

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 8 2022</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Terri Bejt</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>August General 8/4/2022</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>334 Fannis Circle</u>	City <u>Gallatin</u>	State <u>TN</u>	Zip Code <u>37066</u> Phone <u>629-259-4702</u>
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route <u>same as above</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Commissioner District B3</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Hellen West</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input checked="" type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER
<input type="checkbox"/> PRE-PRIMARY	<input type="checkbox"/> PRE-GENERAL	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD <u>April 23, 2022</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>June 30, 2022</u>	
9. (Check one)			
a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)			
b. <input checked="" type="checkbox"/> 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.			
10. 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.			
<u>Terri Bejt</u> signature of candidate		<u>7/8/2022</u> date	<u>Hellen West</u> signature of political treasurer
			<u>7/8/22</u> date
11. WITNESS SIGNATURE			
<u>Janet Mitchell</u> signature of witness		<u>7/8/22</u> date	<u>Cheryl Jacobs</u> signature of witness
			<u>7/8/22</u> date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	..... AM	FILED	\$ <u>1130</u>
b. TOTAL RECEIPTS THIS PERIOD	.....	PM	\$ <u>4500</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	.....	JUL 11 2022	\$ <u>486137</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	.....	SUMNER COUNTY ELECTION COMMISSION	\$ <u>868.63</u>
e. TOTAL LOANS OUTSTANDING	.....		\$ <u>10,100</u>
f. TOTAL OBLIGATIONS OUTSTANDING	.....		\$ <u>0</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD	
		FROM:	TO:
RECEIPTS			
15. CONTRIBUTIONS (other than <u>loans and interest</u>)			
a. Unitemized Contributions (\$100 or less from each source this period)		\$	_____
b. Itemized Contributions (over \$100 from each source this period)		\$	<u>1500</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$	<u>1500</u>
16. LOANS RECEIVED THIS REPORTING PERIOD		\$	<u>3100</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$	_____
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$	<u>4600</u>
DISBURSEMENTS			
19. EXPENDITURES (other than loan payments)			
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)			
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
_____	\$	_____	
Total of Expenditures (\$100 or less each payee)		\$	0 <u>0</u>
b. Itemized Expenditures (Over \$100 each payee this period)		\$	<u>4861.37</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$	<u>4861.37</u>
20. LOAN REPAYMENTS MADE THIS PERIOD		\$	<u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		\$	<u>4861.37</u>
22. IN-KIND CONTRIBUTIONS			
a. Unitemized in-kind contributions (\$100 or less from each source this period)		\$	<u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period)		\$	_____
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		\$	<u>0</u>
23. OBLIGATIONS			
a. Unitemized Obligations Outstanding (\$100 or less each)		\$	<u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)		\$	_____
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)		\$	<u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Terri Boyd		2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 400⁰⁰
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Mark		Middle Name 	
Last Name/Organization Name Vaughn		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 830 Red River		<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin	State TN	Zip Code 37066	Amount of Contribution 250⁰⁰
Occupation Self employed		Date of Contribution 6/2/2022	Aggregate This Election 250⁰⁰
Employer 			
First Name Russ		Middle Name 	
Last Name/Organization Name Edwards		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 133 Windham Circle		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Amount of Contribution 100⁰⁰
Occupation lawyer		Date of Contribution 6/6/2022	Aggregate This Election 100⁰⁰
Employer Edwards & Edwards Law			
First Name William		Middle Name 	
Last Name/Organization Name Whalen		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 214 Cherokee Rd		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Amount of Contribution 50⁰⁰
Occupation Lawyer		Date of Contribution 6/27/2022	Aggregate This Election 50⁰⁰
Employer 			
First Name William		Middle Name 	
Last Name/Organization Name Lamberth		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address PO Bx 812		<input type="checkbox"/> Runoff (Local Elections Only)	
City Portland	State TN	Zip Code 37148	Amount of Contribution 500⁰⁰
Occupation State Representative		Date of Contribution 6/27/2022	Aggregate This Election 500⁰⁰
Employer State - TN			
5. TOTAL ITEMIZED CONTRIBUTIONS (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 15b. of summary.)			1500⁰⁰

