

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/23/22</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>BEN HARRIS</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>5/3/22</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1051 EDGEWATER CIRCLE GALLATIN TN 37066 615-804-2588</u>		
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) <u>COUNTY COMMISSION DISTRICT 10</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>AMY HARRIS</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input checked="" 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>4/1/22</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>4/23/22</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>Benjamin Harris</u> <u>4-25-22</u> <u>Amy Harris</u> <u>4-25-22</u> signature of candidate date signature of political treasurer date		
11. WITNESS SIGNATURE <u>Chin Alex</u> <u>4/24/22</u> <u>Alle Alexander</u> <u>4/24/22</u> signature of witness date signature of witness date		
12. SUMMARY		
a. BALANCE ON HAND LAST REPORT		\$ <u>2,468.02</u>
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>0</u>
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>1,100.67</u>
d. BALANCE ON HAND (12 a. plus 12.b. minus 12.c.)		\$ <u>1,367.35</u>
FILED		
e. TOTAL LOANS OUTSTANDING		\$ <u>500.00</u>
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Ben Harris		14. REPORT COVERING THE PERIOD FROM: 4/11/22 TO: 4/23/22	
RECEIPTS			
15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)		\$	<u>0</u>
b. Itemized Contributions (over \$100 from each source this period)		\$	<u>0</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$	<u>0</u>
16. LOANS RECEIVED THIS REPORTING PERIOD		\$	<u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD		\$	<u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$	<u>0</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)			
SIGN POSTS	\$	<u>73.41</u>	
.....	\$		
.....	\$		
.....	\$		
.....	\$		
.....	\$		
.....	\$		
.....	\$		
.....	\$		
.....	\$		
Total of Expenditures (\$100 or less each payee)		\$	<u>73.41</u>
b. Itemized Expenditures (Over \$100 each payee this period)		\$	<u>1,027.26</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$	<u>1,100.67</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>1,100.67</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)		\$	<u>0</u>
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)		\$	<u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)		\$	<u>0</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BEN HARRIS				2. REPORT COVERING THE PERIOD			
				FROM: 4/11/22	TO: 4/25/22		
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		Address		CAMPAIGN MAILING & SUPPLIES		\$ 508.64	
QUALITY PRINTING		141 E. EASTLAND ST					
City	State	Zip Code					
GALLATIN	TN	37066					
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		Address		STAMPS		\$280.00	
USPS		380 MAPLE ST					
City	State	Zip Code					
GALLATIN	TN	37066					
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		Address		FOOD FOR CAMPAIGN WORKERS		\$118.62	
HG Hills		200 W. BROADWAY					
City	State	Zip Code					
GALLATIN	TN	37066					
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name		Address		GAS		\$120.00	
FOXLAND MARKET		200 DOUGLAS BEND RD					
City	State	Zip Code					
GALLATIN	TN	37066					
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						\$1,027.00	
(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.)							

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BEN HARRIS				2. REPORT COVERING THE PERIOD FROM: 4/11/22 TO: 4/23/22				
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 BEN + AMY		Middle Name		Outstanding Loan Balance (Beginning of Period) \$ 500	Loans Received 0	Loan Payments 0	Outstanding Loan Balance (End of Period) \$500	
Last Name/Organization Name HARRIS				Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan 1/31/22		
Address 1051 EDGEWATER CIRCLE				City GALLATIN		State TN	Zip Code 37066	
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				
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 15. 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 Loan Balance (Beginning of Period) \$500	Loans Received 0	Loan Payments 0	Outstanding Loan Balance (End of Period) \$500	

