



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4-10-2026 2.a. Candidate or Committee Name: Greg Beck Campaign
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5-5-2026
4. Campaign Address: 6224 Laramie CR
City: Chattanooga State: TN Zip Code: 37421 Phone: 423-883-3632
5. Candidate Home Address: _____
City: _____ State: _____ Zip Code: _____ Phone: _____
Candidate Email Address: Gregorybeck412@AOL.com
6. Office Sought: (include district number, if applicable) County Commissioner District 5
7. Name of Political Treasurer (may be candidate): Brenda E. Jones
Political Treasurer Email Address: Brenda.Jones@delta.com
8. Category or Report: (check one)
☒ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ 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.
11. 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.

Greg Beck
Candidate Signature

4-10-26
Date

Brenda E Jones
Political Treasurer Signature

4-10-2026
Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- a. Balance On Hand Last Report \$ 0
- b. Total Receipts This Period \$ 6375.00
- c. Total Disbursements This Period \$ 3559.63
- d. Balance On Hand (12.a. plus 12.b. minus 12.c.) \$ 2815.37
- e. Total Loans Outstanding \$ 0
- f. Total Obligations Outstanding \$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Greg Beck

14. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period)..... \$ 375⁰⁰
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period)..... \$ 6000, 00
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period..... \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.)..... \$ 6375⁰⁰

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 3559.63
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period..... \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 3559.63

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period..... \$ 0
- b. Itemized In-Kind Contributions Received This Period..... \$ 0
- c. Total In-Kind Contributions Received This Period..... \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.)..... \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Greg Beck
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 6375⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Kerri Middle Name: Parks Last Name: Paty
Address: 306 Sweetbriar Ave City: Chattanooga State: TN Zip Code: 37411
Occupation: Attorney Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100⁰⁰ Date of Contribution: 4/7/2026 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: James Middle Name: _____ Last Name: Roberts
Address: 4924 Lake Haven Dr City: Chattanooga State: TN Zip Code: 37416
Occupation: Retired Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 50⁰⁰ Date of Contribution: 4/7/2026 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Edwina Middle Name: _____ Last Name: Cohen
Address: 533 Alexian Way City: Signal Mountain State: TN Zip Code: 37377
Occupation: Retired Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100⁰⁰ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Charlyn Middle Name: _____ Last Name: Brooks
Address: 863N. Orchard Knob Ave City: Chattanooga State: TN Zip Code: 37404
Occupation: Retired Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 25⁰⁰ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 275⁰⁰

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Greg Beck
2. Reporting Period: Start Date: 01/16/2026 End Date: 03/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 275⁰⁰

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Janetta Middle Name: _____ Last Name: Patterson
Address: 5153 Mimosa Cir City: Chattanooga State: TN Zip Code: 37416
Occupation: Educator Employer: School System
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100⁰⁰ Date of Contribution: 4/19/2026 Aggregate This Election: \$ _____

Business or Organization Name: Home Builders Association of Chattanooga OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3221 Harrison Pike City: Chattanooga State: TN Zip Code: 37406
Occupation: Home Builders Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 4500⁰⁰ Date of Contribution: 4-17-2026 Aggregate This Election: \$ _____

Business or Organization Name: Tenn Realtors Political Action Committee OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 901 19th Ave South City: Nashville T State: TN Zip Code: 37212
Occupation: _____ Employer: _____
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1500⁰⁰ Date of Contribution: _____ Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ 6375⁰⁰

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Greg Beck
2. Reporting Period: Start Date: 01-16-2026 End Date: 03-31-2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3559.63

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Vision Graphics OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1415 Main Street City: Chattanooga State: TN Zip Code: 37404
Purpose of Expenditure: T-Shirts (Re Elect Greg Beck)
Amount of Expenditure: \$ 863⁰⁰ Date of Expenditure: \$ 3-22-2026

Business or Organization Name: Best Buy - Geek Squad OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: Hamilton Place City: Chattanooga State: TN Zip Code: 37421
Purpose of Expenditure: Data backup - windows reinstall for computer
Amount of Expenditure: \$ 239.97 Date of Expenditure: \$ _____

Business or Organization Name: Advantage Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 4031 Brainerd Rd City: Chattanooga State: TN Zip Code: 37411
Purpose of Expenditure: One Way Vision door Poster - Re Elect Beck
Amount of Expenditure: \$ 233.58 Date of Expenditure: \$ 3/29/2026

Business or Organization Name: V Francis Events OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 6925 Shallowford Rd City: Chattanooga State: TN Zip Code: 37421
Purpose of Expenditure: Kick-off Campaign event
Amount of Expenditure: \$ 200⁰⁰ Date of Expenditure: \$ 2-20-2026

Business or Organization Name: Radio Station OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: Radio Ad - for Greg Beck
Amount of Expenditure: \$ 1620⁰⁰ Date of Expenditure: \$ 4-16-2026

Total Expenditures: \$ 3156.55

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate/ or Committee Name: Greg Beck
2. Reporting Period: Start Date: 01-16-2026 End Date: 03-31-2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 3156.55

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Home Depot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 7421 Commons Blvd City: Chattanooga State: TN Zip Code: 37421
Purpose of Expenditure: Supplies for Campaign
Amount of Expenditure: \$ 239.50 Date of Expenditure: \$ 4-11-2026

Business or Organization Name: Subway - Burger King - Circle K OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: TN Zip Code: _____
Purpose of Expenditure: Food - Drinks
Amount of Expenditure: \$ 163.58 Date of Expenditure: \$ 4-17-2026

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ 3559.63

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

N/A

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ _____

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ _____

(Carry forward to the 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 the summary on first page.)

N/A

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Outstanding Loan Balance (Beginning) \$ _____

Loans Received \$ _____

Loan Payments \$ _____

Outstanding Loan (End) \$ _____

Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ _____

Loans Received \$ _____

Loan Payments \$ _____

Outstanding Loan (End) \$ _____

N/A

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: _____
2. Reporting Period: Start Date: _____ End Date: _____
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
\$	\$	\$	\$