

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT Oct. 27, 2020	2.a. NAME OF CANDIDATE OR COMMITTEE Clary for Mayor
2.b. IF COMMITTEE, NAME OF CANDIDATE Jamie Clary	3. ELECTION DATE 11-3-20
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 125 N. Shadowhaven Way Hendersonville, TN 37075 615-924-5999	
5. OFFICE SOUGHT (include district number, if applicable) Hendersonville mayor	6. NAME OF POLITICAL TREASURER (may be candidate) Lauren Hulsey
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 checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD Oct. 1, 2020	8.b. ENDING DATE OF REPORTING PERIOD Oct. 24, 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.	
<u><i>Jamie Clary</i></u> signature of candidate	<u>10-27-20</u> date
<u><i>Lauren I. Hulsey</i></u> signature of political treasurer	<u>10-26-2020</u> date
11. WITNESS SIGNATURE	
<u><i>Kenneth A. Jones</i></u> signature of witness	<u>10-27-20</u> date
<u><i>Jamie Clary</i></u> signature of witness	<u>10-26-2020</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>57,226.40</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>3,840.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>35,643.99</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>25,422.41</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>



FILED PM
OCT 27 2020 AM
 SUMNER COUNTY
 ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <p style="text-align: center; font-size: 1.2em;"><i>Clary for Mayor</i></p>	14. REPORT COVERING THE PERIOD FROM: <i>10-1-20</i> TO: <i>10-24-20</i>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u><i>1505</i></u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u><i>2335</i></u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u><i>3840</i></u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u><i>0</i></u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u><i>0</i></u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u><i>3840</i></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)	
<i>Event admission</i>	\$ <u><i>50</i></u>
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
.....	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ <u><i>50</i></u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u><i>35,593.99</i></u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u><i>35,643.99</i></u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ <u><i>0</i></u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u><i>35,643.99</i></u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u><i>90</i></u>
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.)	\$ <u><i>90</i></u>
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.)	\$ <u><i>0</i></u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>		2. REPORT COVERING THE PERIOD FROM: <i>10-1-20</i> TO: <i>10-29-20</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>Cassandra</i>	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution <i>400</i>
Last Name/Organization Name <i>Gladden</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>105 Haddaway</i>			
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>10-8-20</i>
Occupation <i>retired</i>			Aggregate This Election <i>400</i>
Employer			
First Name <i>Tom & Barbara</i>	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution <i>100</i>
Last Name/Organization Name <i>Breman</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>116 Jefferson Pl.ve</i>			
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>10-8-20</i>
Occupation <i>retired</i>			Aggregate This Election <i>655</i>
Employer			
First Name <i>Jim</i>	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution <i>600</i>
Last Name/Organization Name <i>Storchocker</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>93 Hidden Point</i>			
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>10-8-20</i>
Occupation <i>retired</i>			Aggregate This Election <i>1050</i>
Employer			
First Name <i>Brian</i>	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	Amount of Contribution <i>250</i>
Last Name/Organization Name <i>Peole</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>187 Bayshore Dr.</i>			
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>10-19-20</i>
Occupation <i>Best Effort</i>			Aggregate This Election <i>750</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>1350</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>		2. REPORT COVERING THE PERIOD FROM: <i>10-1-20</i> TO: <i>10-29-20</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>1350</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <i>Richard</i>	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Emery</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>282 Lake Terrace Dr.</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Amount of Contribution <i>35</i>
Occupation <i>retired</i>	Date of Contribution <i>10-19-20</i>		Aggregate This Election <i>320</i>
Employer			
First Name <i>Keith</i>	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Lamb</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>107 English Ct.</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Amount of Contribution <i>200</i>
Occupation <i>Post Effect</i>	Date of Contribution <i>10-19-20</i>		Aggregate This Election <i>560</i>
Employer			
First Name <i>Wendy</i>	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Slattery</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>125 Shorecrest Circle</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Amount of Contribution <i>500</i>
Occupation <i>retired</i>	Date of Contribution <i>10-19-20</i>		Aggregate This Election <i>500</i>
Employer			
First Name <i>Kenneth</i>	Middle Name	Contribution Received For:	
Last Name/Organization Name <i>Smith</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <i>202 Walton Ferry Rd.</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>	Amount of Contribution <i>50</i>
Occupation <i>retired</i>	Date of Contribution <i>10-27-20</i>		Aggregate This Election <i>200</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>2135</i>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>		2. REPORT COVERING THE PERIOD FROM: <i>10-1-20</i> TO: <i>10-29-20</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>2135</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:	Amount of Contribution
Last Name/Organization Name <i>Yuisi</i>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	<i>200</i>
Address <i>1050 Willow Park Circle</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>10-24-20</i>
Occupation <i>Rest Effort</i>		Aggregate This Election <i>200</i>	
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
Occupation		Aggregate This Election	
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
Occupation		Aggregate This Election	
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
Occupation		Aggregate This Election	
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>2335</i>

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>10-1-20</i>	TO: <i>10-24-20</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 <i>mail</i>	Amount of Expenditure <i>13,740.90</i>
Last Name/Business Name <i>Direct Edge</i>					
Address <i>2000 Glen Echo Rd.</i>					
City <i>Nashville</i>	State <i>TN</i>	Zip Code <i>37215</i>			
First Name		Middle Name		Purpose of Expenditure <i>advertising</i>	Amount of Expenditure <i>20,746.60</i>
Last Name/Business Name <i>Whitespace Advertising</i>					
Address <i>357 Hunters Lane</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>			
First Name		Middle Name		Purpose of Expenditure <i>Postage</i>	Amount of Expenditure <i>70.00</i>
Last Name/Business Name <i>USPS</i>					
Address <i>Imperial Blvd</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>			
First Name		Middle Name		Purpose of Expenditure <i>Printing</i>	Amount of Expenditure <i>349.49</i>
Last Name/Business Name <i>ASAP</i>					
Address <i>116 Imperial Blvd.</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>			
First Name		Middle Name		Purpose of Expenditure <i>signs</i>	Amount of Expenditure <i>437.00</i>
Last Name/Business Name <i>Middle Tenn. Laminating</i>					
Address <i>152 Evergreen Circle</i>					
City <i>Hendersonville</i>	State <i>TN</i>	Zip Code <i>37075</i>			
First Name		Middle Name		Purpose of Expenditure <i>voter data</i>	Amount of Expenditure <i>50.00</i>
Last Name/Business Name <i>Sumner County Election Office</i>					
Address <i>355 N. Belvedere Dr</i>					
City <i>Gallatin</i>	State <i>TN</i>	Zip Code <i>37066</i>			
5. TOTAL ITEMIZED EXPENDITURES				<i>35,393.99</i>	
<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>					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>			2. REPORT COVERING THE PERIOD		
			FROM: <i>10-1-20</i>	TO: <i>10-24-20</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>35,393.99</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>Hendersonville Area Chamber of Comm.</i>		<i>Event Sponsorship</i>	<i>200</i>		
Address <i>100 Country Club Dr.</i>					
City <i>Hendersonville</i>	State <i>TN</i>				Zip Code <i>37075</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				<i>35,593.99</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.)					

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Clary for Mayor</i>				2. REPORT COVERING THE PERIOD FROM: <i>10-1-20</i> TO: <i>10-24-20</i>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
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		Address		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		90	
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution		140	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		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		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		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		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		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		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
City		State		Date of In-Kind Contribution		Aggregate this Election	
Occupation		Employer		Description of In-Kind Contribution			
5. TOTAL ITEMIZED IN-KIND 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 in-kind contributions, this amount must be shown in item 22b. of summary.)</small>					90		