CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT 4-25-22 2.a. NAME OF	CANDIDATE OR COMMITTEE	Sheciff	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 5-3-2	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City	State To	Zip Code	Phone (
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, if applicable) Sheriff Sumver (owty		TREASURER (may be c	andidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER	PRE-PRIMARY GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 4-1-22	8.b. ENDING DATE OF REPO		
9. (Check one) a. This campaign is exempt from detailed disclosure becan tures total \$1,000 or less for this reporting period. (Conb. This campaign is required to file a detailed financial disclosure and/or expenditures total more than \$1,000 for this report	nplete items 12d., 12e. and 12f. closure because contributions (i)	
I/we do solemnly swear or affirm that the information contains accurate accounting of campaign contributions and expenditure. Financial Disclosure Act. Additionally, I/we swear or affirm the benefit of the candidate or for any other nonpolitical purpose a signature of candidate. Contains the information contains accurate accounting to the information contains accurate accounting of campaign contributions and expenditure. Contains Conta	res required to be reported by that no campaign contributions has defined by the federal interna	ne candidate committee b	y the Campaign
11. WITNESS SIGNATURE RIMAN Edison 4/25/2 signature of witness date	z Signa	ture of witness	4 <u>000</u>
	LED	2000 54	
a. BALANCE ON HAND LAST REPORT	2 6 2022	\$ 2936. =	
b. TOTAL RECEIFTS THIS PERIOD	ER COUNTY	\$ 1300	
c. TOTAL DISBURSEMENTS THIS PERIODELECTION	COMMISSION	s 1275. =	7801 <u>23</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$	<u> </u>
e. TOTAL LOANS OUTSTANDING		\$_	0
f. TOTAL OBLIGATIONS OUTSTANDING		\$-	0

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) HEITH BEAN FOR SHERIFF	14. REPORT COVERING THE PERIOD FROM: 4 / 23・23・23・23・23・23・23・23・23・23・23・23・23・2
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	(50. <u>a</u>)
b. Itemized Contributions (over \$100 from each source this period)	1250 =
	1
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	~~
16. LOANS RECEIVED THIS REPORTING PERIOD	
17. INTEREST RECEIVED THIS REPORTING PERIOD	\sim \sim
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1300, -
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	
PAYPAI BONK tous \$ 15.3	<u> </u>
\$	
<u> </u>	
\$	
\$	
\$	
\$	-
\$\$	
	
\$	<u> </u>
Total of Expenditures (\$100 or less each payee)	\$ 15. 31
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 1260. [≈]
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	· · · · · · · · · · · · · · · · · · ·
20. LOAN REPAYMENTS MADE THIS PERIOD	\$
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>D</u>
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	
b. Itemized in-kind contributions (over \$100 from each source this period)	<u>\$ 400.≅</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.1	
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	m 12.f.)\$

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	tox	SHER	IFF	2. REPORT COVER		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			page)	Amount	<u> </u> 	
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	CH ITEMIZ	ED CONTRIBUTION (co	ontributions totaling more than	\$100 from any contributor		
First Name SALIF Middle Name Contribution Received For: Last Name/Organization Name Rrimary Election General Election			Amount of Contribution			
Last Name/Organization Name ROWN				_	250,00	
Address 380 JOWER STAT			Runoff (Local Election	A		
CIN CALLY	Sale	Zio Code /OCC	Date of Contribution		Aggregate This Election	
Occupation FETTRES			4.72	<u> </u>	#2550,000.	
	7					
First Name T, K.	Middle Nam	e	Contribution Received For		Amount of Contribution	
Last Name/Organization Name BRISTER		<u> </u>		General Election	00000	
Address 1469 UPPER S	AIN	2 CAMP	Runoff (Local Election	ons Only)	/	
COTTONIONA	77	Z 248	Date of Contribution		Aggregate This Election	O
Occupation Business on	WNE	R	4 22:	25		EP.
Employer US REST		(try tru)	A	= 1000.99		
First Name	Middle Nam	е	Contribution Received Fo	rī.	Amount of Contribution	
Last Name/Organization Name		Primary Election	General Election			
Address			Runoff (Local Electic	ons Only)		
City	State	Zīp Code	Date of Contribution		Aggregate This Election	
Occupation	·					
Employer						
First Name	Middle Nam	le	Contribution Received For:	· · · · · · · · · · · · · · · · · · ·	Amount of Contribution	
Last Name/Organization Name	ł	· · · · · · · · · · · · · · · · · · ·	Primary Election [General Election		
Address		Runoff (Local Election	ons Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation	•					
Employer						
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages)	of this form	raticed)			1250,00	
(If this is the last page of contributions, this amount must					1050, -	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	TOR?	SHERIFF		2. REPORT COVER	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTION	ONS FROM	enter \$0 if first itemized page	e)	Amount	
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 Nan	Les From	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution
Last Name/Organization Name			Rupoff (Local Election	ns Only)	4 500 =
Address 224 GRIFFIN	77		Date of In-Kind Contribution	્ટ ્	Aggregate this Election
City GALLATIA	Staty	Zipes Tocc	Description of In-Kind Contribution		
Occupation Employer			CODY 1	ERRY (11	-MS EXIES/ASHLEY
First Name KEITH	Middle Nar	HEAN	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution
Last Name/Organization Name			Runoff /Local Election	ns Only)	500
Address 24 GRIFFI L	١ . لمـ		Date of In-Kind Contribution	<u></u>	Aggregate this Election
City - CALUTTIA	State	2566	Description of In-Kind Contribution	RIVIEC	RESTAURANT
Occupation Employer		,	(MEET-N-	GREET)	16-11 (101)
First Name	Middle Nar	me	In-Kind Contribution Received Primary Election	ed For: General Election	Value of In-Kind Contribution
Last Name/Organization Name		Runoff (Local Electio	_		
Address	٠		Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	1	
Occupation Employer	•				
First Name	Middle Na	me	In-Kind Contribution Receive	ed For. General Election	Value of In-Kind Contribution
Last Name/Organization Name	_		Runoff (Local Election		
Address			Date of In-Kind Contribution		Aggregate this Election
City	State	Zip Code	Description of In-Kind Contribution	<u> </u>	
Occupation Employe	· · · · · · · · · · · · · · · · · · ·	<u>. </u>			
First Name	Middle Nan	ne	In-Kind Contribution Receiv		Value of In-Kind Contribution
Last Name/Organization Name		☐ Primary Election [☐ Runoff (Local Electio	General Election		
Address		Date of In-Kind Contribution		Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution		1
Occupation Employer		.1	1		
5. TOTAL ITEMIZED IN-KIND CONTRIBUT	TIONS				00
(Carry forward to item 3. of next page if additional page (If this is the last page of in-kind contributions, this ar			<i>i.</i>)		48.9
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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR SOMMITTEE TOR SHERFF FROM 1. 22 TO: 4.23					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	ACH ITEMIZ	ZED EXPENDITURE (ex		to any payee during the per	iod)
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name MAIN STREET MEDIA OF TH Address Po Box 8156		ApvERTIS	inc	1260,9	
CONTRACTOR OF STREET	State Zin Code				,00
	Niddle Nam	3766	Purpose of Expenditure		Amount of Expenditure
First Name	iviluale Nair		Parpose of Experiment		Amount or Experimitare
Last Name/Business Name					
Address		,			
City	State	Zip Code			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>		1		
Address				. 1	
City	State	Zip Code	İ		
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		-			
Address					
City	State	Zip Code	-		
			<u> </u>		
First Name	irst 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	-		İ
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must			1260.00		

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Page _____ of ____

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