CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 4/16/2026 2.a. Candidate or Committee Name: Drason G Beasley

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026

4. Campaign Address: 2022 Memorial Drive

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: 2/6/2026 End Date: 3/31/2026

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.

Candidate Signature	Date	Political Treasurer Signature	Date
		CB7C-4424-BFAA-BA6 04/16/26 - 8:56 PM	
Witness Signature	Date	Witness Signature	Date

12. Summary:

a.	Balance On Hand Last Report	$ $0.00
b.	Total Receipts This Period	$ $2,102.00
c.	Total Disbursements This Period	$ $1,402.64
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ $699.36
e.	Total Loans Outstanding	$ $0.00
f.	Total Obligations Outstanding	$ $0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Drason G Beasley

14. Reporting Period: Start Date: 2/6/2026 End Date: 3/31/2026

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ $2.00
(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) ..... $ $2,100.00

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.) ..... $ $2,102.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ $1,402.64
(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.) ..... $ $1,402.64

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 G Beasley

2. Reporting Period: Start Date: 2/6/2026 End Date: 3/31/2026

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: _____ **OR**

First Name: Sonya Middle Name: Gay Last Name: Stokes-Beasley

Address: 2022 memorial drive City: franklin State: TN Zip Code: 37064

Occupation: psychotherapist Employer: Odyssey Behavioral Health

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

Amount of Contribution: $ $100.00 Date of Contribution: 2/6/2026 Aggregate This Election: $ $100.00

Business or Organization Name: Jack Pac **OR**

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

Address: 915 Lewisburg Pike City: Franklin State: TN Zip Code: 37064

Occupation: state senator Employer: state of TN

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

Amount of Contribution: $ $500.00 Date of Contribution: 2/21/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Kelly Middle Name: _____ Last Name: Beasley

Address: 4440 Peytonsville Rd City: franklin State: TN Zip Code: 37064

Occupation: business owner Employer: self employed

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/10/2026 Aggregate This Election: $ $500.00

Business or Organization Name: _____ **OR**

First Name: Jake Middle Name: _____ Last Name: McCalmon

Address: 5105 Aberleigh Lane City: franklin State: TN Zip Code: 37064

Occupation: business owner Employer: self employed

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

Amount of Contribution: $ $500.00 Date of Contribution: 3/10/2026 Aggregate This Election: $ $500.00

Total Contributions: $ $1,600.00

(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 G Beasley

2. Reporting Period: Start Date: 2/6/2026 End Date: 3/31/2026

3. Total campaign contributions from preceding page (enter $0 if first page) $ $1,600.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Steve Middle Name: G Last Name: Smith

Address: 404 Chatsworth Ct City: franklin State: TN Zip Code: 37064

Occupation: retired Employer: n/a

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/4/2026 Aggregate This Election: $ $250.00

Business or Organization Name: _____ **OR**

First Name: Josh Middle Name: _____ Last Name: Brown

Address: 4316 Belle Mina Lane City: franklin State: TN Zip Code: 37064

Occupation: chamber of Commerce Employer: State of TN

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

Amount of Contribution: $ $250.00 Date of Contribution: 3/31/2026 Aggregate This Election: $ $250.00

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: $_____

Total Contributions: $ $2,100.00

(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 G Beasley

2. Reporting Period: Start Date: 2/6/2026 End Date: 3/31/2026

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: ______ **OR**

First Name: Brian Middle Name: ______ Last Name: Floyd

Address: 402 Brick Path Ln City: franklin State: TN Zip Code: 37064

Purpose of Expenditure: order of campaign road signs

Amount of Expenditure: $ $1,402.64 Date of Expenditure: $ 3/17/2026

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: $ ______

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: $ $1,402.64

(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.)