

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT ELECTION COMMISSION

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	uate Committees
1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	IDATE OR COMMITTEE
2.b. IF COMMITTEE, NAME OF CANDIDATE	"Tick" BRYAY
	3. ELECTION DATE
4.a. CAMPAIGN ADDRESS AND PHONE	NOV-6 2012
Street or Rural Route 244 West END Helphy Leganon	State Zip Code Phone
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)	TN. 37087 615-476-8605
Street or Rural Route City	State Zip Code Phone
OFFICE SOUGHT (include district number, if applicable) 6.	NAME OF POLITICAL TREASURER (may be candidate)
ALDERMAN WAYD 5 city of heb mon	A C Brandon III
7. CATEGORY OR REPORT (Check one) FIRST SECOND THRD FOURTH PROJECT OF A PROJECT OF	RE- PRE- MID-YEAR YEAR-END
S & BECINAIN COATE OF STATE OF	MARY GENERAL SUPPLEMENTAL SUPPLEMENTAL ENDING DATE OF REPORTING PERIOD
1-1-2012	9-30-2012
9. (Check one)	
 This campaign is exempt from detailed disclosure because contures total \$1,000 or less for this reporting period. (Complete it 	tributions (including in-kind) received total \$1,000 or less AND expendi-
The state of the s	riod.
10. I/we do solemnly swear or affirm that the information contained in this	s campaign financial disclosure report is true and that this report is an
Financial Disclosure Act. Additionally I/we swear or affirm that no see	red to be reported by the candidate committee by the Campaign
benefit of the candidate or for any other nonpolitical purpose as define	d by the federal internal revenue code.
1 fold (folds	D/B, 1-11
signature of candidate date	signature of political treasurer
1 / Bryon	date date
11. WITNESS SIGNATURE	A1171
TA Bran 12100	Last failed.
signature of witness	1070-12
uale	signature of witness date
12. SUMMARY	0.0
a. BALANCE ON HAND LAST REPORT	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
b. TOTAL RECEIPTS THIS PERIOD	\$ 3,466.
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 4020,32
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	s 845 68
e. TOTAL LOANS OUTSTANDING	\$ 1,60000
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 1,6000





SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) RYGO	14. REPORT COVERING THE PERIOD
RECEIPTS	FROM: 7-1-12 TO: 9.30.12
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 11.65.00
b. Itemized Contributions (over \$100 from each source this period)	s 300
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 1866.00
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ 18000
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ -0
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 3466,00
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g	., printing, postage, gasoline)
\$	_
\$	
 \$	
\$	_
\$	
	_
	_
	
Total of Expenditures (\$100 or less each payee)\$	-0-
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	3/6/2
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 3967.30
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	301020
22. IN-KIND CONTRIBUTIONS	\$376732
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$	-0-
b. Itemized in-kind contributions (over \$100 from each source this period)\$	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	
23. OBLIGATIONS	\$_IQ6.00
a. Unitemized Obligations Outstanding (\$100 or less each)\$	-0 -
b. Itemized Obligations Outstanding (Over \$100 each) Loan from Candidates	1800,00
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f	
The state 20.5.) (thust be shown i item 12.1	\$ 1,000.



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OF	RCOMMITTEE	" Beur		2. REPORT COV	ERING THE PERIOD
FROM:7-1-12				TO: 9 - 30 - 12	
TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from the state of the st			page)		
First Name	Middle	Name	Contribution Received For:	\$100 from any contribu	the state of the s
Last Name/Organization Name	0 1	٤		h.	Amount of Contribution
Stan	tord		Primary Election	General Election	# 11,00
Address 18 G	wenlawn	D.	Runoff (Local Election	ns Only)	///
Lebanor) Zip.Code 3708	Date of Contribution		Aggregate This Election
Self-	emp-	sales	9/7	/1a	
Self-	emp ;	52/85		1	
First Name Toda	-/ Middle N	The second second second	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	ler		Primary Election	General Election	#
Address 212 M		bergut A	Runoff (Local Elections	S Only)	250,00
	hetanon state zipcode 37087		Date of Contribution		Aggregate This Election
Occupation Attorny			8/6	112	
Tressler	Associa	Les		110	A
First Name	Middle Nan	ne	Contribution Received For:		Amount of Contribution
ast Name/Organization Name			Primary Election	General Election	\$ 350000
Address Po Box 3	2-75		Runoff (Local Elections	Only)	,,,,,
City Le 6 vm on, State 77 37088			Date of Contribution		Aggregate This Election
			9-17-	12	
nployer			1		
rst Name	Middle Name	9	Contribution Received For:		Amount of Contribution
st Name/Organization Name		Primary Election	Access to		
dress			Runoff (Local Elections O	only)	
,	State	Zip Code	Date of Contribution	,	Aggregate This Election
upation					
oloyer					
TOTAL ITEMIZED CONTRIBUTI (Carry forward to item 3. of next page if add (If this is the last page of contributions, this	ditional pages of this form are	used.)			7/100
th who is the last page of contributions, this	amount must be shown in iter	n 15b. of summary.)			7.7.1

