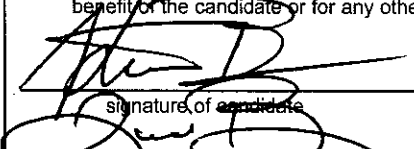
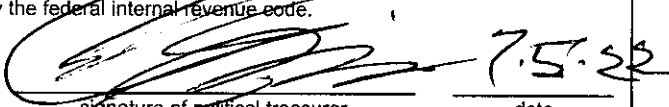
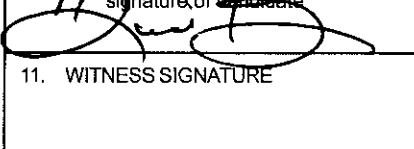
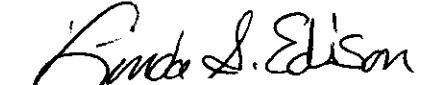


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7-5-22	2.a. NAME OF CANDIDATE OR COMMITTEE Keith Bean for Sheriff		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 224 Griffin LN Gallatin, TN 37066 615-519-2844			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone Same			
5. OFFICE SOUGHT (include district number, if applicable) Sheriff Sumner County		6. NAME OF POLITICAL TREASURER (may be candidate) Carl Edison	
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 4-23-22		8.b. ENDING DATE OF REPORTING PERIOD 6-30-22	
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.			
 signature of candidate		 signature of political treasurer	
7-5-22 date		7-5-22 date	
11. WITNESS SIGNATURE		11. WITNESS SIGNATURE	
 signature of witness		 signature of witness	
7-5-22 date		7-5-22 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ 2981.²³	
b. TOTAL RECEIPTS THIS PERIOD		\$ 7700.⁰⁰	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 10,676.⁹²	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 4.⁴¹	
SUMNER COUNTY ELECTION COMMISSION			
e. TOTAL LOANS OUTSTANDING		\$ 0	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ 0	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Keith Bean for Sheriff	14. REPORT COVERING THE PERIOD FROM: <u>4-23-22</u> TO: <u>6-30-22</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>50.</u> ¹¹⁸
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>7700.</u> ¹¹⁶
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ _____
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.)	\$ _____
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>Bank service charge</u>	\$ <u>10.</u> ⁰⁰
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>10.</u> ⁰⁰
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>10666.</u> ²⁷
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>10676.</u> ²⁷
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>10676.</u> ²⁷
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.)	\$ <u>0</u>
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 item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KEITH BEAN FOR SHERIFF			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	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name CODY	Middle Name	Purpose of Expenditure VIDEO-PICS ON 5-3-22 (ELECTION NITE)	Amount of Expenditure 300.00	
Last Name/Business Name FERRY				
Address 143 ST. ANDREWS				
City HEADERSVILLE	State TN	Zip Code 37075		
First Name	Middle Name	Purpose of Expenditure MEALS ON 5-3-22 (ELECTION NITE)	Amount of Expenditure 245.62	
Last Name/Business Name CAMPIONES				
Address 179 HANCOCK ST. #208				
City GALLATI	State TN	Zip Code 37066		
First Name	Middle Name	Purpose of Expenditure ADVERTISING MAILOUTS 5-10-22	Amount of Expenditure 10,075.36	
Last Name/Business Name AMERICAN SOLUTIONS BUSINESS				
Address 8479 SOLUTION CENTER				
City CHICAGO	State IL	Zip Code 60677-8001		
First Name	Middle Name	Purpose of Expenditure DONATION	Amount of Expenditure 45.84	
Last Name/Business Name ASHLEY'S PLACE				
Address 315 W. SMITH ST.				
City GALLATI	State TN	Zip Code 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 (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.)			10666.⁸²	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KEITH BEAN FOR SHERIFF		2. REPORT COVERING THE PERIOD FROM: 4-22-22 TO: 6-30-22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name DAVID & CINDY	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$1,000.00
Last Name/Organization Name BEAN			
Address 339 NEALS LN.			
City GALATIN	State TN	Zip Code 37066	Date of Contribution 4-27-22
Occupation SELF EMPLOYED - CPA		Aggregate This Election	
Employer			
First Name KEITH	Middle Name A.	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution 6,700.00
Last Name/Organization Name BEAN			
Address GRIFFIN LN			
City GALATIN	State TN	Zip Code 37066	Date of Contribution 5-9-22
Occupation RETIRED		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Date 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.)			7700.00