

SUMMARY PAGE - CANDIDATE

OCT 11 2016

WILSON COUNTY

ELECTIONS COMMISSION

13. NAME OF CANDIDATE OR COMMITTEE (In Full)

MARILYN BRYANT

14. REPORT COVERING THE PERIOD

FROM:

TO: 9/30/16

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 250.00

b. Itemized Contributions (over \$100 from each source this period) \$ 500.00

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

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 500.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 1250.00

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)

~~Office Supplies~~ \$ ~~6.18~~

MISC. OFFICE SUPPLIES \$ 8.18

~~Office Supplies~~ \$ ~~6.18~~

VOTER LIST \$ 38.00

~~Office Supplies~~ \$ ~~6.18~~

..... \$ _____

..... \$ _____

..... \$ _____

..... \$ _____

Total of Expenditures (\$100 or less each payee) \$ 46.18

b. Itemized Expenditures (Over \$100 each payee this period) \$ 1080.27

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 1126.45

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 1126.45

22. IN-KIND CONTRIBUTIONS

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

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

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

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

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



OCT 11 2016

WILSON COUNTY
ELECTION COMMISSION

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Marilyn Bryant</i>			2. REPORT COVERING THE PERIOD FROM: <i>7/01/16</i> TO: <i>9/30/16</i>		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>0</i>		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>HATTIE</i>		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name <i>BRYANT</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<i>\$500.00</i>
Address <i>126 E. FORREST AVE</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>LEBANON</i>	State <i>TN</i>	Zip Code <i>37087</i>		Date of Contribution <i>9/1/16</i>	Aggregate This Election
Occupation <i>RETIRED</i>					
Employer					
First Name XXXXXXXXXX		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name XXXXXXXXXX				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code		Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City	State	Zip Code		Date of Contribution	Aggregate This Election
Occupation					
Employer					
First Name		Middle Name		Contribution Received For:	Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
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.)					

OCT 11 2016

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

WILSON COUNTY
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<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
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<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.)					④	
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)						

OCT 11 2016

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

STATE OF MISSISSIPPI
ELECTION COMMISSION

1. NAME OF CANDIDATE OR COMMITTEE <i>MARILYN BRYANT</i>			2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>9/30/16</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</i>
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	Amount of Expenditure	
Last Name/Business Name <i>SIGNS NOW</i>		<i>SIGNS / POSTERS</i>	<i>\$648.13</i>	
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>SIGNS NOW</i>		<i>SIGNS</i>	<i>\$110.07</i>	
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>SIGNS NOW</i>		<i>SIGNS / POSTERS</i>	<i>\$322.07</i>	
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State			
5. TOTAL ITEMIZED EXPENDITURES				<i>\$1080.27</i>
(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.)				

OCT 11 2016

WILSON COUNTY COMMISSION

ITEMIZED STATEMENT OF LOANS - CANDIDATE


1. NAME OF CANDIDATE OR COMMITTEE <i>Marilyn Bryant</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/1/16</i> TO: <i>9/30/16</i>					
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 <i>Marilyn</i>		Middle Name <i>Ann</i>		Outstanding Loan Balance (Beginning of Period)		Loans Received <i>\$500</i>	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name <i>Bryant</i>				Address <i>130 E. Furthest Ave</i>		Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <i>9/1/16</i>	
City <i>LEBANON</i>		State <i>TN</i>	Zip Code <i>37087</i>		<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		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		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		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		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 <i>\$500</i>	Loan Payments	Outstanding Loan Balance (End of Period)	



RECEIVED
OCT 11 2016

WILSON COUNTY
ELECTION COMMISSION

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
			FROM:		TO:	
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)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
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						
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						