

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7-1-2020		2.a. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor	
2.b. IF COMMITTEE, NAME OF CANDIDATE Brenda S. Payne		3. ELECTION DATE 11-3-2020	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 1509 Hunt Club Blvd, Ste. 500, Gallatin, TN 37066 (615)206-0360			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 1595 Hunt Club Blvd, Gallatin TN 37066 (615)473-8965			
5. OFFICE SOUGHT (include district number, if applicable) Mayor		6. NAME OF POLITICAL TREASURER (may be candidate) Robert L. Jennings	
7. CATEGORY OF REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input checked="" 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 type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD 4-1-2020		8.b. ENDING DATE OF REPORTING PERIOD 6-30-2020	
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.			
Brenda S. Payne signature of candidate		R. Jennings signature of political treasurer	
7/7/2020 date		7/7/2020 date	
11. WITNESS SIGNATURE Beth Dyer signature of witness		Beth Dyer signature of witness	
7/7/2020 date		7/7/2020 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ 52,930.12	
b. TOTAL RECEIPTS THIS PERIOD		\$ 13,050.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 4,730.03	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 61,250.09	
e. TOTAL LOANS OUTSTANDING		\$ - 0 -	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ - 0 -	

FILED PM
JUL 08 2020
SUMNER COUNTY
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Brenda S. Payne for Mayor		14. REPORT COVERING THE PERIOD	
		FROM 4-1-2020	TO 6-30-2020
RECEIPTS			
15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period)	\$	<u>900.00</u>	
b. Itemized Contributions (over \$100 from each source this period)	\$	<u>12,150.00</u>	
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$	<u>13,050.00</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>13,050.00</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>Bank fees</u>	\$	<u>9.30</u>	
.....	\$	
.....	\$	
.....	\$	
.....	\$	
.....	\$	
.....	\$	
.....	\$	
.....	\$	
Total of Expenditures (\$100 or less each payee)			
	\$	<u>9.30</u>	
b. Itemized Expenditures (Over \$100 each payee this period)			
	\$	<u>4,720.73</u>	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)			
	\$	<u>4,730.03</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>4,730.03</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 in item 12.f.)			
	\$	<u>- 0 -</u>	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD FROM 4-1-2020 TO: 6-30-2020	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount - 0 -
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Daisy		Middle Name		Contribution Received For:	
Last Name/Organization Name Casey		Address 1033 Jarman Lane		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City Gallatin		State TN		Zip Code 37066	
Occupation Bank President		Employer First Horizon		Date of Contribution 4-5-2020	
				Amount of Contribution 250.00	
				Aggregate This Election 250.00	
First Name Judith		Middle Name B.		Contribution Received For:	
Last Name/Organization Name Henry		Address 1078 Hickory Harbor Dr.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City Gallatin		State TN		Zip Code 37066	
Occupation Retired		Employer		Date of Contribution 4-2-2020	
				Amount of Contribution 200.00	
				Aggregate This Election 200.00	
First Name Richard		Middle Name		Contribution Received For:	
Last Name/Organization Name Rowlett		Address P.O. Box 50		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City Goodlettsville		State TN		Zip Code 37070	
Occupation Owner		Employer Rowlett Advertising		Date of Contribution 5-15-2020	
				Amount of Contribution 500.00	
				Aggregate This Election 500.00	
First Name Mary		Middle Name Anna		Contribution Received For:	
Last Name/Organization Name Womeldorf		Address 143 River Chase		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City Hendersonville		State TN		Zip Code 37075	
Occupation Retired		Employer		Date of Contribution 5-11-2020	
				Amount of Contribution 250.00	
				Aggregate This Election 1,000.00	
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>					1,200.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD	
				FROM: 4-1-2020	TO: 6-30-2020
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 1,200.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Lydia		Middle Name		Contribution Received For:	
Last Name/Organization Name Weaver				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 127 Clifftop Drive				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075		Date of Contribution 5-22-2020	Amount of Contribution 200.00
Occupation Orthopedist				Aggregate This Election 200.00	
Employer Sumner Regional Med. Ctr.					
