

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4/7/22</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>BEN HARRIS</u>				
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE <u>5/3/22</u>		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route <u>1051 EDGEWATER CIRCLE</u>		City <u>GALLATIN</u>	State <u>TN</u>	Zip Code <u>37066</u>	Phone <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 COMMISSION DISTRICT 10</u>			6. NAME OF POLITICAL TREASURER (may be candidate) <u>AMY HARRIS</u>		
7. CATEGORY OR REPORT (Check one)					
<input checked="" type="checkbox"/> FIRST QUARTER		<input 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>1/16/22</u>			8.b. ENDING DATE OF REPORTING PERIOD <u>4/11/22</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>[Signature]</u> signature of candidate		<u>4/7/22</u> date		<u>[Signature]</u> signature of political treasurer	
				<u>4-6-22</u> date	
11. WITNESS SIGNATURE					
<u>[Signature]</u> signature of witness		<u>4/7/22</u> date		<u>[Signature]</u> signature of witness	
				<u>4-7-22</u> date	
12. SUMMARY					
<b>FILED</b>					
a. BALANCE ON HAND LAST REPORT		AM		PM	
				\$ <u>0</u>	
b. TOTAL RECEIPTS THIS PERIOD		<u>APR 08 2022</u>		\$ <u>6,545.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		<u>SUMNER COUNTY</u>		\$ <u>4,076.98</u>	
		<u>ELECTION COMMISSION</u>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>2,468.02</u>			
e. TOTAL LOANS OUTSTANDING		\$ <u>500.00</u>			
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>			





## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>BEN HARRIS</b>		2. REPORT COVERING THE PERIOD FROM: <b>1/16/22</b> TO: <b>4/11/22</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>\$0</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <b>DANNY</b>	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  <b>\$ 250</b>
Last Name/Organization Name <b>HALE</b>			
Address <b>761 PLANTATION BLVD</b>			
City <b>GALLATIN</b>	State <b>TN</b>	Zip Code <b>37066</b>	Date of Contribution  <b>3/30/22</b>
Occupation <b>RESIDENTIAL PROPERTY MANAGER</b>		Aggregate This Election	
Employer <b>HALO REAL ESTATE</b>			
First Name <b>BOB</b>	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  <b>\$ 250</b>
Last Name/Organization Name <b>GOODALL</b>			
Address <b>393 MAPLE ST</b>			
City <b>GALLATIN</b>	State <b>TN</b>	Zip Code <b>37066</b>	Date of Contribution  <b>3/7/22</b>
Occupation <b>REAL ESTATE</b>		Aggregate This Election	
Employer <b>GOODALL HOMES</b>			
First Name <b>CAL</b>	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  <b>\$ 250</b>
Last Name/Organization Name <b>GENTLY</b>			
Address <b>170 E. MAIN ST</b>			
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution  <b>3/23/22</b>
Occupation <b>PRESIDENT</b>		Aggregate This Election	
Employer <b>SOUTHEASTERN BUILDING</b>			
First Name <b>BRADLEY</b>	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  <b>\$ 500</b>
Last Name/Organization Name <b>JOLLY</b>			
Address <b>236 WOODLAKE DR</b>			
City <b>GALLATIN</b>	State <b>TN</b>	Zip Code <b>37066</b>	Date of Contribution  <b>2/24/22</b>
Occupation <b>DENTIST</b>		Aggregate This Election	
Employer <b>ASPEN DENTAL</b>			
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.)			<b>\$ 1,250</b>

