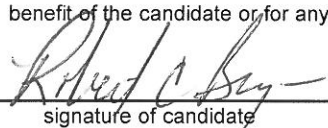
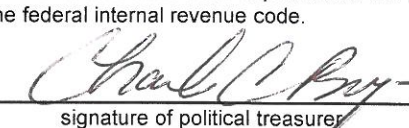
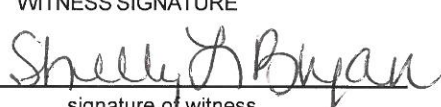
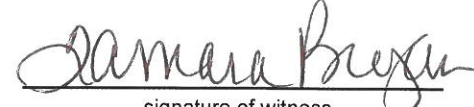


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

NOISSIMWOC NOITCEUO  
ELECTION COMMISSION

102 JUL 31 2014  
RECEIVED

1. DATE OF REPORT 07/01/14		2.a. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE AUGUST 7, 2014		
4.a. CAMPAIGN ADDRESS AND PHONE				
Street or Rural Route PO BOX 803		City LEBANON	State TN	Zip Code 37088-0803
				Phone 615-970-0007
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)				
Street or Rural Route 424 WALTER MORRIS ROAD		City LEBANON	State TN	Zip Code 37087
				Phone
5. OFFICE SOUGHT (include district number, if applicable) SHERIFF		6. NAME OF POLITICAL TREASURER (may be candidate) ROBERT C. BRYAN		
7. CATEGORY OR REPORT (Check one)				
<input type="checkbox"/> FIRST QUARTER	<input type="checkbox"/> SECOND QUARTER	<input type="checkbox"/> THIRD QUARTER	<input type="checkbox"/> FOURTH QUARTER	<input type="checkbox"/> PRE- PRIMARY
				<input checked="" type="checkbox"/> PRE- GENERAL
				<input type="checkbox"/> MID-YEAR SUPPLEMENTAL
				<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 07/01/14		8.b. ENDING DATE OF REPORTING PERIOD 07/28/14		
9. (Check one)				
a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)				
b. <input checked="" type="checkbox"/> 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.				
10. 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.				
 signature of candidate		07/30/14 date		 signature of political treasurer
				07/30/14 date
11. WITNESS SIGNATURE				
 signature of witness		07/30/14 date		 signature of witness
				07/30/14 date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT .....		22,893.49		
		\$ .....		
b. TOTAL RECEIPTS THIS PERIOD .....		700.00		
		\$ .....		
c. TOTAL DISBURSEMENTS THIS PERIOD .....		2,185.45		
		\$ .....		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		21,408.04		
		\$ .....		
e. TOTAL LOANS OUTSTANDING .....		0.00		
		\$ .....		
f. TOTAL OBLIGATIONS OUTSTANDING .....		0.00		
		\$ .....		



# SUMMARY PAGE - CANDIDATE

RECEIVED  
JUL 31 2014  
WILSON COUNTY  
ELECTION COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full) ROBERT C. BRYAN	14. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14
---	---

## RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 450.00

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 250.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$

16. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ 0.00

17. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ 0.00

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) ..... \$ 700.00

## 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)

EVENT SPONSOR/DONATION	\$ 100.00
CAMPAIGN EVENT MATERIAL AND SUPPLIES	\$ 149.52
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

Total of Expenditures (\$100 or less each payee) ..... \$ 249.52

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 1935.93

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$

20. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ 0.00

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ 2,185.45

## 22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ 39.37

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ 0.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ 39.37

## 23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ 0.00

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ 0.00

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ 0.00





JUL 31 2014  
CLATSOP COUNTY  
ELECTION COMMISSION

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN			2. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name G		Middle Name FRANK		Contribution Received For:  <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  250.00
Last Name/Organization Name LANNOM					
Address 137 PUBLIC SQUARE					
City LEBANON	State TN	Zip Code 37087	Date of Contribution 07/26/14		Aggregate This Election
Occupation ATTORNEY					
Employer LANNOM & LANNOM					
First Name		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:  <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name					
Address					
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					250.00



## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)						
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name TENNESSEE PBA, INC				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		39.37
Address 2155 HIGHWAY 42 S				Date of In-Kind Contribution 07/11/14		Aggregate this Election
City MCDONOUGH		State GA		Zip Code 30252-7636		Description of In-Kind Contribution EXPENDITURE FOR AD IN LEBANON DEMOCRAT OF ENDORSEMENT
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of 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 item 22b. of summary.)					39.37	



JUL 31 2014

WILSON COUNTY

ELECTION COMMISSION

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name		Middle Name		Purpose of Expenditure CAMPAIGN SHIRTS	Amount of Expenditure 327.20
Last Name/Business Name MJ SHIRTWORKS					
Address 1006A CHARLIE DANIELS PKWY					
City MT JULIET	State TN	Zip Code 37122			
First Name		Middle Name		Purpose of Expenditure EVENT DONATION	Amount of Expenditure 260.00
Last Name/Business Name WATERTOWN CHAMBER					
Address POST OFFICE BOX 5					
City WATERTOWN	State TN	Zip Code 37184			
First Name		Middle Name		Purpose of Expenditure EVENT DONATION	Amount of Expenditure 150.00
Last Name/Business Name CARROLL OAKLAND PTO					
Address 4664 HUNTERS POINT PIK					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure CAMPAIGN SIGN MATERIALS	Amount of Expenditure 328.73
Last Name/Business Name CUMBERLAND SUPPLY					
Address 212 MAIN ST					
City CARTHAGE	State TN	Zip Code 37074			
First Name		Middle Name		Purpose of Expenditure EVENT DONATION	Amount of Expenditure 300.00
Last Name/Business Name LEEVIIE FCE CLUB					
Address LEEVIIE PIKE					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure EVENT DONATION	Amount of Expenditure 370.00
Last Name/Business Name GLADEVILLE COMMUNITY CENTER					
Address 95 MCCREARY ROAD					
City LEBANON	State TN	Zip Code 37087			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)					1,735.93





# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

JUL 31 2014 4:50  
WILSON COUNTY  
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN		2. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1735.93
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name	Middle Name	Purpose of Expenditure ADVERTISEMENT	Amount of Expenditure 200.00
Last Name/Business Name WILSON POST			
Address 107 BAY COURT			
City LEBANON	State TN Zip Code 37087		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City LEBANON	State TN Zip Code 37087		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State Zip Code		
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			1935.93



# ITEMIZED STATEMENT OF LOANS - CANDIDATE

JUL 31 2014  
WILSON COUNTY  
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN						2. REPORT COVERING THE PERIOD FROM: 07/01/14 TO: 07/28/14	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	
Last Name/Organization Name				0.00		0.00	
Address		Loan Received For:		Date of Loan		Outstanding Loan Balance (End of Period)	
City		State		Zip Code		0.00	
		<input type="checkbox"/> Primary Election		<input type="checkbox"/> General Election			
		<input type="checkbox"/> Runoff (Local Elections Only)					
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				Outstanding Loan Balance (Beginning of Period)		Loans Received	
				0.00		0.00	
				0.00		0.00	
				0.00		0.00	



JUL 31 2014

WILSON COUNTY  
ELECTION COMMISSION

## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN			2. REPORT COVERING THE PERIOD			
			FROM: 07/01/14		TO: 07/28/14	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period) 0.00	Debt Incurred This Period 0.00	Payments This Period 0.00	Outstanding Balance (End of Period) 0.00
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
First Name			Middle Name			
Last Name/Business Name						
Address						
City		State	Zip Code			
Description of Obligation						
4. TOTALS			0.00	0.00	0.00	0.00
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						

