

AMENDED

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10-25-2020		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) 473-8945			
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 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 10-1-2020		8.b. ENDING DATE OF REPORTING PERIOD 10-24-2020	
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>Brenda S. Payne</u> signature of candidate		<u>[Signature]</u> signature of political treasurer	
<u>1/22/2021</u> date		<u>1/22/2021</u> date	
11. WITNESS SIGNATURE <u>Beth Dyer</u> signature of witness		<u>Beth Dyer</u> signature of witness	
<u>1/22/2021</u> date		<u>1/22/2021</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>35,748.54</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>13,500.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>45,522.61</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>3,125.93</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	

FILED **PM**
JAN 25 2021
SUMNER COUNTY
ELECTION COMMISSION



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>10-1-2020</u> TO: <u>10-24-2020</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>1,200.00</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>12,300.00</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>13,500.00</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>13,500.00</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 Service Fees</u>	\$ <u>72.70</u>
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
Total of Expenditures (\$100 or less each payee)	\$ <u>72.70</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>45,449.91</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>45,522.61</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>45,522.61</u>
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ <u>300.00</u>
b. Itemized in-kind contributions (over \$100 from each source this period)	\$ <u>2,097.36</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>2,397.36</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 10-1-2020 TO 10-24-2020	
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 Ann		Middle Name	
Last Name/Organization Name Buchanan		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1735 Foxland Blvd.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin	State TN	Zip Code 37066	Date of Contribution 10/9/2020
Occupation Realtor		Aggregate This Election 200.00	
Employer Keller Williams Realty		Amount of Contribution 200.00	
First Name Angela		Middle Name	
Last Name/Organization Name Campbell		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 303 Birkshire Place		<input type="checkbox"/> Runoff (Local Elections Only)	
City Gallatin	State TN	Zip Code 37066	Date of Contribution 10/15/2020
Occupation Realtor		Aggregate This Election 600.00	
Employer Southeastern Properties		Amount of Contribution 500.00	
First Name Keith		Middle Name	
Last Name/Organization Name Dennen		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 135 Saranac Trail		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 10/9/2020
Occupation Attorney		Aggregate This Election 500.00	
Employer Bone, McAllester & Norton		Amount of Contribution 500.00	
First Name Rene		Middle Name	
Last Name/Organization Name Fields		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 303 Bayshore Dr.		<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville	State TN	Zip Code 37075	Date of Contribution 10/9/2020
Occupation Home maker		Aggregate This Election 1,350.00	
Employer		Amount of Contribution 1,250.00	
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.)			2,450.00