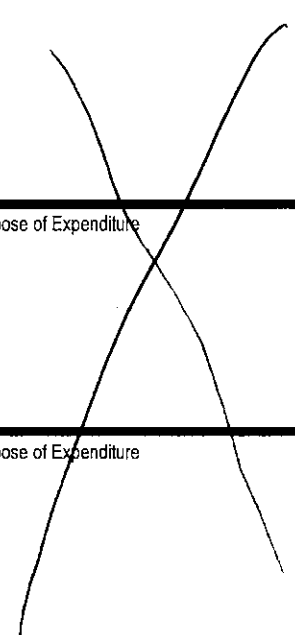
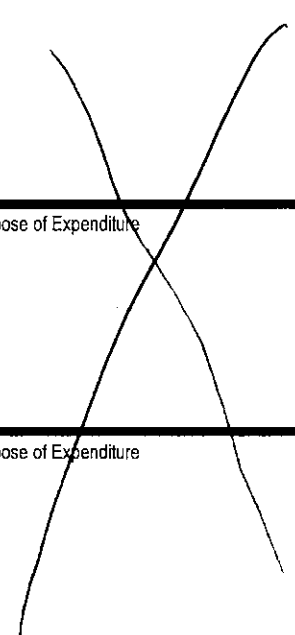
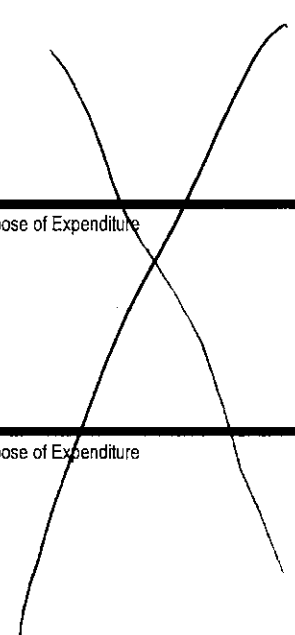
ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <u>0</u>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <u>Jill</u>		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <u>Higgins</u> <u>5591 Eastland Rd</u>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Sparta</u>	State <u>TN</u>	Zip Code <u>38583</u>	Date of Contribution <u>4/15/2022</u>	Amount of Contribution <u>100⁰⁰</u>	
Occupation <u>BEST EFFORT</u>				Aggregate This Election <u>100⁰⁰</u>	
Employer					
First Name <u>Johnny</u>		Middle Name		Contribution Received For:	
Last Name/Organization Name <u>Garrett</u>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <u>425 Rep John Lewis Way N</u>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <u>Nashville</u>	State <u>TN</u>	Zip Code <u>37243</u>	Date of Contribution <u>6/27/2022</u>	Amount of Contribution <u>500⁰⁰</u>	
Occupation <u>State Representative</u>				Aggregate This Election <u>500⁰⁰</u>	
Employer <u>State-TN</u>					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Amount of Contribution	
Occupation				Aggregate This Election	
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (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 15b. of summary.)					<u>600⁰⁰</u>

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Terri Boyd		2. REPORT COVERING THE PERIOD FROM: 4/25/22 TO: 6/30/22	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)			
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Zip Code	
		Description of In-Kind Contribution	
		Value of In-Kind Contribution	
		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Zip Code	
		Description of In-Kind Contribution	
		Value of In-Kind Contribution	
		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Zip Code	
		Description of In-Kind Contribution	
		Value of In-Kind Contribution	
		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Zip Code	
		Description of In-Kind Contribution	
		Value of In-Kind Contribution	
		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Zip Code	
		Description of In-Kind Contribution	
		Value of In-Kind Contribution	
		Aggregate this Election	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)			Amount 0

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Terri Boyt			2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name Navigation Adv		Media Adv	2500⁰⁰		
Address 416 Medical Center Pkwy B					
City Murfreesboro	State TN				Zip Code 37129
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name Navigation Adv		Mailer	15 35		
Address 416 Medical Center Pkwy					
City Murfreesboro	State TN				Zip Code 37129
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name Navigation Adv		Business Cards Road signs	826.37		
Address 416 Medical Center Pkwy					
City Murfreesboro	State TN				Zip Code 37129
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First 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 expenditures, this amount must be shown in item 19b. of summary.)			4861.37		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <p style="text-align: center; font-size: 1.2em;">Terri Boyd</p>				2. REPORT COVERING THE PERIOD FROM: <u>4/23</u> TO: <u>6/30</u>							
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)											
Complete the Following for the Source of the Loan											
First Name <u>Terri</u>		Middle Name		Outstanding Loan Balance (Beginning of Period) <u>7,000</u>		Loans Received <u>3,100</u>	Loan Payments <u>—</u>	Outstanding Loan Balance (End of Period) <u>10,100</u>			
Last Name/Organization Name <u>Boyd</u>				Loan Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <u>11/9/2022</u>					
Address <u>334 Fannis Circle</u>				<input type="checkbox"/> Runoff (Local Elections Only)		<u>5/2/2022</u>					
City <u>Gallatin</u>		State <u>TN</u>	Zip Code <u>37066</u>								
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)											
First Name			Middle Name			First Name			Middle Name		
Last Name/Organization Name						Last Name/Organization Name					
Address						Address					
City			State	Zip Code		City			State	Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding					
First Name			Middle Name			First Name			Middle Name		
Last Name/Organization Name						Last Name/Organization Name					
Address						Address					
City			State	Zip Code		City			State	Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding					
First Name			Middle Name			First Name			Middle Name		
Last Name/Organization Name						Last Name/Organization Name					
Address						Address					
City			State	Zip Code		City			State	Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding					
First Name			Middle Name			First Name			Middle Name		
Last Name/Organization Name						Last Name/Organization Name					
Address						Address					
City			State	Zip Code		City			State	Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding					
First Name			Middle Name			First Name			Middle Name		
Last Name/Organization Name						Last Name/Organization Name					
Address						Address					
City			State	Zip Code		City			State	Zip Code	
Amount Guaranteed Outstanding						Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) <small>(Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e, on front page.)</small>				Outstanding Loan Balance (Beginning of Period) <u>7,000</u>		Loans Received <u>3,100</u>	Loan Payments <u>—</u>	Outstanding Loan Balance (End of Period) <u>10,100</u>			



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<div style="font-size: 2em; font-family: cursive;">Tessie Boyd</div>				FROM: <u>4/23</u> TO: <u>6/30</u>			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							<div style="font-size: 2em; font-family: cursive;">0</div>