

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>7/7/22</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>BEN HARRIS</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>8/4/22</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1051 EDGEWATER CIRCL</u> <u>GALLATIN</u> <u>TN</u> <u>37066</u> <u>615-804-2583</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 COMMISSIONER 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 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 <u>4/23/22</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>6/30/22</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>Ben Harris</u> _____ <u>Amy Harris</u> <u>7-7-22</u> signature of candidate date signature of political treasurer date	
11. WITNESS SIGNATURE <u>Chris Alexander</u> <u>7/7/22</u> <u>Holly Alexander</u> <u>7/7/22</u> signature of witness date signature of witness date	
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>1,367.⁵⁵</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>500.⁰⁰</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>1,840.⁴⁷</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>26.⁵⁸</u>
AM FILED PM	
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
JUL 08 2022	
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>
SUMNER COUNTY ELECTION COMMISSION	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Ben Hanzis</u>	14. REPORT COVERING THE PERIOD	
	FROM: <u>4/30/22</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) \$ 0

b. Itemized Contributions (over \$100 from each source this period) \$ 500.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 500.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 500.00

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>CAMPAIN FOOD - ELECTION DAY</u>	\$ <u>78.00</u>
<u>SPAMMEREX BOUTH - SLIT</u>	\$ <u>70.00</u>
<u>GAS</u>	\$ <u>95.00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ 243.00

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1,097.47

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1340.47

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 500.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1840.47

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.) \$ 0

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 in item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BEN HARRIS		2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$10
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name SUMMIT ASSOCIATION OF REALTORS		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	\$500.00
Address 35 EXECUTIVE PARK DR. SUITE B		<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE	State TN	Zip Code 37075	Date of Contribution 4/28/22
Occupation REALTOR ASSOCIATION		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>			\$500.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Ben HARRIS		2. REPORT COVERING THE PERIOD FROM: <u>4/25/22</u> TO: <u>6/30/22</u>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <u>✓</u>
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 Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
City		Zip Code	
Occupation		Employer	
		Description of In-Kind Contribution	
Value of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
City		Zip Code	
Occupation		Employer	
		Description of In-Kind Contribution	
Value of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
City		Zip Code	
Occupation		Employer	
		Description of In-Kind Contribution	
Value of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
City		Zip Code	
Occupation		Employer	
		Description of In-Kind Contribution	
Value of In-Kind Contribution		Aggregate this Election	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution	
City		State	
City		Zip Code	
Occupation		Employer	
		Description of In-Kind Contribution	
Value of In-Kind Contribution		Aggregate this Election	
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)			<u>0</u>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE BEN HARRIS			2. REPORT COVERING THE PERIOD		
			FROM: 4/23/22	TO: 6/30/22	
			Amount \$0		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					
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 QUALITY PRINTING		CAMPAIGN MAILERS	\$251.85		
Address 141 E. ENGLAND ST					
City GALLATIN	State TN				Zip Code 37066
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name USPS		STAMPS	\$352.00		
Address 380 MAPLE ST					
City GALLATIN	State TN				Zip Code 37066
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name GARCIA'S SPORTS GRILL		VICTORY PARTY!	\$293.62		
Address 971 MEMORY LANE SUITE 106					
City GALLATIN	State TN				Zip Code 37066
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name NUMBER 1 VOLUNTEER FIRE DEPARTMENT		DONATION	\$200.00		
Address 1314 DOUGLAS BEND ROAD					
City GALLATIN	State TN				Zip Code 37066
First Name BEN + AMY	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name HARRIS		LOAN REPAYMENT	\$500		
Address 1051 EDGEWATER CIRCLE					
City GALLATIN	State TN				Zip Code 37066
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES			\$1,597.47		
(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 HANZIS				2. REPORT COVERING THE PERIOD FROM: 4/23/22 TO: 6/30/22							
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 \$500	Outstanding Loan Balance (End of Period) \$0.00			
Last Name/Organization Name HANZIS				Address 1051 EDgewater Circle				Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Date of Loan 1/31/22	
City GALATIEN		State TN	Zip Code 37060		<input type="checkbox"/> Runoff (Local Elections Only)						
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) <small>(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.)</small>				Outstanding Loan Balance (Beginning of Period) \$500		Loans Received 0	Loan Payments \$500	Outstanding Loan Balance (End of Period) \$0			



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Ben Harzlis				FROM: 4/23/22		TO: 6/30/22	
3. 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							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
4. TOTALS							Ø
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							