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM 10-1-2020 TO 10-24-2020		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 2,450.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name Stanley	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 1,250.00	
Last Name/Organization Name Fields		Date of Contribution 10/9/2020	Aggregate This Election 1,350.00	
Address 303 Bayshore Dr.				
City Hendersonville	State TN			Zip Code 37075
Occupation Partner				
Employer Tenn Trading Co.				
First Name Garry	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 Forsythe		Date of Contribution 10/19/2020	Aggregate This Election 500.00	
Address 139 Lake Harbor Dr.				
City Hendersonville	State TN			Zip Code 37075
Occupation Retired				
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 500.00	
Last Name/Organization Name Gastroenterology & Hepatology		Date of Contribution 10/9/2020	Aggregate This Election 500.00	
Address 107 Glen Oak Blvd. Assoc. PUC				
City Hendersonville	State TN			Zip Code 37075
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 1,000.00	
Last Name/Organization Name Glenbrook Village GP		Date of Contribution 10/9/2020	Aggregate This Election 1,000.00	
Address 1720 West End Ave. Ste. 600				
City Nashville	State TN			Zip Code 37203
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.)			5,700.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD FROM 10-1-2020 TO 10-24-2020			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 5,700.00		
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		1,000.00	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of Contribution		Aggregate This Election	
Nashville		TN		10/9/2020		1,000.00	
Occupation		Zip Code					
		37203					
Employer							
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		Date of Contribution		Aggregate This Election	
Hendersonville		TN		10/7/2020		500.00	
Occupation		Zip Code					
Contractor		37075					
Employer							
Hardaway Construction							
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		/	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of Contribution		Aggregate This Election	
/		/		/		/	
Occupation		Zip Code					
/		/					
Employer							
/							
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		1,000.00	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State		Date of Contribution		Aggregate This Election	
Hendersonville		TN		10/15/2020		1,000.00	
Occupation		Zip Code					
Rental Owner		37075					
Employer							
Self Employed							
5. TOTAL ITEMIZED CONTRIBUTIONS					Amount		
(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.)					8,200.00		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD From 10-1-2020 To 10-24-2020		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 8,200.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name Robert		Middle Name L.		Contribution Received For		Amount of Contribution 600.00
Last Name/Organization Name Jennings				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 65 Blue Ridge Trace				<input type="checkbox"/> Runoff (Local Elections Only)		
City Hendersonville		State TN	Zip Code 37075	Date of Contribution 10/15/2020		Aggregate This Election 1,600.00
Occupation CPA						
Employer Jennings & Clouse, PC						
First Name Gregory		Middle Name		Contribution Received For		Amount of Contribution 1,000.00
Last Name/Organization Name Luttrell				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 5 Stonybrook Court				<input type="checkbox"/> Runoff (Local Elections Only)		
City Ramsey		State NJ	Zip Code 07446	Date of Contribution 10/6/2020		Aggregate This Election 1,000.00
Occupation Global Account Mgr.						
Employer Eastern Computer Inc.						
First Name John		Middle Name		Contribution Received For		Amount of Contribution 250.00
Last Name/Organization Name Oday				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 147 Windmill Pointe Circle				<input type="checkbox"/> Runoff (Local Elections Only)		
City Hendersonville		State TN	Zip Code 37075	Date of Contribution 10/1/2020		Aggregate This Election 250.00
Occupation Ramp Agent						
Employer Metro Airport Services						
First Name James		Middle Name		Contribution Received For		Amount of Contribution 1,000.00
Last Name/Organization Name Payne				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		
Address 1595 Hunt Club Blvd.				<input type="checkbox"/> Runoff (Local Elections Only)		
City Gallatin		State TN	Zip Code 37066	Date of Contribution 10/15/2020		Aggregate This Election 1,000.00
Occupation Retired						
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 5b. of summary.)					11,050.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor			2. REPORT COVERING THE PERIOD FROM 10-20-2020 TO 10-24-2020		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 11,050.00	
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	1,000.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				10/9/2020	1,000.00
Employer					
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	250.00
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				10/16/2020	250.00
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				12,300.00	
<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 5a of summary.)</small>					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor			2. REPORT COVERING THE PERIOD	
			FROM: 10-1-2020	TO: 10-24-2020
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		Amount of Expenditure
Last Name/Business Name Amaranth Designs		Printing		400.95
Address 1015 Mansker Farms Blvd.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name ASAP Printing		Printing		2,653.37
Address 116 Imperial Blvd.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		/		/
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Comcast		TV Commercial		4999.70
Address 1700 N 49th St.				
City Philadelphia	State PA			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Conquest Communications		Survey		3,575.00
Address 2812 Emerywood Pky, Ste. 103				
City Richmond	State VA			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Gray Media Group		Digital Advertising		20,000.00
Address 1801 Halstead Blvd.				
City Tallahassee	State FL			
5. TOTAL ITEMIZED EXPENDITURES			Amount	
(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 3b. of summary.)			31,629.02	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor			2. REPORT COVERING THE PERIOD	
			FROM 10-1-2020	TO 10-24-2020
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 31,629.02
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 Mr Sign Man		Printing		2,467.42
Address 129 Commerce Dr.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name TruColor Litho Inc.		Printing		1,557.91
Address 511 Houston Street				
City Nashville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name US Postmaster		Postage		7,902.20
Address 105 Imperial Blvd.				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Element 47		Website Hosting		136.50
Address 3050 Business Park Circle, Ste. 300				
City Goodlettsville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Busy Bee Printing LLC		Printing		586.80
Address 334 W. Main St.				
City Hendersonville	State TN			
First Name Levi	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Bush		Campaign Worker		682.50
Address 273 Big Station Camp Blvd.				
City Gallatin	State TN			
5. TOTAL ITEMIZED EXPENDITURES <small>(Carry forward to item 3. of next page if additional pages of this form are used.) <small>(If this is the last page of expenditures, this amount must be shown in item 3b. of summary.)</small></small>				44,962.41



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD	
		FROM 10-24-2020	TO 10-24-2020
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 44,962.41
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name Travis	Middle Name	Purpose of Expenditure Campaign Worker	Amount of Expenditure 487.50
Last Name/Business Name Mace			
Address Job Deerpoint Ct.			
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	
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			45,449.91
<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 3b. of summary.)</small>			

