster

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $1,255.54

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: Academy Sports **OR**

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

Address: 145 Moss Grove Blvd City: Knoxville State: TN Zip Code: 37922

Purpose of Expenditure: Election Day Supplies

Amount of Expenditure: $ $152.92 Date of Expenditure: $ 5/3/2026

Business or Organization Name: Knoxville Focus **OR**

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

Address: PO Box 18377 City: Knoxville State: TN Zip Code: 37928

Purpose of Expenditure: Advertising

Amount of Expenditure: $ $186.60 Date of Expenditure: $ 5/3/2026

Business or Organization Name: Double Dogs **OR**

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

Address: 10639 Hardin Valley Rd City: Knoxville State: TN Zip Code: 37932

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: $ $44.77 Date of Expenditure: $ 5/3/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $367.00 Date of Expenditure: $ 5/5/2026

Business or Organization Name: Corner 16 **OR**

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

Address: 1640 Bob Kirby Rd City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: $ $157.58 Date of Expenditure: $ 5/5/2026

Total Expenditures: $ $2,164.41

(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: Gina Oster

2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026

3. Total campaign expenditures from preceding page (enter $0 if first page) $ $2,164.41

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: Finns Irish Restaurant **OR**

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

Address: 9000 Kingston Pike City: Knoxville State: TN Zip Code: 37923

Purpose of Expenditure: Food for campaign workers

Amount of Expenditure: $ $64.00 Date of Expenditure: $ 5/10/2026

Business or Organization Name: Facebook **OR**

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

Address: 1 Hacker Wy City: Menlo Park State: CA Zip Code: 94025

Purpose of Expenditure: Social Media/Advertising

Amount of Expenditure: $ $117.30 Date of Expenditure: $ 5/12/2026

Business or Organization Name: _____ **OR**

First Name: Parker Middle Name: _____ Last Name: Wolford

Address: 9625 Stringtown Road City: Strawberry Plains State: TN Zip Code: 37871

Purpose of Expenditure: Social Media

Amount of Expenditure: $ $500.00 Date of Expenditure: $ 5/12/2026

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Oster

Address: 1505 Red Maple Court City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Social Media/Co Campaign Mgr

Amount of Expenditure: $ $1,000.00 Date of Expenditure: $ 5/12/2026

Business or Organization Name: _____ **OR**

First Name: Sybil Middle Name: _____ Last Name: Brown

Address: 8741 Troutman Lane City: Knoxville State: TN Zip Code: 37931

Purpose of Expenditure: Campaign Treasurer

Amount of Expenditure: $ $1,000.00 Date of Expenditure: $ 5/29/2026

Total Expenditures: $ $4,845.71

(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: Gina Oster
2. Reporting Period: Start Date: 4/26/2026 End Date: 6/30/2026
3. Total campaign expenditures from preceding page (enter $0 if first page) $ $4,845.71

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: Stanton Middle Name: ______ Last Name: Oster
Address: 9536 Briarwood Drive City: Knoxville State: TN Zip Code: 37923
Purpose of Expenditure: Campaign Manager
Amount of Expenditure: $ $9,200.00 Date of Expenditure: $ 5/30/2026

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: $ $14,045.71
(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.)