

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <i>Oct. 10, 2016</i>	2.a. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>																					
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <i>Nov. 8, 2016</i>																					
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <i>125 N. Shadow Haven Way Hendersonville TN 37075 615-824-5999</i>																						
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone																						
5. OFFICE SOUGHT (include district number, if applicable) <i>Hendersonville Mayor</i>	6. NAME OF POLITICAL TREASURER (may be candidate) <i>Lauren Hulsey</i>																					
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL																						
8.a. BEGINNING DATE OF REPORTING PERIOD <i>July 1, 2016</i>	8.b. ENDING DATE OF REPORTING PERIOD <i>Sept. 30, 2016</i>																					
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. <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; width: 30%;"><i>Janie Clary</i> signature of candidate</td> <td style="text-align: center; width: 20%;"><i>10-10-16</i> date</td> <td style="text-align: center; width: 30%;"><i>Lauren I Hulsey</i> signature of political treasurer</td> <td style="text-align: center; width: 20%;"><i>10-10-16</i> date</td> </tr> </table>		<i>Janie Clary</i> signature of candidate	<i>10-10-16</i> date	<i>Lauren I Hulsey</i> signature of political treasurer	<i>10-10-16</i> date																	
<i>Janie Clary</i> signature of candidate	<i>10-10-16</i> date	<i>Lauren I Hulsey</i> signature of political treasurer	<i>10-10-16</i> date																			
11. WITNESS SIGNATURE <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; width: 30%;"><i>Jeff Hulsey</i> signature of witness</td> <td style="text-align: center; width: 20%;"><i>10-10-16</i> date</td> <td style="text-align: center; width: 30%;"><i>Jeff Hulsey</i> signature of witness</td> <td style="text-align: center; width: 20%;"><i>10-10-16</i> date</td> </tr> </table>		<i>Jeff Hulsey</i> signature of witness	<i>10-10-16</i> date	<i>Jeff Hulsey</i> signature of witness	<i>10-10-16</i> date																	
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12. SUMMARY <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">a. BALANCE ON HAND LAST REPORT</td> <td style="width: 5%; text-align: center;">\$</td> <td style="width: 35%; text-align: right;"><i>53,484.17</i></td> </tr> <tr> <td>b. TOTAL RECEIPTS THIS PERIOD</td> <td style="text-align: center;">\$</td> <td style="text-align: right;"><i>6,405.00</i></td> </tr> <tr> <td style="text-align: center;">A.M. P.M. <i>OCT 11 2016</i></td> <td></td> <td></td> </tr> <tr> <td>c. TOTAL DISBURSEMENTS THIS PERIOD</td> <td style="text-align: center;">\$</td> <td style="text-align: right;"><i>24,949.48</i></td> </tr> <tr> <td>d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)</td> <td style="text-align: center;">\$</td> <td style="text-align: right;"><i>34,939.69</i></td> </tr> <tr> <td>e. TOTAL LOANS OUTSTANDING</td> <td style="text-align: center;">\$</td> <td style="text-align: right;"><i>0</i></td> </tr> <tr> <td>f. TOTAL OBLIGATIONS OUTSTANDING</td> <td style="text-align: center;">\$</td> <td style="text-align: right;"><i>0</i></td> </tr> </table>		a. BALANCE ON HAND LAST REPORT	\$	<i>53,484.17</i>	b. TOTAL RECEIPTS THIS PERIOD	\$	<i>6,405.00</i>	A.M. P.M. <i>OCT 11 2016</i>			c. TOTAL DISBURSEMENTS THIS PERIOD	\$	<i>24,949.48</i>	d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$	<i>34,939.69</i>	e. TOTAL LOANS OUTSTANDING	\$	<i>0</i>	f. TOTAL OBLIGATIONS OUTSTANDING	\$	<i>0</i>
a. BALANCE ON HAND LAST REPORT	\$	<i>53,484.17</i>																				
b. TOTAL RECEIPTS THIS PERIOD	\$	<i>6,405.00</i>																				
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f. TOTAL OBLIGATIONS OUTSTANDING	\$	<i>0</i>																				



