CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

APR 9 2014 m 30

1. DATE OF REPORT 04/08/14		ANDIDATE OR COMMITTE C. BRYAN	E EL	WILSON COUNTY ECTION COMMISSION
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 differen Street or Rural Route 424 WALTER MORRIS ROAD	t than 4.a.) City LEBANON	State TN	Zip Code 37087	Phone
OFFICE SOUGHT (include district number, if SHERIFF	applicable)	6. NAME OF POLITI ROBERT C. BR	CAL TREASURER (may be o	candidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE- PRIMARY GENER 8.b. ENDING DATE OF F	RAL SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
January 16, 2014 9. (Check one)		March 31, 2014	REPORTING PERIOD	
 a. This campaign is exempt from detaile tures total \$1,000 or less for this repo b. This campaign is required to file a det and/or expenditures total more than \$ 	rting period. (Comp ailed financial disclo	olete items 12d., 12e. and osure because contribution	12f.)	100 100 100 100 100 100 100 100 100 100
10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we sherreffl of the candidate or for any other non signature of candidate	ns and expenditure swear or affirm that	s required to be reported no campaign contribution defined by the federal int	by the candidate committee to have been expended for the	ny the Campaign
11. WITNESS SIGNATURE Shelly By GM signature of witness	04/09/14 date	Phyl	Derush	04/09/14
	uate	S	ignature of witness	date
12. SUMMARYa. BALANCE ON HAND LAST REPORT			25,603.09	
b. TOTAL RECEIPTS THIS PERIOD			\$	
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	-
d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)		\$	28,232.71
e. TOTAL LOANS OUTSTANDING			\$.	0.00
f. TOTAL OBLIGATIONS OUTSTANDING			\$ ·	0.00



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

APR 9 2014 ma

1. DATE OF REPORT 04/08/14		ANDIDATE OR COMMITTEE C. BRYAN	ELECTION COUNTY 1,3		
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE AUGUST 7, 2014		
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route	City	State	Zip Code	Phone	
PO BOX 803	LEBANON	TN	37088-0803	615-970-0007	
4.b. CANDIDATE'S HOME ADDRESS (if differen	t than 4 a)	· · · · · · · · · · · · · · · · · · ·			
Street or Rural Route	City	State	Zin Codo	Dhana	
424 WALTER MORRIS ROAD	LEBANON		Zip Code	Phone	
424 WALTER MORRIS ROAD	LEBANON	IN	37087		
OFFICE SOUGHT (include district number, if SHERIFF	applicable)	TREASURER (may be o	andidate)		
7. CATEGORY OR REPORT (Check one)		•			
				П	
FIRST SECOND THIRD	FOURTH	PRE- PRE-	MID-YEAR	YEAR-END	
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY GENERAL	SUPPLEMENTAL	SUPPLEMENTAL	
		8.b. ENDING DATE OF REPO March 31, 2014	RTING PERIOD		
January 16, 2014		Warch 51, 2014			
9. (Check one)		****			
a. This campaign is exempt from detaile	d disclosure becaus	e contributions (including in-kir	nd) received total \$1,000	or less AND expendi-	
tures total \$1,000 or less for this repo	rting period. (Comp	ete items 12d., 12e. and 12f.)			
b. 🔼 This campaign is required to file a det	ailed financial disclo	osure because contributions (in	ocluding in-kind) received	total more than \$1,000	
and/or expenditures total more than \$	1,000 for this report	ina period.	icidaling in-kina) received	total more than \$1,000	
• • • • • • • • • • • • • • • • • • • •					
10. I/we do solemnly swear or affirm that the in	formation contained	l in this campaign financial dis	closure report is true an	d that this report is an	
accurate accounting of campaign contribution	ns and expenditure:	s required to be reported by the	e candidate committee b	y the Campaign	
Financial Disclosure Act. Additionally, I/we seemest of the candidate or for any other non	swear or affirm that	no campaign contributions have	e been expended for the	e personal financial	
belieff of the candidate of for any other non	political purpose as	defined by the federal internal	revenue code.		
	0.1/00/1.1				
	04/09/14			04/09/14	
signature of candidate	date	signature o	f political treasurer	date	
			103	1000000	
44 METHERO CIONATURE					
11. WITNESS SIGNATURE					
	04/09/14			04/09/14	
signature of witness	date	signat	ure of witness	date	
				00.0	
	***		****		
12. SUMMARY					
2 PALANCE ON HAND LAST DEDORT			25,603.09		
a. BALANCE ON HAND LAST REPORT			. \$		
			3,850.00		
b. TOTAL RECEIPTS THIS PERIOD		·····	.\$		
			1220.38		
c. TOTAL DISBURSEMENTS THIS PERIOD			\$		
d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)		œ.	28,232.71	
(- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	,		Ψ.		
				0.00	
e. TOTAL LOANS OUTSTANDING			\$ <u>-</u>	0.00	
f TOTAL OPLICATIONS OUTSTANDING			188	0.00	
f. TOTAL OBLIGATIONS OUTSTANDING			····· \$ -		