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD	
				FROM: 10-1-2020	TO: 10-24-2020
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 Tamela		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Nayes				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 120 Governors Pt.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 120.00	
City Hendersonville		State TN		Aggregate this Election 1,000.00	
Zip Code 37075		Description of In-Kind Contribution Event Barista			
Occupation Retired		Employer			
First Name Michele		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Mize				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 105 Imperial Blvd.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 275.00	
City Hendersonville		State TN		Aggregate this Election 325.00	
Zip Code 37075		Description of In-Kind Contribution Event Music			
Occupation		Employer			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Pour Vous!				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 263 Indian Lake Blvd.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 259.23	
City Hendersonville		State TN		Aggregate this Election 259.23	
Zip Code 37075		Description of In-Kind Contribution Event Beverages			
Occupation		Employer			
First Name Carol		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Ernst				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 119 Glen Leven Way		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 172.42	
City Hendersonville		State TN		Aggregate this Election 822.42	
Zip Code 37075		Description of In-Kind Contribution Event Food + Invitations			
Occupation Housewife		Employer			
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Busy Bee Printing LLC				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 334 W. Main St.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 500.00	
City Hendersonville		State TN		Aggregate this Election 500.00	
Zip Code 37075		Description of In-Kind Contribution Printing			
Occupation		Employer			
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS					1,326.65
(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD	
				FROM 10-1-2020	TO 10-24-2020
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 1,326.65
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 Jalene		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Brown				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 103 Meadow Lake Dr.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 75.00	
City Hendersonville		State TN		Zip Code 37075	
Occupation Insurance Adm				Aggregate this Election 1575.00	
Description of In-Kind Contribution Event Food					
First Name Jennifer		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Finlin				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 112 Merrimac Dr.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 75.00	
City Hendersonville		State TN		Zip Code 37075	
Occupation Housewife				Aggregate this Election 1075.00	
Description of In-Kind Contribution Event Food					
First Name Amanda		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Foster				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1 Wyndermere		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 75.00	
City Hendersonville		State TN		Zip Code 37075	
Occupation				Aggregate this Election 175.00	
Description of In-Kind Contribution Event Food					
First Name Dana		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Hire				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address Cumberland Hills Dr.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 75.00	
City Hendersonville		State TN		Zip Code 37075	
Occupation Fin Director City of Mt Juliet				Aggregate this Election 125.00	
Description of In-Kind Contribution Event Food					
First Name Mary		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name Ippich				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address Chesapeake Harbor Blvd.		Date of In-Kind Contribution 10-20-2020		Value of In-Kind Contribution 75.00	
City Hendersonville		State TN		Zip Code 37075	
Occupation IT Director City of Hendersonville				Aggregate this Election 125.00	
Description of In-Kind Contribution Event Food					
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.)					1701.65

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor		2. REPORT COVERING THE PERIOD FROM: 10-1-2020 TO: 10-24-2020	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1701.65
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 Frances		Middle Name	
Last Name/Organization Name Marcou		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 131 Indian Lake Blvd., Ste. 200		Date of In-Kind Contribution 10-20-2020	
City Hendersonville State IN Zip Code 37075		Aggregate this Election 1125.50	
Occupation Realtor Employer Remax Choice Prop.		Description of In-Kind Contribution Event Food	
First Name Dede		Middle Name	
Last Name/Organization Name Pinson		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 166 Ashland Pt.		Date of In-Kind Contribution 10-20-2020	
City Hendersonville State IN Zip Code 37075		Aggregate this Election 170.71	
Occupation Retired Employer		Description of In-Kind Contribution Event Food + Decor	
First Name Loren		Middle Name	
Last Name/Organization Name Sluder		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 110 W. Braxton Lane		Date of In-Kind Contribution 10-20-2020	
City Hendersonville State IN Zip Code 37075		Aggregate this Election 125.50	
Occupation Exec. Director Community Life Br. Employer		Description of In-Kind Contribution Event Food	
First Name Mary		Middle Name A.	
Last Name/Organization Name Womeldorf		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address 143 River Chase		Date of In-Kind Contribution 10-20-20	
City Hendersonville State IN Zip Code 37075		Aggregate this Election 1075.50	
Occupation Retired Employer		Description of In-Kind Contribution Event Food	
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		Date of In-Kind Contribution	
City		State	
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.) **2097.36**

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Brenda S. Payne for Mayor				2. REPORT COVERING THE PERIOD FROM: 10-1-2020 TO: 10-24-2020					
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				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) (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, 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>10-1-2020</i>		TO: <i>10-24-2020</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)																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">First Name</td> <td style="width: 30%;">Middle Name</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">Last Name/Business Name</td> </tr> <tr> <td colspan="4">Address</td> </tr> <tr> <td>City</td> <td>State</td> <td colspan="2">Zip Code</td> </tr> <tr> <td colspan="4">Description of Obligation</td> </tr> </table>				First Name	Middle Name			Last Name/Business Name				Address				City	State	Zip Code		Description of Obligation				0	0	0	0
First Name	Middle Name																										
Last Name/Business Name																											
Address																											
City	State	Zip Code																									
Description of Obligation																											
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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																				