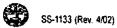
CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

	Single-Car	ididate C	ommitte	985				
1. DATE OF REPORT	2.a. NAMEOFC	ANDIDATE OR CO	OMMITTEE					
4/9/22	Alan Drive	r						
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DA	TE			
4.a. CAMPAIGN ADDRESS AND PHONE				May 3, 2022				
Street or Rural Route	City		State	Zip Code	Phone			
135 MT Vernon RD	Bethpage		TN	37022	615-428-4160			
	NDIDATE'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) 6. NAME OF POLITICAL TREASURER (may be candidate)								
County Commission District 5	applicable	Lisa Driv		NEASONER (may	be candidate)			
7. CATEGORY OR REPORT (Check one)		<u> </u>	<u> </u>					
IXI	FOURTH	PRE-	PRE-	MID-YEAR	YEAR-END			
QUARTER QUARTER QUARTER		PRIMARY	GENERAL	SUPPLEMENTA				
8.a. BEGINNING DATE OF REPORTING PERIOD 1/16/2022		8.b. ENDING		RTING PERIOD				
9. (Check one)		3/31/20						
·								
 a. This campaign is exempt from detaile tures total \$1,000 or less for this repo 	d disclosure becaus Irting period. {Com:	ie contributions (plete items 12d.,	including in-kir 12e, and 12f.)	nd) received total \$1	,000 or less AND expendi-			
			· ·					
 b.	tailed financial discid	osure because c ting period.	ontributions (in	cluding in-kind) rece	aived total more than \$1,000			
10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor signature of candidate.	ons and expenditure swear or affirm that	s required to be no campaign co	reported by the ntributions have ederal internal	e candidate commit e been expended fo	tee by the Campaign			
11. WITNESS SIGNATURE Signature of witness	4/11/27 date	- 2	or illustration of the signature of the	MGOU ure of witness	<u>Q</u> 4/11/22			
12. SUMMARY								
a. BALANCE ON HAND LAST REPORT	***************************************	***************************************		\$	_			
b. TOTAL RECEIPTS THIS PERIOD		******************************	***************************************	\$1500.00	_			
c. TOTAL DISBURSEMENTS THIS PERIOD .		***************************************		\$1130.03	·			
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.)		•••••••••••••••••••••••••••••••••••••••		\$369,97			
e. TOTAL LOANS OUTSTANDING	AM.	FILED	PM		s 1500.00			
f. TOTAL OBLIGATIONS OUTSTANDING		APR 1 1 20	122		\$			

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In F. II)	44 0000000	EDINO THE DECION
13. NAME OF CANDIDATE OR COMMITTEE (In Full) Alan Driver	14. REPORT COV FROM: 1/16/22	TO: 3/31/22
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this period)	\$	
b. Itemized Contributions (over \$100 from each source this period)		
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		 \$ -0-
16. LOANS RECEIVED THIS REPORTING PERIOD		
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$1500.00
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)
<u>Printing</u> \$ 81.27		
<u> </u>		
\$		
		
		
<u> </u>		
<u> </u>		
<u> </u>		
<u></u> \$		
Total of Expenditures (\$100 or less each payee)	\$ 81.27	
b. Itemized Expenditures (Over \$100 each payee this period)		_
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		 \$ 1130.03
20. LOAN REPAYMENTS MADE THIS PERIOD		·
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		
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)		
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.	-	
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)	\$	<u></u>
b. Itemized Obligations Outstanding (Over \$100 each)		_
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item		



