

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 01-18-2021	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 type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input checked="" 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 10-25-2020	8.b. ENDING DATE OF REPORTING PERIOD 01-15-2021
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>Brenda S. Payne</u> signature of candidate	<u>1/22/2021</u> date
<u>R. Jennings</u> signature of political treasurer	<u>1/22/2021</u> date
11. WITNESS SIGNATURE <u>Beth Dyer</u> signature of witness	<u>1/22/2021</u> date
<u>Beth Dyer</u> signature of witness	<u>1/22/2021</u> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	RECEIVED \$ 3,725.93
b. TOTAL RECEIPTS THIS PERIOD	JAN 25 2021 \$ 6,275.00
c. TOTAL DISBURSEMENTS THIS PERIOD	SUMNER COUNTY \$ 10,000.93
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	ELECTION COMMISSION \$ 0
e. TOTAL LOANS OUTSTANDING	FILED \$ 0
f. TOTAL OBLIGATIONS OUTSTANDING	AM \$ 0
JAN 25 2021	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Brenda S. Payne for Mayor</u>	14. REPORT COVERING THE PERIOD FROM: <u>10-25-2020</u> TO: <u>11-15-2021</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>275.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>6,000.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>6,275.00</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>6,275.00</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>Wire Transfer Fee</u>	\$ <u>10.00</u>
<u>Bank Check Order</u>	\$ <u>50.29</u>
<u>Bank Credit Card Fee</u>	\$ <u>6.70</u>
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
Total of Expenditures (\$100 or less each payee)	\$ <u>66.99</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>9,933.94</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>10,000.93</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>10,000.93</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>1,600.00</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>1,600.00</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 Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD		
				FROM: 10-25-2020	TO: 1-15-2021	
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		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code		Date of Contribution	Aggregate This Election	
Nashville	TN	37206		10-26-2020	500.00	
Occupation		Employer				
Engineering Company						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code		Date of Contribution	Aggregate This Election	
Hendersonville	TN	37075		10-17-2020	300.00	
Occupation		Employer				
Retired						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		300.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code		Date of Contribution	Aggregate This Election	
Hendersonville	TN	37075		10-21-2020	550.00	
Occupation		Employer				
President		Advanced Payment Solutions				
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		5,000.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City	State	Zip Code		Date of Contribution	Aggregate This Election	
Nashville	TN	37212		10-14-2020	5,000.00	
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.)					6,000.00	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S Payne for Mayor			2. REPORT COVERING THE PERIOD FROM 10-25-2020 TO 01-15-2021		
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 Printing	Amount of Expenditure 558.27 (1,264.02) Refund (705.75)
Last Name/Business Name Tri Color Litho					
Address 511 Houston St.					
City Nashville	State TN	Zip Code 37203			
First Name		Middle Name		Purpose of Expenditure Digital Advertising	Amount of Expenditure 5,000.00
Last Name/Business Name Gray Media Group					
Address 1801 Halstead Blvd.					
City Tallahassee	State FL	Zip Code 32309			
First Name Travis		Middle Name		Purpose of Expenditure Campaign Worker	Amount of Expenditure 787.50
Last Name/Business Name Mace					
Address 206 Deerpoint Ct.					
City Hendersonville	State TN	Zip Code 37075			
First Name Levi		Middle Name		Purpose of Expenditure Campaign Worker	Amount of Expenditure 705.00
Last Name/Business Name Bush					
Address 273 Big Station Camp Blvd. Apt. 29-310					
City Cullatin	State TN	Zip Code 37066			
First Name Brenda		Middle Name		Purpose of Expenditure Reimburse for - Postage, supplies, food/treats	Amount of Expenditure 1,846.54
Last Name/Business Name Payne					
Address 1595 Hunt Club Blvd.					
City Cullatin	State TN	Zip Code 37066			
First Name		Middle Name		Purpose of Expenditure Hosting Website	Amount of Expenditure 136.56
Last Name/Business Name Element 47, LLC					
Address 3050 Business Park Circle, Ste 300					
City Goodlettsville	State TN	Zip Code 37072			
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.)					7,769.85

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S Payne for Mayor			2. REPORT COVERING THE PERIOD	
			FROM 2-25-2020	TO 8-15-2021
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 7,769.85	
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 Mobilesphere		Mobile messaging	400.00	
Address				
City Boston	State MA			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name ASAP Printing		Printing	293.88	
Address 116 Imperial Blvd.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Tolberts		Food for Event	120.55	
Address 105 Forest Retreat Rd.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Facebook		Social Media Post Boost	294.91	
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name US Postmaster		Postage	220.00	
Address 105 Imperial Blvd				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Gallatin Shalom Zone		Donation to Sect. 501(c)(3) org.	417.00	
Address 600 Small St., Ste. 107A				
City Gallatin	State TN			
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.)			9,516.19	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S Payne for Mayor			2. REPORT COVERING THE PERIOD FROM 1-25-2020 TO 01-15-2021		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 9,516.19		
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		Donation to Sect. 501(c)(3) org.	417.75
Community Life Bridge		177 E. Main St. Ste. 1			
City	State	Zip Code			
Hendersonville	TN	37075			
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.)					9,933.94

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM 10-25-2020 TO 01-15-2021	
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	
Last Name/Organization Name Southeastern Commercial Prop.		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 100 Kennesaw Blvd.		Value of In-Kind Contribution 1,600.00	
City Chattanooga		Date of In-Kind Contribution 11-25-2020	
State TN		Aggregate this Election	
Zip Code 37066		Description of In-Kind Contribution Campaign Headquarters	
Occupation		Employer	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation		Employer	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation		Employer	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
Zip Code		Description of In-Kind Contribution	
Occupation		Employer	
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
State		Aggregate this Election	
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.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)			1,600.00

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="font-size: 1.2em; font-family: cursive;">Brenda S Payne for Mayor</div>	2. REPORT COVERING THE PERIOD FROM: 10-25-2020 TO: 01-15-2021
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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		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
State		<input type="checkbox"/> Runoff (Local Elections Only)			
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	City	State
Zip Code		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	City	State
Zip Code		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	City	State
Zip Code		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	City	State
Zip Code		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			
Brenda S. Payne for Mayor			FROM: 10-25-2020		TO: 01-15-2021	
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		0	0	0	0
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.)			0	0	0	0