



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

RECEIVED
JUL 17 2023
WILSON COUNTY
ELECTION COMMISSION
Km
10:45

1. Date: 7/17/23 2.a. Candidate or Committee Name: Robert C. Bryan
2.b. If Committee, Name of Candidate: _____ 3. Election Date: 2023
4. Campaign Address: PO Box 803
City: Lebanon State: TN Zip Code: 37088-0803 Phone: 615-574-3426
5. Candidate Home Address: 424 Walter Morris Road
City: Lebanon State: TN Zip Code: 37087 Phone: 615-574-3426
Candidate Email Address: _____
6. Office Sought: (include district number, if applicable) Sheriff
7. Name of Political Treasurer (may be candidate): Charles C. Bryan
Political Treasurer Email Address: _____

8. Category or Report: (check one)

- ☐ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☒ Mid-Year Supplemental ☐ Year-End Supplemental

9. Reporting Period: Start Date: JAN 16 2023 End Date: JUN 30 2023

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.

Robert C. Bryan 7-17-23
Candidate Signature Date

Charles C. Bryan 7-17-2023
Political Treasurer Signature Date

Lisa Bennett 7/17/23
Witness Signature Date

James Hazzell 7-17-2023
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report.....	\$	<u>33,425.71</u>
b. Total Receipts This Period.....	\$	<u>361.06</u>
c. Total Disbursements This Period.....	\$	<u>6,849.10</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$	<u>26,937.67</u>
e. Total Loans Outstanding.....	\$	<u>0</u>
f. Total Obligations Outstanding	\$	<u>0</u>

SUMMARY PAGE - CANDIDATE

RECEIVED

JUL 17 2023

WILSON COUNTY
ELECTION COMMISSION

13. Name of Candidate or Committee:

Robert C. Bryan

14. Reporting Period:

Start Date:

1-16-23

End Date:

6-30-23

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 100.00
(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) \$ 261.06
- 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.) \$ 361.06

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 6,849.10
(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.) \$ 6,849.10

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

RECEIVED
JUL 17 2023
WILSON COUNTY
ELECTION COMMISSION

1. Candidate or Committee Name: Robert C. Bryan
2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Embassy Suites OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1200 Conference Ctr. Blvd. City: Murfreesboro State: TN Zip Code: 37129
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 261.06 Date of Contribution: 2/14/23 Aggregate This Election: \$ _____

Business or Organization Name: Sherry's Hope OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 135 Legends Dr. City: Lebanon State: TN Zip Code: 37087
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 4/11/23 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: \$ 361.06

(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

RECEIVED

1. Candidate or Committee Name: Robert C. Bryan
 2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
 3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

JUL 17 2023

WILSON COUNTY
ELECTION COMMISSION

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: W.A.N.T. OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: P.O. Box 399 City: Lebanon State: TN Zip Code: 37088
 Purpose of Expenditure: Ad
 Amount of Expenditure: \$ 199.00 Date of Expenditure: \$ 1/20/23

Business or Organization Name: Walmart OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 615 S. Cumberland St. City: Lebanon State: TN Zip Code: 37087
 Purpose of Expenditure: Meeting
 Amount of Expenditure: \$ 157.59 Date of Expenditure: \$ 2/3/23

Business or Organization Name: Embassy Suites OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 1200 Conference Ctr. Blvd City: Murfreesboro State: TN Zip Code: 37129
 Purpose of Expenditure: Meeting
 Amount of Expenditure: \$ 261.06 Date of Expenditure: \$ 2/9/23

Business or Organization Name: Lebanon Sr. Citizens Ctr. OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 670 Coles Ferry Pike City: Lebanon State: TN Zip Code: 37087
 Purpose of Expenditure: Donation
 Amount of Expenditure: \$ 500.00 Date of Expenditure: \$ 2/15/23

Business or Organization Name: White Tails Unlimited OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: 2100 Michigan St. City: Sturgeon Bay State: WI Zip Code: 54235
 Purpose of Expenditure: Donation
 Amount of Expenditure: \$ 1,000.00 Date of Expenditure: \$ 3/3/23

Total Expenditures: \$ 2,117.65

(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

RECEIVED

1. Candidate or Committee Name: Robert C. Bryan JUL 17 2023
2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023 WILSON COUNTY ELECTION COMMISSION
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 2,117.65