Page _____ of ____

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD
Alan Driver	TO: 4/11/22				
			***************************************		Amount _
3. TOTAL ITEMIZED CAMPAIGN EXPENDIT				•	-0-
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEM	IZED EXPENDITURE	(expenditures totaling more than \$100) to any payee during the pe	riod)
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Amazon			Mail Supplies		174.02
Address 410 Terry Ave N					
City Seattle	State WA	Zip Code 98109			
First Name	Middle Nar	пе	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			Deinting		294.74
ASAP Printing			Printing		254.14
Address 116 Imperial Blvd		_			
Ciy Hendersonville	State TN	Zip Code 37075			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
U.S. Postal Service		Postage		580.00	
Address 516 Old Hwy 31 E					
City	State	Zip Code			
Bethpage	TN	37022			
First Name	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code	**		
First Name	Middle Nam	l	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	<u> </u>		-		
Address			-		
Fib.	10	T = 2			
City	State	Zip Code			
First Name	First Name Middle Name				Amount of Expenditure
Last Name/Business Name	· · · · · · · · · · · · · · · · · · ·				
Address					
City	State	Zip Code	7		
TOTAL ITEMIZED EXPENDITURES (Carry forward to riem 3. of next page if additional page (If this is the last page of expenditures, this amount must	s of this form a st be shown in	re used.) item 19b. of summary.)			1048.76

4	cc
W)	SS

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE O	RCOMMITTEE					•	2.	REPORT (COVER	ING THE PERIOD
Alan Driver							FR 1.	OM: /16/221		TO: 4/11/22
3. COMPLETE THE APPROP	PRIATE ITEMS F	OR EACH I	TEMIZ	ED LOAN (loans totaling n	nore than \$10	0 from any source	during the pe	riod)	
Complete the Following for the Sa	ource of the Loan									
First Name Alan & Lisa	The state of the s			Outstanding to (Beginning (Loans Receive		Loan Out Payments		landing Loan Balance (End of Period)
Last Name/Organization Name Driver				-0-	-	1500.	00	-0-	1:	500.00
135 MT Vernon RD			Loan Receive	<u>_</u>					 -	
City Bethpage	State TN	Zip Code 3702	22	Primary Election General Election Runoff (Local Elections Only)				3/4/2022		
	List All Endor	sers or Guara	intors f	or Above Loa	n (If more spa	ca is neede	d please attact	a page)		
First Name		Middle Name)		First Name		<u> </u>		Middle	: Nатте
Last Name/Organization Name		<u></u>			Last Name/On	janization Na	me		_l	
Address					Address					
City	City State Zip Code City						Stalle	Zip Code		
Amount Guaranteed Outstanding	Amount Guaranteed Outstanding				Amount Guara	nteed Outstar	nding		L	
First Name	First Name Middle Name				First Name Middle Name					Name
Last Name/Organization Name	Last Name/Organization Name				Last Name/Organization Name					
Address				···	Address					
City		State	Zip Ca	ode	City				State	Z ₁ p Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstar	nding			
First Name		Middle Name	: :		First Name				Middl	e Name
Last Name/Organization Name		<u> </u>	·	·	Last Name/Organization Name					
Address					Address	-				
City	<u>.</u>	State	Zip Ca	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding			
First Name		Middle Name			First Name Middle Name					Name
Last Name/Organization Name				Last Name/Organization Name						
Address					Address			 		
City		State	Zıp Са	xie	City			<u></u>	State	Zip Code
Amount Guaranteed Outstanding		-			Amount Guaranteed Outstanding					
4. Totals for all Loans (complete (Total loans received should also be s	shown in item 16, on s	ummary page.)			Outstanding Lo (Beginning o		Loans Received	Loa Paym		Outstanding Loan Balance (End of Period)
(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.)				-0-		1500.00		0-	1500.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	RING THE PERIOD		
	TO:						
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	OM PRECEDING	PAGE (enter \$0 if first itemized n	ane)	Amount		
					ur)		
First Name	Middle Nan			Contribution Received For:			
				10			
Last Name/Organization Name			Primary Election	☐ General Election			
Address			Runoff (Local Election	ns Only)			
City	State Zip Code		Date of Contribution	Date of Contribution			
Occupation							
Employer							
					<u> </u>		
First Name	Middle Nar	ne	Contribution Received For	Contribution Received For:			
Last Name/Organization Name		Primary Election	General Election				
Address		Runoff (Local Election	(enter \$0 if first itermized page) tributions totaling more than \$100 from any contribute Contribution Received For: Primary Election General Election Runoff (Local Elections Only) Date of Contribution Contribution Received For:				
City	State Zip Code		Date of Contribution	Date of Contribution			
Occupation		· *					
Employer		<u></u>					
		-10					
First Name	Middle Nam	ne	Contribution Received For	•	Amount of Contribution		
Last Name/Organization Name			Primary Election [Primary Election General Election			
Address			Runoff (Local Election	ns Only)			
City	State Zip Code		Date of Contribution	Date of Contribution			
Occupation	<u> </u>						
Employer							
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution		
Last Name (Occasion)	<u> </u>			.			
Last Name/Organization Name		LJ Primary Election L	J General Election				
Address			Runoff (Local Election	ns 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 (If this is the lest page of contributions, this amount must	of this form a be shown in	re used.) item 15b. of summary.))				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

