CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. Date: 9-30-26 2.a. Candidate or Committee Name: Benjamin Harris

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 7-6-26

4. Campaign Address: 1051 Edge water Cir

City: Gallatin State: TN Zip Code: 37066 Phone: 615-804-2583

5. Candidate Home Address: Same

City: Gallatin State: TN Zip Code: 37066 Phone: 615-804-2583

Candidate Email Address: ben.harris2010@ComCast.net

6. Office Sought: (include district number, if applicable) County Commissioner 10th Dist

7. Name of Political Treasurer (may be candidate): Amy B Harris

Political Treasurer Email Address: AmyBHarris@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: July 28-26 End Date: Oct 13-26

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
Benjamin A Harris	9-30-26	Amy B Harris	9-30-26
Witness Signature	**Date**	**Witness Signature**	**Date**
Teddy P. Bird	9-30-26	Chayna Mayfield	09-30-26

12. Summary:

FILED AM PM
SEP 30 2026
SUMNER COUNTY ELECTION COMMISSION

a.	Balance On Hand Last Report	$ 1,412.95
b.	Total Receipts This Period	$ -0-
c.	Total Disbursements This Period	$ 1,412.95
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ -0-
e.	Total Loans Outstanding	$ -0-
f.	Total Obligations Outstanding	$ -0-

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Benjamin Harris

14. Reporting Period: Start Date: July 28-26 End Date: Oct 13-26

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ -0-
(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) ..... $ -0-

c. Loans Received This Reporting Period ..... $ -0-

d. Interest Received This Reporting Period ..... $ -0-

e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) ..... $ -0-

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 1,412.95
(Note: Effective January 16, 2023, all expenditures must be itemized.)

b. Loan Repayments Made This Period ..... $ -0-

c. Total Obligation Payments Made This Period ..... $ -0-

d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) ..... $ -0-

17. In-Kind Contributions:

a. Unitemized In-Kind Contributions Received This Period ..... $ -0-

b. Itemized In-Kind Contributions Received This Period ..... $ -0-

c. Total In-Kind Contributions Received This Period ..... $ -0-

18. Obligations:

a. Total Obligations Outstanding (must be shown in item 12.f.) ..... $ -0-

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Benjamin Harris

2. Reporting Period: Start Date: July 28-26 End Date: Oct 13-26

3. Total campaign expenditures from preceding page (enter $0 if first page) $ 1,412.95

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: Gallatin High School **OR**

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

Address: 700 Dan P Herron DR City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Donation GHS

Amount of Expenditure: $ 275.00 Date of Expenditure: $ 8-4-26

Business or Organization Name: Gallatin High School **OR**

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

Address: 700 Dan P Herron City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Donation GHS Dance Program

Amount of Expenditure: $ 475.00 Date of Expenditure: $ 8-4-26

Business or Organization Name: Johnny Anderson for Mayor **OR**

First Name: Johnny Middle Name: _____ Last Name: Anderson

Address: 210 Preston Ln City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Donation for Mayor

Amount of Expenditure: $ 600.00 Date of Expenditure: $ 8-10-26

Business or Organization Name: The Care Cabinet **OR**

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

Address: 1056 Lake Court City: Gallatin State: TN Zip Code: 37066

Purpose of Expenditure: Donation to Banner Care Cabinet

Amount of Expenditure: $ 62.95 Date of Expenditure: $ 8-31-26

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: $ 1,412.95

(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.)