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ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE ION

A MAME OF CAMPIDATE OF	2014447755				T	
1. NAME OF CANDIDATE OR COMMITTEE ROBERT P. TICK" Bryan 2. REPORT COVER FROM: 7-1-12					TO:9-30-12	
3. TOTAL ITEMIZED IN-KIND C		(enter \$0 if first itemized page		Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBL						
First Name Thom #5			In-Kind Contribution Received For:		Value of In-Kind Contribution	
Lact Margai Organization Name	y An			☐ Primary Election ☐ Runoff (Local Election		8126,88
Address P A Box 4 8	$\frac{7}{2}$			Date of In-Kind Contribution	is Offiy)	Aggregate this Election
Address P. O. Box 48 City LeG Hron Occupation INS. SALES		State	Zip Code 088	Description of In-Kind Contribution	Description of In-Kind Contribution Committee Meatry Dir Koo D + Senving Eyes	
Occupation	Employer		13)088	- Committee	meety D	14460
INS, SALES	Se	LF		Koo Dt Ser	ving Egu	.) p.
First Name		Middle Na	ame	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution
Last Name/Organization Name				Runoff (Local Election		
Address				Date of In-Kind Contribution Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution		1
Occupation	Employer			1		
		S. 51 /2 - 5 / 10				
First Name	First Name Middle Name			In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution
Last Name/Organization Name	Last Name/Organization Name			Runoff (Local Election		
Address				Date of In-Kind Contribution	****	Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	cupation Employer		1 :			
		-				
First Name		Middle Na	me	In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution
Last Name/Organization Name			Runoff (Local Election			
Address			Date of In-Kind Contribution		Aggregate this Election	
City	Stale Zip Code		Description of In-Kind Contribution	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Occupation	Employer	1	1			
Circle					and the second of the second o	
irst Name Middle Name		In-Kind Contribution Receive Primary Election	d For:] General Election	Value of In-Kind Contribution		
Last Name/Organization Name			Runoff (Local Elections	s Only)		
Address	Address			Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer		I			
5. TOTAL ITEMIZED IN-KIND CO	ONTRIBUTIO	NIS				
(Carry forward to item 3 of next page if (If this is the last page of in-kind contribution)	additional pages	of this form a		·1		126.88
SS-1128 (Rev. 2/06)				Page	: of	RDA 1159

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ITEMIZED STATEMENT OF LOANS - CANDIDATE COUNTY ELECTION

1. NAME OF CANDIDATE OR COMMITTE			2. REPORT	COVERING THE PERIOD			
FROM: TO:							
3. COMPLETE THE APPROPRIATE ITEMS	FOR EACH	HITEMIZED LO	AN (loans totaling more than \$100 from any source during the page 1	-/2 5-70-/2 eriod)			
Complete the Following for the Source of the Loan							
First Name Number Middle Name Name/Organization Name	Tic K	Outsta (Beg.	ding Loan Balance Loans Loan ning of Period) Received Payments	Outstanding Loan Balance (End of Period)			
BryAn			1,80000 -0.	12800 KF			
244 West END Het	۲		oceived For: Date of Los	an 7-28-12			
Address 244 West End Hat City Lebanon State	Zip Code 370	_	mary Election (A) General Election (General Elec	17-12			
List All Endo	rsers or Gua	rantors for Above	Loan (If more space is needed please attach a page)				
Robert	Middle Nan	Tick	First Name	Middle Name			
Last Name/Organization Name			Last Name/Organization Name				
Address 44 West END	14975		Address				
city he 6 thon	State	Zip Code 3708	City	State Zip Code			
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding				
First Name	Middle Nam	e	First Name	Middle Name			
Last Name/Organization Name			Last Name/Organization Name				
Address			Address				
City	State	Zip Code	City	State Zip Code			
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding				
First Name	Middle Name		First Name	Middle Name			
ast Name/Organization Name	<u>[</u>		Last Name/Organization Name				
Address			Address				
City			Address				
	Stale	Zip Code	City	State Zip Code			
mount Guaranteed Outstanding			Amount Guaranteed Outstanding				
irst Name	Middle Name		First Name	Middle Name			
ast Name/Organization Name			Last Name/Organization Name				
Address		Address					
Sity	State	Zip Code	Civ	State 7:00			
nount Guaranteed Outstanding				State Zip Code			
			Pariount Guaranteed Outstanding				
Totals for all Loans (complete and actions of			Amount Guaranteed Outstanding				
Totals for all Loans (complete on last page of it (Total loans received should also be shown in item 16. on su (Total loan payments should also be shown in item 20. on su Total outstanding loan balance should also be shown in item	mmary page.)	•	Outstanding Loan Balance (Beginning of Period) Received Payment	Outstanding Loan Balance			