7 Miles		···					
1. NAME OF CANDIDATE OR COL	MMITTEE			2. REPORT COVE	ERING THE PERIOD		
	<u> </u>			FRUM:	Amount		
3. TOTAL ITEMIZED IN-KIND CON	ITRIBUTIONS FRO	M PRECEDING PA	AGE (enter \$0 if first itemized page)	Anount		
4. COMPLETE THE APPROPRIATE IT					contributor during the period:		
First Name	Middle N		In-Kind Contribution Received				
	(Majdas)			General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election				
Address		Date of In-Kind Contribution	is Only)	Aggregate this Election			
City	State	Zip Code	Description of the Mind Constitution		38-3		
		zpcade	Description of In-Kind Contribution				
Occupation	Employer						
	<u> </u>	· · · · · · · · · · · · · · · · · · ·					
First Name	Middle N	lame	In-Kind Contribution Received	-	Value of In-Kind Contribution		
Last Name/Organization Name			Pnmary Election	General Election			
			Runoff (Local Election	s Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer			·			
First Name	Middle N	lame	In-Kind Contribution Received	1 For:	Value of In-Kind Contribution		
Last Name/Organization Name			_	General Election			
Casi rama/organization Name			Runoff (Local Election	Runoff (Local Elections Only)			
Address			Date of In-Kind Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer						
First Name	Middle N	lome	In-Kind Contribution Received	15-			
	WINCIE	ian rie		For: General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Election				
Address			Date of In-Kind Contribution	s Othy)	Aggregate this Election		
City	Lower	T- 0.			733-53-6 0-6 2-0-6-6		
	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer						
First Name	Middle Na	ame	In-Kind Contribution Receive		Value of In-Kind Contribution		
East Name/Organization Name] _	General Election			
Address			Runoff (Local Elections	Only)			
			Date of In-IGnd Contribution		Aggregate this Election		
City	State	Zip Code	Description of In-Kind Contribution				
Occupation	Employer		\neg				
5. TOTAL ITEMIZED IN-KIND CON				<u>-</u>			
(Carry forward to item 3, of next page if ad (if this is the last page of in-kind contribution)	unional pages of this form ons, this amount must be:	sh own in item 22b, of sur	nmary.)				
SS-1128 (Rev. 2/06)	· · · · · · · · · · · · · · · · · · ·		Page	ol	RDA 1159		

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
			FROM:	TO:		
 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	1	<u> </u>				
Flist Name	Middle Na	me				
Last Name/Business Name						
Address		<u> </u>	_			
City	State	Zip Code				
Description of Obligation	<u>l </u>					<u> </u>
First Name	Middle Name				"	
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation			- • • 			
First Name	Middle Na	ne				<u> </u>
Last Name/Business Name	<u> </u>		i			
Address		- <u>,,, .</u> ,				
City	State	Zip Code	_			
Description of Obligation	<u> </u>					<u> </u>
First Name	Middle Nar	ne				
Last Name/Business Name	<u></u> .		 			
Address			_			
City	State	Zip Code	-			
Description of Obligation	L	<u> </u>				
A TOTAL C		······································				
TOTALS (Total from Outstanding Balance - (End of Penod) or in item 23b. on summary page.)	olumn must	also be shown				