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

APR 9 2014 ma

	DATE OF REPORT 04/08/14		ANDIDATE OR CO C. BRYAN	MMITTEE	WILSON COUNTY (130 ELECTION COMMISSION			
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	i i	State TN	Zip Code 37088-0803	Phone 615-970-0007		
4.b.	CANDIDATE'S HOME ADDRESS (if different Street or Rural Route 424 WALTER MORRIS ROAD	than 4.a.) City LEBANON		State TN	Zip Code 37087	Phone		
5.	OFFICE SOUGHT (include district number, if SHERIFF	applicable)		POLITICAL TF T C. BRYAN	REASURER (may be o	candidate)		
7.	CATEGORY OR REPORT (Check one) X	FOURTH QUARTER	PRE-PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL		
	BEGINNING DATE OF REPORTING PERIOD January 16, 2014		8.b. ENDING DA March 31, 2014	ATE OF REPOR	TING PERIOD			
9. (0	a. ☐ This campaign is exempt from detailed tures total \$1,000 or less for this report b. ☐ This campaign is required to file a det and/or expenditures total more than \$	rting period. (Comp ailed financial disclo	olete items 12d., 1	2e. and 12f.)		· ·		
10.	I/we do solemnly swear or affirm that the in accurate accounting of campaign contributio Financial Disclosure Act. Additionally, I/we shenefit of the candidate or for any other non	ns and expenditure swear or affirm that	s required to be re no campaign con	eported by the tributions have	candidate committee l been expended for th	by the Campaign		
9		04/09/14				04/09/14		
	signature of candidate	date		signature of p	political treasurer	date		
11.	WITNESS SIGNATURE							
		04/09/14				04/09/14		
	signature of witness	date		signatu	re of witness	date		
12.	SUMMARY							
	a. BALANCE ON HAND LAST REPORT				25,603.09			
	b. TOTAL RECEIPTS THIS PERIOD			\$	3,850.00			
	c. TOTAL DISBURSEMENTS THIS PERIOD			\$	1220.38			
	d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)			\$	28,232.71		
	e. TOTAL LOANS OUTSTANDING				\$	0.00		
	f. TOTAL OBLIGATIONS OUTSTANDING				\$	0.00		



SUMMARY PAGE - CANDIDATE

APR 9 2014 Ma

13. NAME OF CAROBERT C. I	ANDIDATE OR COMMITTEE (In Full) BRYAN	14. REPORT COVE FROM: 01/16/14	TO: 03/31714							
RECEIPTS 15. CONTRIBUT	IONS (other than loans and interest)	- L								
a. Unitemized	d Contributions (\$100 or less from each source this period)	\$ _100.00								
b. Itemized C	contributions (over \$100 from each source this period)	\$ 3,750.00	_							
c. TOTAL CC	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)									
16. LOANS REC	.\$									
17. INTEREST R	17. INTEREST RECEIVED THIS REPORTING PERIOD									
18. TOTAL RECE	EIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		.\$ _3,850.00							
DISBURSEM	ENTS									
19. EXPENDITUI	RES (other than loan payments)		ā							
a. Expenditures	(\$100 or less each payee this period) (must be listed by category -	e.g., printing, postage,	gasoline)							
EVENT SPON	SORSHIP \$ _150.00									
PRINTING	\$ _75.38		14							
ADVERTISEM	ENT \$ 100.00									
 	\$									
	\$									
	\$	-	v							
participant de la companya del companya del companya de la company	\$									
	\$									
	\$									
Total of Expend	itures (\$100 or less each payee)	325.38								
b. Itemized Expe	enditures (Over \$100 each payee this period)	\$ _895.00	_							
c. TOTAL EXPE	NDITURES (other than loan repayments)(add 19.a. and 19.b.)		\$ _1220.38							
20. LOAN REPAY	0. LOAN REPAYMENTS MADE THIS PERIOD									
21. TOTAL DISBU	21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)									
22.IN-KIND C	CONTRIBUTIONS									
a. Unitemized in	-kind contributions (\$100 or less from each source this period)	\$_0.00	-							
b. Itemized in-kir	b. Itemized in-kind contributions (over \$100 from each source this period)\$									
c. TOTAL IN-KIN	c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)									
23. OBLIGATI	ONS									
a. Unitemized O	bligations Outstanding (\$100 or less each)	\$_0.00	.							
b. Itemized Oblig	gations Outstanding (Over \$100 each)	\$0.00								
c TOTAL OBLIG	TOTAL OBLIGATIONS OUTSTANDING (add 23 a, and 23 h.) (must be shown i item 12 f.)									