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: Lebanon Wilson Co. Chamber OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 149 Public Square City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Membership
Amount of Expenditure: \$ 180.00 Date of Expenditure: \$ 3/17/23

Business or Organization Name: USPS OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 226 E. Gay St. City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: P.O. BOX Rental
Amount of Expenditure: \$ 354.00 Date of Expenditure: \$ 3/17/23

Business or Organization Name: Kiwanis Club OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. BOX 281 City: Lebanon State: TN Zip Code: 37080
Purpose of Expenditure: Donation / sponsor
Amount of Expenditure: \$ 750.00 Date of Expenditure: \$ 3/17/23

Business or Organization Name: City of Watertown OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 100 W. Main St. City: Watertown State: TN Zip Code: 37184
Purpose of Expenditure: Donation / sponsor
Amount of Expenditure: \$ 400.00 Date of Expenditure: \$ 3/23/23

Business or Organization Name: CASA OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 111 Castle Heights Ave City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Donation
Amount of Expenditure: \$ 200.00 Date of Expenditure: \$ 3/27/23

Total Expenditures: \$ 4,001.65

(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

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1. Candidate or Committee Name: Robert C. Bryan
2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 4,001.65

JUL 17 2023

WILSON COUNTY
ELECTION COMMISSION

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: Boy Scouts of America OR

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

Address: P.O. Box 150409 City: Nashville State: TN Zip Code: 37215

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 250.00 Date of Expenditure: \$ 3/30/2023

Business or Organization Name: FOP # 71 OR

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

Address: P.O. Box 2614 City: Lebanon State: TN Zip Code: 37088

Purpose of Expenditure: Dues

Amount of Expenditure: \$ 100.00 Date of Expenditure: \$ 4/7/23

Business or Organization Name: MT. Juliet Chamber OR

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

Address: 2055 N. MT. Juliet Rd. Ste 200 City: MT. Juliet State: TN Zip Code: 37122

Purpose of Expenditure: Membership

Amount of Expenditure: \$ 300.00 Date of Expenditure: \$ 4/12/23

Business or Organization Name: Watertown Chamber OR

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

Address: 100 W. Main St. City: Watertown State: TN Zip Code: 37184

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 350.00 Date of Expenditure: \$ 4/20/23

Business or Organization Name: City of Watertown OR

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

Address: 8630 Sparta Pike City: Watertown State: TN Zip Code: 37184

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 500.00 Date of Expenditure: \$ 4/25/23

Total Expenditures: \$ 5,501.65

(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.)

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JUL 17 2023

WILSON COUNTY
ELECTION COMMISSION

1. Candidate or Committee Name: Robert C. Bryan
2. Reporting Period: Start Date: 1/16/2023 End Date: 6/30/2023
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 5,501.65

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: Empower Me Center OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: P.O. Box 672 City: Lebanon State: TN Zip Code: 37088
Purpose of Expenditure: Donation
Amount of Expenditure: \$ 200.00 Date of Expenditure: \$ 4/27/23

Business or Organization Name: Walmart OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 615 S. Cumberland St. City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Meeting
Amount of Expenditure: \$ 141.59 Date of Expenditure: \$ 5/2/23

Business or Organization Name: Al's Food Land OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 1006 N. Cumberland St. City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Meeting
Amount of Expenditure: \$ 5.86 Date of Expenditure: \$ 5/2/23

Business or Organization Name: _____ OR
First Name: Brian Middle Name: _____ Last Name: Hudgens
Address: 105 E. High St. City: Lebanon State: TN Zip Code: 37087
Purpose of Expenditure: Benefit / Donation
Amount of Expenditure: \$ 100.00 Date of Expenditure: \$ 5/30/23

Business or Organization Name: TN FFA Foundation OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: TN Tech Box 5034 City: Cookeville State: TN Zip Code: 38505
Purpose of Expenditure: Donation
Amount of Expenditure: \$ 300.00 Date of Expenditure: \$ 6/12/23

Total Expenditures: \$ 6,249.10

(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.)

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3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 6,249.10

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: Watertown Football OR

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

Address: 9360 Sparta Pike City: Watertown State: TN Zip Code: 37184

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 600.00 Date of Expenditure: \$ 6/20/23

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: \$ 6,849.10

(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.)