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDANE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT P. TICK'B	RING THE PERIOD			
Control authorization actions	TO: 9-30-12 Amount			
TOTAL ITEMIZED CAMPAIGN EXPENDITUR COMPLETE THE APPROPRIATE ITEMS FOR EA	-0-			
4. COMPLETE THE APPROPRIATE ITEMS FOR EA		THE RESIDENCE OF THE PARTY OF T		riod)
PostMast-er	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Postace		
Address Gay St.			380.00	
City Lebanon	State Zip Code 37087	Purpose of Expenditure Postase Purpose of Expenditure	mit	
First Name WRIGHT PRINTING	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name 1335 West Mai	w St.	Printing		334.30
hebanon	Stale Zip Code 37087			
First Name Postmasta	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address		Postage		, (
City I is	State Zip Code	Bulk &	10010-0	475.41
Labamon T	TN 37097	preside of	(Culing	
First Name VICTOR Dye N	fiddle Name	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name		\wedge		
Address	Hickeray	Campaign		120 00
City 1 SIS	150.00			
hobanon	tale Zip Code TN 37087	D	uxis	
irst Name Signs Now M	iddle Name	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name			_	,
ddress , 5 , 0		Elaction	diens	202 (2
031 West 11	Vaen St.		tx8	273.13
Letaron 7	Zip Code 37087			
irst Name Signs Now Mi	ddle Name	Purpose of Expenditure		Amount of Expenditure
ist Name/Business Name				
idean		100 8	1008	MED M2
1031 West Mai	u St.	100 0	'7'10	752.73
hebanon T	Zip Code 3 2087			
. TOTAL ITEMIZED EXPENDITURES				0
(Carry forward to item 3, of next page if additional pages of the (If this is the last page of expenditures, this amount must be s	nis form are used.) shown in item 19b, of summary.)			2365.50
				- 1100

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATEION

1. NAME OF CANDIDATE OR COMMITTE ROBERT P. TICK	RING THE PERIOD				
3. TOTAL ITEMIZED CAMPAIGN EXPEND	TO: 9-30-12 Amount				
4. COMPLETE THE APPROPRIATE ITEMS FOR	1-0-				
First Name	Middle		Purpose of Expenditure	ou to any payee during the pe	The second secon
Last Namer@usiness Name			- Superior of Experioration		Amount of Expenditure
Address 1031 Wast Main St. City Lebanon IN 37097			- TRuck J Grap	Door	800.00
Last Name/Business Name	Name	Purpose of Expenditure		Amount of Expenditure	
Address 1031 Wost 1	Na	in St.	1 Ruck	Door	801.75
hebanon	hebanon TN 37087		1 Ruck	iphics	001.70
First Name	Middle N	lame	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name CEDAYSTONE BANK			PANKSEL	OS	5)00
Address WestmAn st.				_	
chy he 6 Hnon	State 7/	37087			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name	1				C. C. DOT STOLE
Address	-				
Caty	State	Zip Code			
irst Name	Middle Nar	THE	Purpose of Expenditure		
ast Name/Business Name			- stycoc of Experionare	ľ	Amount of Expenditure
ddress					
äty	State	Zip Code			
irst Name	Middle Nam	·	Purpose of Expenditure	A	mount of Expenditure
ast Name/Business Name				And Assessment of the Control of the	
ddress					
ty	State	Zip Code			
. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3 of next page if additional pages of (If this is the last page of expenditures, this amount must it	of this form a	re used.) tem 19b. of summary.)		-	4,026,32