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <span style="font-size: 1.2em; font-family: cursive;">Ben Harris</span>				2. REPORT COVERING THE PERIOD			
				FROM: 1/16/22	TO: 4/11/22		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount \$1,250		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name <span style="font-size: 1.2em; font-family: cursive;">Jesse</span>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <span style="font-size: 1.2em; font-family: cursive;">HUGHES</span>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$1,600	
Address <span style="font-size: 1.2em; font-family: cursive;">1031 LAKESHORE DRIVE</span>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>		State <span style="font-size: 1.2em; font-family: cursive;">TN</span>	Zip Code <span style="font-size: 1.2em; font-family: cursive;">37066</span>	Date of Contribution		Aggregate This Election	
Occupation				2/13/22			
Employer <span style="font-size: 1.2em; font-family: cursive;">RETIRED AIR FORCE</span>							
First Name <span style="font-size: 1.2em; font-family: cursive;">ANGELA</span>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <span style="font-size: 1.2em; font-family: cursive;">MCCUSKEY</span>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$250	
Address <span style="font-size: 1.2em; font-family: cursive;">731 PLANTATION BLVD</span>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>		State <span style="font-size: 1.2em; font-family: cursive;">TN</span>	Zip Code <span style="font-size: 1.2em; font-family: cursive;">37066</span>	Date of Contribution		Aggregate This Election	
Occupation				4/4/22			
Employer <span style="font-size: 1.2em; font-family: cursive;">RETIRED</span>							
First Name <span style="font-size: 1.2em; font-family: cursive;">BT CRAIG</span>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <span style="font-size: 1.2em; font-family: cursive;">HAYES</span>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$200	
Address <span style="font-size: 1.2em; font-family: cursive;">1172 NASHVILLE PIKE</span>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>		State <span style="font-size: 1.2em; font-family: cursive;">TN</span>	Zip Code <span style="font-size: 1.2em; font-family: cursive;">37066</span>	Date of Contribution		Aggregate This Election	
Occupation <span style="font-size: 1.2em; font-family: cursive;">INSURANCE AGENT</span>				4/4/22			
Employer <span style="font-size: 1.2em; font-family: cursive;">STATE FAIRM</span>							
First Name <span style="font-size: 1.2em; font-family: cursive;">BILL</span>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <span style="font-size: 1.2em; font-family: cursive;">KEMT</span>				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		\$250	
Address <span style="font-size: 1.2em; font-family: cursive;">1132 BROWNS LAKE</span>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>		State <span style="font-size: 1.2em; font-family: cursive;">TN</span>	Zip Code <span style="font-size: 1.2em; font-family: cursive;">37066</span>	Date of Contribution		Aggregate This Election	
Occupation <span style="font-size: 1.2em; font-family: cursive;">COUNTY COURT CLERK</span>				3/7/22			
Employer <span style="font-size: 1.2em; font-family: cursive;">SUMNER CO.</span>							
5. TOTAL ITEMIZED CONTRIBUTIONS					\$3,550		
(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.)							

# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>BEN HARRIS</b>			2. REPORT COVERING THE PERIOD		
			FROM: <b>1/14/22</b>	TO: <b>4/11/22</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$3,550</b>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>MATT</b>		Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>HARRIS</b>			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$250</b>
Address <b>1196 ADELICIA HAYES CT</b>			<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>GALLATIN</b>	State <b>TN</b>	Zip Code <b>37066</b>	Date of Contribution <b>3/7/22</b>		Aggregate This Election
Occupation <b>REAL ESTATE</b>					
Employer					
First Name <b>CHUCK</b>		Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>STUART</b>			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$200</b>
Address <b>1116 B LITTLETON BRANCH RD</b>			<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>CASTLETON SPRINGS</b>	State <b>TN</b>	Zip Code <b>37031</b>	Date of Contribution <b>3/7/22</b>		Aggregate This Election
Occupation <b>GALLATIN COXES ADMIN.</b>					
Employer <b>CITY OF GALLATIN</b>					
First Name <b>RON</b>		Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>WILES</b>			<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>\$250</b>
Address <b>113 ON CARRIAGE PLACE</b>			<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>2/28/22</b>		Aggregate This Election
Occupation					
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		Aggregate This Election
Occupation					
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS				<b>\$4,250</b>	
<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>					