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Clary for Mayor</div>	14. REPORT COVERING THE PERIOD FROM: <u>7-1-16</u> TO: <u>9-30-16</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>2,855</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>3,550</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>6,405</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>6,405</u>
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)	
<u>Printing</u>	\$ <u>33.21</u>
<u>Food</u>	\$ <u>138.81</u>
<u>Supplies</u>	\$ <u>165.68</u>
<u>Gas</u>	\$ <u>100.09</u>
<u>finance fees</u>	\$ <u>52.53</u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u>490.32</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>2,459.16</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>2,949.48</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>2,949.48</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>0</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>0</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>				2. REPORT COVERING THE PERIOD	
				FROM: <i>7-1-16</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>Mike</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Law</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>242 Hidden Lake Ln.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>7-5-16</i>	
Occupation <i>Dentist</i>				Aggregate This Election <i>250</i>	
Employer <i>self</i>					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Medical Associates LLC</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>1037 Heathrow Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-20-16</i>	
Occupation				Aggregate This Election <i>350</i>	
Employer					
First Name <i>Aaron</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Hawkins</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>104 Kensington Ct.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-25-16</i>	
Occupation				Aggregate This Election <i>500</i>	
Employer <i>Dollar General</i>					
First Name <i>Al and Linda</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name <i>Ballenger</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>25B Lake Terrace Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-25-16</i>	
Occupation <i>retired</i>				Aggregate This Election <i>250</i>	
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.)					<i>550</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>				2. REPORT COVERING THE PERIOD		
				FROM: <i>7-1-16</i>	TO: <i>9-30-16</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>\$550</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name <i>David</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Pigna</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>\$250</i>
Address <i>574 Cumberland Hills Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37095</i>	Date of Contribution <i>8-15-16</i>		Aggregate This Election <i>\$250</i>
Occupation <i>retired</i>						
Employer						
First Name <i>Rob</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Maddinek</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>\$50</i>
Address <i>107 Saddle Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-26-16</i>		Aggregate This Election <i>\$150</i>
Occupation <i>sales, insurance</i>						
Employer <i>self</i>						
First Name <i>Kendia & Bob</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Bestatti</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>\$100</i>
Address <i>110 Lake Terrace Dr.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-26-16</i>		Aggregate This Election <i>\$225</i>
Occupation <i>Sales Rep</i>						
Employer <i>Eli Lilly</i>						
First Name <i>Mike</i>		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name <i>Wessel</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>\$50</i>
Address <i>102 Liberty Care</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-27-16</i>		Aggregate This Election <i>\$650</i>
Occupation <i>retired</i>						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					<i>\$1000</i>	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>7-1-16</i>	TO: <i>9-30-16</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>1000</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Otis & Sherrill</i>		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 <i>100</i>
Last Name/Organization Name <i>Jones</i>					
Address <i>144 Nathan Forest Dr.</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		Date of Contribution <i>8-24-16</i>	Aggregate This Election <i>1350</i>
Occupation <i>retired</i>		Employer			
First Name <i>Steve</i>		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 <i>1250</i>
Last Name/Organization Name <i>Elbert</i>					
Address <i>214 Bluegrass Dr.</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		Date of Contribution <i>8-20-16</i>	Aggregate This Election <i>1,500</i>
Occupation <i>retired</i>		Employer			
First Name <i>Tiffany</i>		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 <i>100</i>
Last Name/Organization Name <i>Stevens</i>					
Address <i>107 S. Chestnut Ct.</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		Date of Contribution <i>8-24-16</i>	Aggregate This Election <i>1450</i>
Occupation <i>Executive Director</i>		Employer <i>TN Chiropractic Association</i>			
First Name <i>Jim</i>		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 <i>150</i>
Last Name/Organization Name <i>Enqua</i>					
Address <i>105 Hazel Path</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>		Date of Contribution <i>Aug. 27, 2016</i>	Aggregate This Election <i>1200</i>
Occupation <i>attorney</i>		Employer <i>self</i>			
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.)				<i>1,500</i>	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD	
<i>Clay for Mayor</i>			FROM: <i>7-1-16</i>	TO: <i>9-30-16</i>
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>1500</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name <i>John</i>		Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Pelona</i>			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>3016 Cages Pond Rd.</i>			<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Gallatin</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>9-2-16</i>	Amount of Contribution <i>\$250</i>
Occupation <i>owner</i>	Employer <i>Tri Star Digital Connections</i>		Aggregate This Election <i>\$350</i>	
First Name <i>Jim</i>		Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Stanoacker</i>			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>93 Hidden Pt.</i>			<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-29-16</i>	Amount of Contribution <i>\$200</i>
Occupation <i>retired</i>	Employer		Aggregate This Election <i>\$900</i>	
First Name		Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Farmer Bank</i>			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>107 N. Broadway</i>			<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Portland</i>	State <i>TN</i>	Zip Code <i>37148</i>	Date of Contribution <i>8-24-16</i>	Amount of Contribution <i>\$1,500</i>
Occupation	Employer		Aggregate This Election <i>\$1,500</i>	
First Name <i>SYMS</i>		Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Yafandoust</i>			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>382 Rainier Dr.</i>			<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>8-25-16</i>	Amount of Contribution <i>\$100</i>
Occupation <i>Business Administrator</i>	Employer <i>Nash College of Art</i>		Aggregate This Election <i>\$300</i>	
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.)				<i>3550</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
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				Date of Contribution		Aggregate This Election
City	State	Zip Code				
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				Date of Contribution		Aggregate This Election
City	State	Zip Code				
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				Date of Contribution		Aggregate This Election
City	State	Zip Code				
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				Date of Contribution		Aggregate This Election
City	State	Zip Code				
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.)						