APR 9 2014 wa

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE UNITY (:30 ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE 2. REPORT COVERING THE PERIOD ROBERT C. BRYAN FROM: 01/16/14 TO: 03/31/14 Amount 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) 0.00 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) Middle Name Contribution Received For: Amount of Contribution JAMES R 1500.00 Last Name/Organization Name Primary Election General Election KEITH Address 802 CHAPARRAL DRIVE Runoff (Local Elections Only) City LEBANON State Zip Code 37087 Date of Contribution Aggregate This Election 01/23/14 Occupation DEPUTY Employer WCSO First Name KANDY Middle Name Contribution Received For: Amount of Contribution 1500.00 Last Name/Organization Name Primary Election General Election KEITH Runoff (Local Elections Only) Address 802 CHAPARRAL DRIVE City LEBANON Date of Contribution State TN Zip Code Aggregate This Election 01/23/14 Occupation HOMEMAKER Employer Middle Name First Name Contribution Received For: Amount of Contribution **JERRY** W 250.00 Last Name/Organization Name ☐ Primary Election General Election HUTCHINS, JR. Address PO BOX Runoff (Local Elections Only) City SMITHVILLE State TN Zip Code Date of Contribution Aggregate This Election 37166 02/07/14 Occupation DEPUTY Employer **WCSO** First Name Middle Name Contribution Received For: Amount of Contribution Last Name/Organization Name ☐ Primary Election ☐ General Election 500.00 UNITED AUTO WORKERS TN Runoff (Local Elections Only) Address 1735 WARREN HOLLOW ROAD Date of Contribution State Zip Code 37135 Aggregate This Election City NOLENSVILLE 02/10/14 Occupation Employer 5. TOTAL ITEMIZED CONTRIBUTIONS 3,750.00 (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.)

SS-1131(Rev. 2/06)

Page __3 __ of __ 7



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS SOCANDIDATE

NAME OF CANDIDATE OR COM ROBERT C. BRYAN	RING THE PERIOD TO: 03/31/14								
		-			FROM: 01/16/14	Amount			
TOTAL ITEMIZED IN-KIND CON COMPLETE THE APPROPRIATE ITE						0.00			
First Name	INIST ON LAC	Middle Nam		In-Kind Contribution Received					
		Middle Nam	ie		General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Elections Only)					
Address			Date of In-Kind Contribution		Aggregate this Election				
City	ity State Zip Code			Description of In-Kind Contribution		*			
Occupation Employer									
First Name		Middle Nam	ne	In-Kind Contribution Received Primary Election	f 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	***************************************					
Occupation	Occupation Employer								
First Name Middle Name			In-Kind Contribution Received Primary Election	For: General Election	Value of In-Kind Contribution				
Last Name/Organization Name			☐ Runoff (Local Election	s Only)					
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer								
First Name		Middle Nam	e	In-Kind Contribution Received	I For:	Value of In-Kind Contribution			
Last Name/Organization Name				☐ Primary Election ☐ General Election					
Edot Name/Organization Name				Runoff (Local Election	s Only)				
Address			11	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 Receive	(2) (1)(2)(3)	Value of In-Kind Contribution			
Last Name/Organization Name			Primary Election		o .				
Address			Runoff (Local Elections Date of In-Kind Contribution	S Only)	Aggregate this Floation				
					(m.m.)	Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	80							
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.)						0.00			

SS-1128 (Rev. 2/06)

Page __4 __of __7

RDA 1159

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE 133

NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVE FROM: 01/16/14	RING THE PERIOD TO: 03/31/14		
					Amount		
3. TOTAL ITEMIZED CAMPAIGN EXPENDI					0.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR				to any payee during the pe			
First Name	Middle N	ame	Purpose of Expenditure SPONSORSHIP/DON	ATION	Amount of Expenditure 275.00		
Last Name/Business Name LEBANON SR. CITIZEN BANQUET			- SI ONSONSTIIP/DON.				
Address 670 COLES FERRY PIKE							
City LEBANON	State TN	Zip Code 37088					
First Name	Middle Na	ame	Purpose of Expenditure 100TH ANNIVESARY	SDONSODSHID 8	Amount of Expenditure		
Last Name/Business Name TXR				OF ONSORSHIF &	420.00		
Address 5905 TROUSDALE FERRY PIKE	***************************************	AVE.	_				
City LEBANON	State TN	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name MAIN STREET MEDIA		WILSON CENTRAL E	200.00				
Address PO BOX 50417	ress PO BOX 50417						
City NASHVILLE	State TN	Zip Code 37205	1				
st Name Middle Name			Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	=		1				
Address			1				
^{City} LEBANON	State TN	Zip Code 37088-0399					
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure		
_ast Name/Business Name							
Address							
City	State	Zip Code					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure		
ast Name/Business Name							
Address	7,000		1				
Sity	State	Zip Code	1				
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page: (If this is the last page of expenditures, this amount must					895.00		

