CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Single-Measure Committees (SMC)

1 0	i Siligie-meas	uio oon			
DATE OF REPORT	2. NAME OF COM				
January 27, 2025	Knox Voter A	lliance			
2. SHORT NAME OF COMMITTEE (IF APPLICA	ABLE)				
Knox Voter Alliance					
Street or Rural Route	City		State	Zip Code	Phone
259 N. Peters Road, Suite 101, Kr	noxville		TN	37919	865-248-5003
4. MEASURES SUPPORTED OR OPPOSED					
Knoxville Charter Amendment N	lo. 2		4:	5	
5.A. NAME OF POLITICAL TREASURER					DATEAPPOINTED
Harold Middlebrook				10/1/	2024
6. CATEGORY OR REPORT (Check one)	Г А				
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR SUPPLEMENTA	YEAR-END L SUPPLEMENTAL
QUARTER QUARTER QUARTER 7.A. BEGINNING DATE OF REPORTING PERIOD	QUARTER F	7.B. ENDIN	GENERAL IG DATE OF REPO		E SON PERMENTINE
10/27/2024		1/15/202	25		
8. (Check one)					
A. This committee 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. I do solemnly swear or affirm that the information contained in this statement is true and that the committee has complied with all applicable provisions of the Campaign Financial Disclosure Act. (Items 10d., 10e. and 10f must also be completed.)					
B. This committee 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. I do solemnly swear or affirm that the information contained in this statement is true and that the following page(s) are a complete and accurate accounting of all contributions and expenditures.					
tures required to be reported by political campaign committees by the Campaign Financial Disclosure Act.					
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	Maralell	Signature of	political treasure	ır-	_ Jan. 22, 2025
		orginatore er		: 	
9. WITNESS SIGNATURE		. ()		*
	/	~/.			1/2/2005
	-	signature	of witness		
		3 Signature	7 OI WIGIGSS		
10. SUMMARY				2,313.83	
a. BALANCE ON HAND LAST REPORT				\$	_
b. TOTAL RECEIPTS THIS PERIOD			***************************************	\$	_
c. TOTAL DISBURSEMENTS THIS PERIOD)			\$ 12,312.83	_
d. BALANCE ON HAND (10.a. plus 10.b.					s <u>0.00</u>
					0
e. TOTAL LOANS OUTSTANDING					\$
f. TOTAL OBLIGATIONS OUTSTANDIN	G				s <u>0</u>

SUMMARY PAGE - SMC

11. NAME OF COMMITTEE (In Full)	12. REPORT COVE	RING THE PERIOD
Knox Voter Alliance	FROM: 10/27/24	то: 1/15/25
RECEIPTS		
13. CONTRIBUTIONS (other than loans and interest)	. 0	
a. Unitemized Contributions (\$100 or less from each source this period)		⇒ 71
b. Itemized Contributions (over \$100 from each source this period)		- 10.000.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 13.a. and 13.b.)		- 0
14. LOANS RECEIVED THIS REPORTING PERIOD		\$
15. INTEREST RECEIVED THIS REPORTING PERIOD		10,000,00
16. TOTAL RECEIPTS (add 13.c., 14., and 15.) (must be shown in item 10.b.)		\$_10,000.00
DISBURSEMENTS		
17. EXPENDITURES (other than loan payments)		
a. Unitemized Expenditures (\$100 or less each payee this period) (must be listed by gasoline)	category - e.g., printi	ng, postage,
\$		
\$		
ssss		
\$		
Total of Expenditures (\$100 or less each payee)	. \$	e.
b. Itemized Expenditures (Over \$100 each payee this period)	. \$	e _
c. TOTAL EXPENDITURES (other than loan repayments)(add 17.a. and 17.b)		.s <u>0</u>
18. LOAN REPAYMENTS MADE THIS PERIOD		.\$ 0
19. TOTAL DISBURSEMENTS (add 17.c. and 18.) (must be shown in item 10.c.)		s <u>0</u>
20.IN-KIND CONTRIBUTIONS		
a. Unitemized in-kind contributions (\$100 or less from each source this period)	. \$ 0	
b. Itemized in-kind contributions (over \$100 from each source this period)	. \$ 0	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 20.a. and 20.b.)		\$ 0
21.LOANS		
LOANS OUTSTANDING (must be shown in item 10.e.)		s 0
22.OBLIGATIONS		
	s 0	
a. Unitemized Obligations Outstanding (\$100 or less each)	, 0	•
b. Itemized Obligations Outstanding (Over \$100 each)	10 ()	° 0
c. TOTAL OBLIGATIONS OUTSTANDING (add 22.a. and 22.b.) (must be shown i item	1U.I.)	-



ITEMIZED STATEMENT OF CONTRIBUTIONS - SMC

1. NAME OF COMMITTEE			2. REPORT COVE	RING THE PERIOD
Knox Voter Alliance			FROM: 10/27/24	TO: 1/15/25
		IONS FROM PRECEDING PAGE (enter \$0 if first itemized page		Amount
		CHITEMIZED CONTRIBUTION (contributions totaling more than \$100	from any contributor	
First Name Phillip	MI.	Last Name/Organization Name Lawson		Amount of Contribution \$10,000.00
Address 755 Kenesaw Ave.				
City Knoxville	State TN	7ip Code 37919		
Cocupation Founder/Property Dev.				
Employee LHP Capital, LLC				
First Name	MJ.	Last Name/Organization Name		Amount of Contribution
Address				
Cdy	State	Zip Code		
Occupation				
Employer				
First Name	ML	Last Name/Organization Name		Amount of Contribution
Address				
Cay	State	Zip Code		
Cocupation				
Employer				
First Name	MT	Last Name/Organization Name		Amount of Contribution
Acciress				
Caty	State	Zip Code		
Occupation				
Employer				
First Name	MLL	Last Name/Organization Name		Amount of Contribution
Address				
City	State	Zip Code		
Occupation				
Employer				
5.TOTAL ITEMIZED CONTRIBUTIONS				\$10,000.00
(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 13b. of summary.)			\$. 0,000.00	

ITEMIZED STATEMENT OF EXPENDITURES - SMC

				RING THE PERIOD	
Knox Voter Alliance FROM: 10/27/24					
3. TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
 TOTAL ITEMIZED EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (any expenditures totaling more than \$100 to a sigle payee during the period, must be itemized.) 					
First Name	inst Name Purpose of Expenditure		Purpose of Expenditure		Amount of Expenditure
Last Name Business Name			Mailer		4,989.06
Russell Printing Address 1800 Grad Ave.					
City Knoxville	State TN	Zip Code 37916			
First Name	Middle Na		Purpose of Expenditure		Amount of Expenditure 1,250.00
Last NameBusness Name Morgan Street Strategies		Consulting/Managemen	Consulting/Management		
Address 1037 Tranquila Drive					
^{©ly} Knoxville	State TN	77919			
Fest Name	Middle Na		Purpose of Expenditure		Amount of Expenditure 4,836.49
Last NameBusiness Name Targeted Strategy		Research		,,000	
Address 1810 Water MillTrl.					
^{Cay} Knoxville	State TN	Zip Code 37922			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure 1,237.28
Last Name Business Name Scale to Win		Digital Campaign			
Address 13742 Harper Street					
Santa Anna	State CA	Zip Code 92703			v
First Name	Mode Na	TIB	Purpose of Expenditure		Amount of Expenditure
Last Name Business Name					
Address					
Cny	State	Zip Code			
First Name	rst Name Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
5. TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of campalgn expenditures, this amount must be shown in item 17b. of summary.)					12,312.83