First Name Lee		Middle Name L.		Contribution Received For:	
Last Name/Organization Name Ryser				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1000 Golf Club Ct.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075		Date of Contribution 5-14-2020	Amount of Contribution 250.00
Occupation Owner				Aggregate This Election 250.00	
Employer Payment Solutions					
First Name Darlene		Middle Name		Contribution Received For:	
Last Name/Organization Name Rawls				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 700 W. Main St.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075		Date of Contribution 5-29-2020	Amount of Contribution 500.00
Occupation Owner				Aggregate This Election 1,000.00	
Employer McCloud's Pest & Lawn					
First Name Matt		Middle Name		Contribution Received For:	
Last Name/Organization Name Stamper				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 131 Maple Row Blvd. Ste. 302				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075		Date of Contribution 6-22-2020	Amount of Contribution 1,000.00
Occupation CPA				Aggregate This Election 1,000.00	
Employer Self Employed					
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.)					3,150.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM 4-1-2020 TO: 6-30-2020	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 3,150.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Carl	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 250.00
Last Name/Organization Name Davis	Address 1040 Jarman Lane	Date of Contribution 6/1/2020	Aggregate This Election 250.00
City Gallatin	State TN	Zip Code 37066	Occupation CPA
Employer Davis Brown & Company LLC			
First Name Thomas	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 1,000.00
Last Name/Organization Name Elsten	Address 138 Country Club Dr.	Date of Contribution 6-16-2020	Aggregate This Election 1,000.00
City Hendersonville	State TN	Zip Code 37075	Occupation Owner
Employer Elsten Security Services Inc.			
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 500.00
Last Name/Organization Name Energy Land & Infrastructure LLC	Address 1420 Donelson Pike, Ste. A-12	Date of Contribution 6-18-2020	Aggregate This Election 500.00
City Nashville	State TN	Zip Code 37217	Occupation
Employer			
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 300.00
Last Name/Organization Name Hendersonville Produce	Address 760 E. Main St.	Date of Contribution 6-23-2020	Aggregate This Election 300.00
City Hendersonville	State TN	Zip Code 37075	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.)			5,200.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM: 4-1-2020 TO: 6-30-2020	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 5,200.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Mary	Middle Name B.	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution 150.00
Last Name/Organization Name Ippich		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 118 Chesapeake Harbor Blvd.		Date of Contribution 5-21-2020	Aggregate This Election 150.00
City Hendersonville	State TN	Zip Code 37075	
Occupation IT Director	Employer City of Hendersonville		
First Name Dawn	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution 500.00
Last Name/Organization Name Linn		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 113 Blue Ridge Trace		Date of Contribution 6-30-2020	Aggregate This Election 1,000.00
City Hendersonville	State TN	Zip Code 37075	
Occupation Family Physician	Employer		
First Name Jennifer	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution 1,000.00
Last Name/Organization Name Houdeshell		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 107 Mimosas Dr.		Date of Contribution 6-30-2020	Aggregate This Election 1,000.00
City Gallatin	State TN	Zip Code 37066	
Occupation Owner	Employer Fireston Tire		
First Name Randell	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	Amount of Contribution 1,600.00
Last Name/Organization Name Smith		<input type="checkbox"/> Runoff (Local Elections Only)	
Address 5904 Sedberry Rd.		Date of Contribution 6-30-2020	Aggregate This Election 1,600.00
City Nashville	State TN	Zip Code 37205	
Occupation Retired	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 5b of summary.)</small>			8,450.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM: 4-1-2020 TO: 6-30-2020	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 8,450.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name		Middle Name	
Last Name/Organization Name Turkey Creek Cattle Co LLC		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 735 E. Main St.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 6-30-2020
Occupation	Employer		Aggregate This Election 1,600.00
First Name		Middle Name	
Last Name/Organization Name Moonlight Properties LLC		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 735 East Main Street		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 6-30-2020
Occupation	Employer		Aggregate This Election 1,600.00
First Name		Middle Name	
Last Name/Organization Name Market Graphics Research Group		Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address 357 Riverside Dr., Ste. 210 Inc.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Franklin	State TN	Zip Code 37064	Date of Contribution 6-30-2020
Occupation	Employer		Aggregate This Election 500.00
First Name		Middle Name	
Last Name/Organization Name		Contribution Received For: <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
Occupation	Employer		Aggregate This Election
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>			12,150.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Brenda S. Payne for Mayor</i>				2. REPORT COVERING THE PERIOD FROM <i>4-1-2020</i> TO: <i>6-30-2020</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>- 0 -</i>
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:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City		State	Zip Code	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.)					Amount <i>- 0 -</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor			2. REPORT COVERING THE PERIOD FROM 4-1-2020 TO: 6-30-2020		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount - 0 -	
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 Commercial Writing	Amount of Expenditure 450.00
Last Name/Business Name Prasentia Inc.					
