CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

		or omgie-oa	iididate e	OHIHITEE	003				
1. DA	TE OF REPORT	2.a. NAME OF C	CANDIDATE OR C	OMMITTEE					
1/1:	3/2023	Mark A. Harris	son						
2.b. IF	COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE N/A				
10.00	MPAIGN ADDRESS AND PHONE	2200		Early or	Table 5	MENTAL AND CARRO			
	eet or Rural Route	City		State	Zip Code	Phone			
		Portland		TN	37148	270-935-0984			
	NDIDATE'S HOME ADDRESS (if diffe eet or Rural Route	rent than 4.a.) City		State	Zip Code	Phone			
5. OF	FICE SOUGHT (include district number	er, if applicable)	6. NAME C	OF POLITICAL	TREASURER (may I	be candidate)			
County	Commissioner, District 3		Mark A. Harrison						
	TEGORY OR REPORT (Check one)		(1) (1) (1) (1) (1)	The state of the s					
		X							
	FIRST SECOND THIRD PARTER QUARTER QUART		PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTA	YEAR-END L SUPPLEMENTAL			
	GINNING DATE OF REPORTING PERIOD				ORTING PERIOD	E OUT LEWENTAL			
(October 1, 2022		Janu	ary 15, 202	3				
9. (Che	ck one)								
	☐ This campaign is exempt from det								
b.	This campaign is required to file a and/or expenditures total more that	detailed financial disc an \$1,000 for this repo	closure because orting period.	contributions (including in-kind) rece	eived total more than \$1,000			
ac Fi	ve do solemnly swear or affirm that the curate accounting of campaign contribution and disclosure Act. Additionally, I/nefit of the candidate of or any other signature of candidate	outions and expenditur we swear or affirm tha	res required to be at no campaign c	e reported by ontributions ha federal intern	he candidate committed ave been expended to all revenue code.	ee by the Campaign			
11 \\/	TNESS SIGNATURE				William III				
_0	manda Moves signature of witness	1/13/2	3 4	mana sign	la Have) 413/23 date			
12. SU			EILED						
a.	BALANCE ON HAND LAST REPORT	AM	FILED	PM	\$ <u>3,958.19</u>				
b.	TOTAL RECEIPTS THIS PERIOD	and the same of th			\$ 0.00				
490	TOTAL DISBURSEMENTS THIS PERIO	20	MANUEL COLLEGE		\$ 3,000.00				
C.	TOTAL DISBURSEMENTS THIS PERIO	JU8U	MNER COUNT	SIOM	9				
d.	BALANCE ON HAND (12.a. plus 12.	b. minus 12.c.)	I ION COMMIS			ş <u>958.19</u>			
-			741		7 - 4 D 199 - 1				
e.	TOTAL LOANS OUTSTANDING					\$ <u>0.00</u>			
			100	7					
f.	TOTAL OBLIGATIONS OUTSTANDIN	G				\$ 0.00			



ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE Mark A. Harrison								2. REPORT COVERING THE PERIOD TO: 10/1/2022 1/15/2023					
3. COMPLETE THE APPR	ROPRIATE ITEMS	FOR EACH	HITEMI	ZED LOAN	(loans totaling n	nore than \$100	from any s	source	during the pe	riod)			
Complete the Following for the													
First Name Mark						Loans Receive	Received		Loan Payments		Outstanding Loan Balance (End of Period)		
Last Name/Organization Name Harrison				3,000		;	3,00	00.00					
Address 105 Bloomsbury Drive				Loan Received For: Date of Loan ✓ Primary Election ✓ General Election									
Portland	State TN	Zip Code 37148			Runoff (Local Elections Only)								
	List All End	orsers or Gua	arantors	for Above Loa	an (If more spa	ice is needed	d please a	attach	a page)				
First Name Middle			me		First Name			Middle Name					
Last Name/Organization Name	Last Name/Organization Name				Last Name/Organization Name								
Address	Address				Address								
City	State	State Zip Code		City					State		Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding								
First Name	st Name Middle Name				First Name					Middle Name			
Last Name/Organization Name				-	Last Name/Organization Name								
Address		17 (3%)	74	4	Address								
City	State Zip			Code	City					State		Zip Code	
Amount Guaranteed Outstanding					Amount Guara	inteed Outstand	ding	18	87		Т		
First Name Middle Name					First Name Middle Name							е	
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City	State	Zip Code		City	City			100	State		Zip Code		
Amount Guaranteed Outstanding					Amount Guara	inteed Outstand	ding				77		
First Name Middle Name			1811	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			T _a		Amount Guara	inteed Outstand	ding						
4. Totals for all Loans (complete on last page of itemized loans) (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.)					Outstanding L (Beginning		Loar Rece				standing Loan Balance (End of Period)		