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>BEN HARRIS</b>		2. REPORT COVERING THE PERIOD FROM: <b>11/6/22</b> TO: <b>4/11/24</b>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>\$0</b>
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 <b>APRIL</b>		Middle Name	
Last Name/Organization Name <b>BARKER</b>		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address <b>1091 KANAL FRANKLIN DRIVE</b>		Date of In-Kind Contribution <b>4/2/22</b>	
City <b>GALLATIN</b>		State <b>TN</b> Zip Code <b>37066</b>	
Occupation <b>SALES + MARKETING</b>		Employer <b>BRICKSTONE GALLATIN</b>	
		Description of In-Kind Contribution <b>HOSTED A MEET + GREET AT FOXLAND</b>	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Description of In-Kind Contribution	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Description of In-Kind Contribution	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Description of In-Kind Contribution	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution	
City		State	
Occupation		Employer	
		Description of In-Kind Contribution	
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.)			<b>\$ 660.00</b>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>BEN HAZZIS</b>			2. REPORT COVERING THE PERIOD		
			FROM: <b>1/16/22</b>	TO: <b>4/11/22</b>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>\$0</b>	
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		<b>MAILERS + DOOR HANDBILLS</b>	<b>\$890.41</b>
<b>AGGIES PRINT + COPY</b>		<b>203 W. MAW ST</b>			
City	State	Zip Code			
<b>GALLATIN</b>	<b>TN</b>	<b>37066</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		<b>YARD SIGNS</b>	<b>\$430.30</b>
<b>DOJAY COMMUNICATIONS</b>		<b>1026 LAMERBONE CT</b>			
City	State	Zip Code			
<b>HENDERSONVILLE</b>	<b>TN</b>	<b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		<b>MEET + GREET</b>	<b>\$619.99</b>
<b>GARZIA'S SPORTS GRILL</b>		<b>971 MEMOZET LAKE SUITE 106</b>			
City	State	Zip Code			
<b>GALLATIN</b>	<b>TN</b>	<b>37066</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		<b>YARD SIGNS</b>	<b>\$316.00</b>
<b>GRAZY CHEAP SIGNS .COM</b>		<b>205 NATIONAL PL UNIT 123</b>			
City	State	Zip Code			
<b>LONGWOOD</b>	<b>FL</b>	<b>32750</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		<b>T-SHIRTS, STICKERS + CARDS</b>	<b>\$537.56</b>
<b>FCI PROMOS</b>		<b>467 CHESTNUT ST</b>			
City	State	Zip Code			
<b>NASHVILLE</b>	<b>TN</b>	<b>37203</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		Address		<b>MAILING SUPPLIES</b>	<b>\$480</b>
<b>USPS</b>		<b>380 MAPLE ST</b>			
City	State	Zip Code			
<b>GALLATIN</b>	<b>TN</b>	<b>37066</b>			
5. TOTAL ITEMIZED EXPENDITURES				<b>\$3,274.26</b>	
<small>(Carry forward to item 3. of next page if additional pages of this form are used.)</small>					
<small>(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)</small>					

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <span style="font-size: 1.2em; font-family: cursive;">BEN HARRIS</span>			2. REPORT COVERING THE PERIOD	
			FROM: 1/16/22	TO: 4/11/22
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <span style="font-size: 1.2em;">\$3,274.26</span>
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 <span style="font-size: 1.2em; font-family: cursive;">PONY MANAGER + BUSINESS CONSULT</span>		<span style="font-size: 1.5em; font-family: cursive;">MAIL SUPPLIES</span>		<span style="font-size: 1.5em;">\$475.00</span>
Address <span style="font-size: 1.2em; font-family: cursive;">544 W. MAIN ST</span>				
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>	State <span style="font-size: 1.2em; font-family: cursive;">TN</span>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <span style="font-size: 1.2em; font-family: cursive;">TRACTOR SUPPLY</span>		<span style="font-size: 1.5em; font-family: cursive;">SIGN POSTS</span>		<span style="font-size: 1.5em;">\$115.28</span>
Address <span style="font-size: 1.2em; font-family: cursive;">670-A NASHVILLE PIKE</span>				
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>	State <span style="font-size: 1.2em; font-family: cursive;">TN</span>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <span style="font-size: 1.2em; font-family: cursive;">FOXLAND MARKET</span>		<span style="font-size: 1.5em; font-family: cursive;">GAS</span>		<span style="font-size: 1.5em;">\$160.00</span>
Address <span style="font-size: 1.2em; font-family: cursive;">200 DOUGLAS BEND RD</span>				
City <span style="font-size: 1.2em; font-family: cursive;">GALLATIN</span>	State <span style="font-size: 1.2em; font-family: cursive;">TN</span>			
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		
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES <small>(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.)</small>				<span style="font-size: 1.5em;">\$4,024.54</span>



## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="text-align: center; font-size: 1.5em; font-family: cursive;">BEN HARRIS</div>	2. REPORT COVERING THE PERIOD FROM: 1/16/22 TO: 4/11/22
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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) \$0	Loans Received \$500	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		Date of Loan 1/31/22	
Address 1051 EDGEWATER CIRCLE		<input type="checkbox"/> Runoff (Local Elections Only)			
City GALLATIN	State TN	Zip Code 37064			

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			
City	State	Zip Code	City
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address			
City	State	Zip Code	City
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address			
City	State	Zip Code	City
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name	Middle Name	First Name	Middle Name
Last Name/Organization Name		Last Name/Organization Name	
Address			
City	State	Zip Code	City
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) \$0	Loans Received \$500	Loan Payments \$0	Outstanding Loan Balance (End of Period) \$500
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## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
<div style="font-size: 1.5em; font-weight: bold;">BEN HARTZIS</div>			FROM: 1/1/22		TO: 4/1/22	
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						
<b>4. TOTALS</b> (Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						