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD		
				FROM:	TO:	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
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						
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						
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.)						

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

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	
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 In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
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.)							

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</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>ASAP</i>		<i>Printing</i>	<i>1335.46</i>	
Address <i>116 Imperial Blvd.</i>				
City <i>Hendersonville</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Direct Promotions</i>		<i>printing</i>	<i>\$225</i>	
Address <i>100 Capitala Dr. Suite 100</i>				
City <i>Durham</i>	State <i>NC</i>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>USPS</i>		<i>postage</i>	<i>\$329</i>	
Address <i>Imperial Blvd</i>				
City <i>Hendersonville</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Captain Video</i>		<i>Postage</i>	<i>\$329</i>	
Address <i>247 W. Main St.</i>				
City <i>Hendersonville</i>	State <i>TN</i>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Pro Forma</i>		<i>signs</i>	<i>\$1,965.41</i>	
Address <i>P.O. Box 6460814</i>				
City <i>Cincinnati</i>	State <i>oh</i>			
First Name <i>Kevin</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <i>Schmidt</i>		<i>online marketing</i>	<i>\$200</i>	
Address <i>116 Settlers way</i>				
City <i>Hendersonville</i>	State <i>TN</i>			
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.)				<i>4386.87</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clay for Mayor</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 4386.87
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>Facebook</i>		<i>Online Advertising</i>	<i>\$146.38</i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>American Academy of Dance</i>		<i>Advertising</i>	<i>\$112</i>
Address <i>108 Business Ct.</i>			
City <i>Hendersonville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Mail Chimp</i>		<i>Online e-mail service</i>	<i>\$150</i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Award Industries</i>		<i>Signs</i>	<i>\$1354.70</i>
Address <i>64 Industrial Park Dr.</i>			
City <i>Hendersonville</i>	State <i>TN</i>		
First Name <i>Mike</i>	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>Wessel</i>		<i>event</i>	<i>\$500</i>
Address <i>102 Liberty Cove</i>			
City <i>Hendersonville</i>	State <i>TN</i>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>General Tile / Floor Thirst</i>		<i>rent - tiles in lieu of rent for bus.</i>	<i>\$809.21</i>
Address <i>355 Red River Rd.</i>			
City <i>Ballatin</i>	State <i>TN</i>		
5. TOTAL ITEMIZED EXPENDITURES <small>(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.)</small>			7459.16

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clay for Mayor</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>7459.16</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 <i>Media purchasing</i>	Amount of Expenditure <i>17,000</i>
Last Name/Business Name <i>Bill Hudson Associates</i>				
Address <i>814 Church St.</i>				
City <i>Nashville</i>	State <i>TN</i>	Zip Code <i>37203</i>		
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 <small>(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.)</small>			<i>24459.16</i>	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING THE PERIOD	
		FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount	
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			
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		
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.)			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2. REPORT COVERING THE PERIOD				
					FROM:		TO:		
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	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name									
Address				Loan Received For:			Date of Loan		
City		State	Zip Code		<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		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)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
(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.)									



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							
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.)							