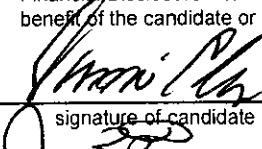
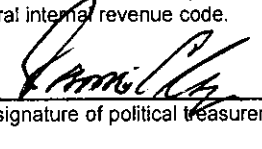
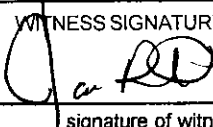
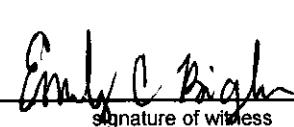


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT July 15, 2019		2.a. NAME OF CANDIDATE OR COMMITTEE Jamie clary for Mayor	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE Nov. 3 2020	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 125 N. Shadobaven Way Hendersonville TN 37075 615-824-5999			
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) Mayor of Hendersonville		6. NAME OF POLITICAL TREASURER (may be candidate) Jamie Clary	
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 type="checkbox"/> PRE-GENERAL <input checked="" type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD Jan. 16, 2019		8.b. ENDING DATE OF REPORTING PERIOD June 30, 2019	
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		 signature of political treasurer	
7-10-19 date		7-11-19 date	
11. WITNESS SIGNATURE  signature of witness		 signature of witness	
7/10/19 date		7-11-19 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ 13,297.98	
b. TOTAL RECEIPTS THIS PERIOD		\$ 16,035	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 0	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 29,332.98	
e. TOTAL LOANS OUTSTANDING		\$ 0	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ 0	



FILED **PM**
JUL 15 2019
SUMNER COUNTY
ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <i>Jamie Clary for Mayor</i>	14. REPORT COVERING THE PERIOD FROM: <i>1-16-19</i> TO: <i>6-30-19</i>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 435

b. Itemized Contributions (over \$100 from each source this period) \$ 15,600

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 16,035

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 0

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) \$ _____

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

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

20. LOAN REPAYMENTS MADE THIS PERIOD \$ _____

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 0

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.) \$ 0

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.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Jamie Clary for Mayor</i>			2. REPORT COVERING THE PERIOD FROM: <i>1-16-19</i> TO: <i>6-30-19</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>Lewis</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>Grace</i>					
Address <i>129 Camp Creek Circle</i>					
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution	Aggregate This Election
Occupation <i>pastor</i>					<i>200</i>
Employer <i>St. Timothy Lutheran Church</i>					
First Name <i>Sherri</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>500</i>
Last Name/Organization Name <i>Hodde</i>					
Address <i>1 Lynwood Lane</i>					
City <i>Nashville</i>		State <i>TN</i>	Zip Code <i>37205</i>	Date of Contribution	Aggregate This Election
Occupation <i>retired</i>					<i>500</i>
Employer					
First Name <i>Jamie</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>15,000</i>
Last Name/Organization Name <i>clary</i>					
Address <i>125 N. Shadowhaven Way</i>					
City <i>Hendersonville</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution	Aggregate This Election
Occupation <i>Mayor</i>					<i>15,000</i>
Employer <i>City of Hendersonville</i>					
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.)				<i>15,600</i>	