



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/28/2026 2.a. Candidate or Committee Name: Drason Beasley
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 2022 Memorial Dr
City: Franklin State: TN Zip Code: 37064 Phone: 6154788260
5. Candidate Home Address: 2022 Memorial Drive
City: Franklin State: TN Zip Code: 37064 Phone: 6154788260
Candidate Email Address: drasonbeasley@gmail.com
6. Office Sought: (include district number, if applicable) County Commissioner - Dist 12
7. Name of Political Treasurer (may be candidate): Steve Smith
Political Treasurer Email Address: drasonbeasley@gmail.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: 4/1/2026 End Date: 4/25/2026
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.

Candidate Signature

Date

Political Treasurer Signature

Date

Witness Signature

Date

Witness Signature

Date

12. Summary:

- | | |
|---|----------------------|
| a. Balance On Hand Last Report | \$ <u>\$699.36</u> |
| b. Total Receipts This Period | \$ <u>\$4,125.00</u> |
| c. Total Disbursements This Period | \$ <u>\$2,587.66</u> |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ <u>\$2,236.70</u> |
| e. Total Loans Outstanding | \$ <u>\$0.00</u> |
| f. Total Obligations Outstanding | \$ <u>\$0.00</u> |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Drason Beasley

14. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(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) \$ \$4,125.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$4,125.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$2,587.66
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$2,587.66

17. In-Kind Contributions:

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

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Drason Beasley
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Jack Pac **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 915 Lewisburg Pk City: Franklijn State: TN Zip Code: 37064
Occupation: politician Employer: State of TN
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1 000 0 Date of Contribution: 4/12/2026 Aggregate This Election: \$ \$1.000.0

Business or Organization Name: _____ **OR**
First Name: charles Middle Name: _____ Last Name: Pareiqis
Address: 1009 Cedarview lane City: Franklin State: TN Zip Code: 37067
Occupation: self employed Employer: self employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$300 00 Date of Contribution: 4/1/2026 Aggregate This Election: \$ \$300.00

Business or Organization Name: Charles Sargent Legacy Fund **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 306 PUBlic Square City: Franklin State: TN Zip Code: 37064
Occupation: non profit Employer: non profit
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$500.00 Date of Contribution: 4/11/2026 Aggregate This Election: \$ \$500 00

Business or Organization Name: _____ **OR**
First Name: Jerry Middle Name: _____ Last Name: Sharber
Address: 183 Sturbridge Drive City: franklin State: TN Zip Code: 37064
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/9/2026 Aggregate This Election: \$ \$100 00

Total Contributions: \$ \$1,900.00
(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: Drason Beasley
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$1,900.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Becky Middle Name: _____ Last Name: Sharber
Address: 183 Sturbridge Drive City: franklin State: TN Zip Code: 37064
Occupation: retired Employer: retired
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 4/9/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Patrick Middle Name: _____ Last Name: Baggett
Address: 422 Murfreesboro Rd City: Franklin State: TN Zip Code: 37064
Occupation: self employed Employer: self employed
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**
First Name: Greg Middle Name: _____ Last Name: Caesar
Address: 331 Stillcreek Drive City: Franklin State: TN Zip Code: 37064
Occupation: unknown Employer: unknown
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$200.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: Lee Reeves for State House **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1402 Championship Blvd City: Franklin State: TN Zip Code: 37064
Occupation: politician Employer: politician
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$150.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$150.00

Total Contributions: \$ \$2,550.00
(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: Drason Beasley
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$2,550.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Michael Fort Business Operating **OR**

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

Address: 517 Cummins Street City: Franklin State: TN Zip Code: 37064

Occupation: self employed Employer: self employed

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/16/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: William Middle Name: _____ Last Name: Holloway

Address: 4421 Buchanan Lane City: franklin State: TN Zip Code: 37064

Occupation: unknown Employer: unknown

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$500.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$500.00

Business or Organization Name: _____ **OR**

First Name: Ken Middle Name: _____ Last Name: Moore

Address: 725 W Main Street #202 City: franklin State: TN Zip Code: 37064

Occupation: mayor Employer: City of Franklin

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/14/2026 Aggregate This Election: \$ \$250.00

Business or Organization Name: _____ **OR**

First Name: Matt Middle Name: _____ Last Name: Brown

Address: 821 Walden Drive City: franklin State: TN Zip Code: 37064

Occupation: self employed Employer: self employed

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$250.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$250.00

Total Contributions: \$ \$4,050.00

(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: Drason Beasley
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$4,050.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Robin Middle Name: _____ Last Name: Baldree
Address: 6300 Arno Road City: franklin State: TN Zip Code: 37064
Occupation: unk Employer: unk
Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ \$75.00 Date of Contribution: 4/15/2026 Aggregate This Election: \$ \$75.00

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: \$ _____

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: \$ _____

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: \$ \$4,125.00
(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: Drason Beasley
2. Reporting Period: Start Date: 4/1/2026 End Date: 4/25/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

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: Caliber Contact **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: place holder City: franklin State: TN Zip Code: 37067
Purpose of Expenditure: Campaign Mailer
Amount of Expenditure: \$ \$2,587.66 Date of Expenditure: \$ 4/24/2026

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: \$ _____

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: \$ \$2,587.66

(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.)