Address 106 Public Square, Ste. 208					
City Gallatin		State TN	Zip Code 37066		
First Name		Middle Name		Purpose of Expenditure Event Registration Fees: Taste of Hendersonville Summer Fest	Amount of Expenditure 350.00
Last Name/Business Name Hendersonville Chamber of Commerce					
Address 100 Country Club Dr. Ste. 104					
City Hendersonville		State TN	Zip Code 37075		
First Name		Middle Name		Purpose of Expenditure Website Updates	Amount of Expenditure 204.84
Last Name/Business Name Element 47, LLC					
Address 3050 Business Park Circle					
City Goodlettsville		State TN	Zip Code 37072		
First Name		Middle Name		Purpose of Expenditure Video	Amount of Expenditure 156.25
Last Name/Business Name Video One Production					
Address P.O. Box 472					
City Goodlettsville		State TN	Zip Code 37072		
First Name		Middle Name		Purpose of Expenditure Golf Tour Sponsor	Amount of Expenditure 250.00
Last Name/Business Name HC PAA Golf Tournament					
Address 3 Executive Park Dr.					
City Hendersonville		State TN	Zip Code 37075		
First Name		Middle Name		Purpose of Expenditure Hand Sanitizer	Amount of Expenditure 825.72
Last Name/Business Name 4 Imprint					
Address 101 Commerce St.					
City Dshkosh		State WI	Zip Code 54901		
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.)				Amount 2,236.81	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor			2. REPORT COVERING THE PERIOD FROM 4-1-2020 TO: 6-30-2020		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 2,236.81	
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 Facebook		Advertising- Post Boost		332.78	
Address 1601 Willow Road					
City Menlo Park	State CA				Zip Code 94025
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 Myers Front Porch		Food Donations to Essential Workers		1,250.00	
Address 162 E. Main Street					
City Hendersonville	State TN				Zip Code 37075
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Music City Diner		Food Denatrons to Essential Workers		460.32	
Address 102 GlenOak Blvd, Ste. 210					
City Hendersonville	State TN				Zip Code 37075
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Chick-fila		Food Denatrons to Essential Workers		440.82	
Address 1033 Glenbrook Way					
City Hendersonville	State TN				Zip Code 37075
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.)				4,720.73	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD FROM: 4-1-2020 TO: 6-30-2020			
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				Loan Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Date of Loan		
Address							
City	State	Zip Code					
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			
First Name				First Name			
Middle 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	Loan Payments	Outstanding Loan Balance (End of Period)
				- 0 -	- 0 -	- 0 -	- 0 -



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
<i>Brenda S. Payne for Mayor</i>			FROM: <i>4-1-2020</i>		TO: <i>6-30-2020</i>	
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)
			<i>- 0 -</i>	<i>- 0 -</i>	<i>- 0 -</i>	<i>- 0 -</i>
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.)			<i>- 0 -</i>	<i>- 0 -</i>	<i>- 0 -</i>	<i>- 0 -</i>