ITEMIZED STATEMENT OF LOANS - CANDIDATE COUNTY (:3°

NAME OF CANDIDATE OF	RCOMMITTEE							2.	REPORT	COVE		THE PERIODO
ROBERT C. BRYAN									OM: 01/1		TO	03/31/14
3. COMPLETE THE APPROP	PRIATE ITEMS F	OR EACH	ITEMIZ	ZED LOAN	(loans totaling r	nore than \$1	00 from any	source	during the pe	eriod)		
Complete the Following for the So	ource of the Loan											
First Name	Middle Nam	Middle Name Outstanding (Beginning			Loan Balance of Period)	Loan Recei		Loan Outstanding Loan Balance Payments (End of Period)				
Last Name/Organization Name	2000			0.00	2	0.0	0	0.00				0
Address				Loan Receiv		<u> </u>	<u> </u>		Date of Loa	an		
City	State Zip Code Primar			y Election (Local Elections	Gener Only)	al Election						
	List All Endors	sers or Guara	antors fo	or Above Loa	ın (If more spa	ce is need	ed please a	attach	a page)			
First Name		Middle Name	9		First Name	**				Middl	le Name	
Last Name/Organization Name		·			Last Name/Org	ganization Na	ame					
Address					Address							
City		State	Zip Co	ode	City	- 198 - Emilion				State		Zip Code
Amount Guaranteed Outstanding					Amount Guarar	nteed Outsta	nding					
First Name Middle Name				First Name Middle Name								
Last Name/Organization Name				Last Name/Organization Name								
Address				Address			-5%					
City		State	Zip Co	de	City					State		Zip Code
Amount Guaranteed Outstanding			2		Amount Guaran	teed Outstar	nding					•
First Name		Middle Name	ĺ		First Name					Middl	le Name	
Last Name/Organization Name	9				Last Name/Organization Name							
Address	The Was wife				Address	PARTICIPANT L						+
City	I	State	Zip Cod	de	City			State		State		Zip Code
Amount Guaranteed Outstanding	<u> </u>				Amount Guaran	teed Outstan	ding		***************************************			
First Name	First Name Middle Name				First Name Middle Name							
Last Name/Organization Name				Last Name/Organization Name								
Address	-				Address							
City		State	Zip Cod	le	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guarant	eed Outstan	ding					
(Total loans received should also be sho (Total loan payments should also be sho	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.)				Outstanding Loa (Beginning of		Loans Receive		Loan Payme 0.00			anding Loan Balance End of Period) .00
(Total outstanding loan balance should al	so de snown in item 1	z.e. on front pa	age.)		0.00		3.00				L	

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE INTY (130

			The state of the s	1	ELECTION	COMMISSION
NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN					VERING THE PE	
COMPLETE THE APPROPRIATE ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting)	an \$100 ov		Outstanding Balance (Beginning of Period) 0.00	FROM: 01/16/ Debt Incurred This Period 0.00	Payments This Period 0.00	03/31/14 Outstanding Balance (End of Period) 0.00
First Name	Middle Na	ame				
Last Name/Business Name			-			
Address			-			
City	State	Zip Code	-			
Description of Obligation				l	<u> </u>	
First Name	Middle Na	me				
Last Name/Business Name	<u> </u>					
Address						
City	State	Zip Code	-			
Description of Obligation	1					
First Name Middle Name						
Last Name/Business Name	1		-			
Address	- 100 - 200		1			
City	State	Zip Code	1			
Description of Obligation	122241					
FIrst Name	Middle Nar	ne				
Last Name/Business Name			1			
Address			1			
City	State	Zip Code	-			
Description of Obligation						
First Name	Middle Nan	ne				
Last Name/Business Name			1			
Address			1			
City	State	Zip Code	1			
Description of Obligation	I					
4. TOTALS				0.00	0.00	0.00
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)			0.00	especial		

SS-1127 (Rev. 4/02)

Page __7__ of __7__

RDA 1159