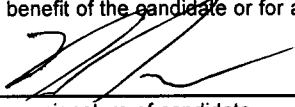
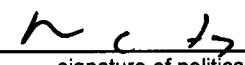
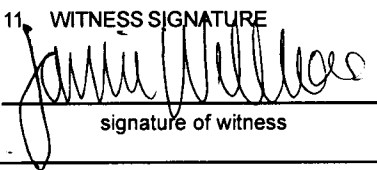
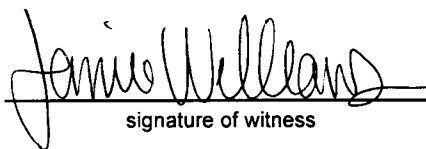


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/28/2014	2.a. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO RE-ELECT JUDGE BROWN		
2.b. IF COMMITTEE, NAME OF CANDIDATE BARRY BROWN	3. ELECTION DATE MAY 6, 2014		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 607 COMMONS DR GALLATIN TN 37066 615-452-8256			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 245 MARK CIR GALLATIN TN 37066 615-452-2391			
5. OFFICE SOUGHT (include district number, if applicable) GENERAL SESSION II 18TH DISTRICT	6. NAME OF POLITICAL TREASURER (may be candidate) RONNIE C. FOX		
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 checked="" 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 APRIL 1, 2014	8.b. ENDING DATE OF REPORTING PERIOD APRIL 26, 2014		
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
 signature of candidate	4/28/14 date	 signature of political treasurer	4/26/2014 date
11. WITNESS SIGNATURE  signature of witness	4/28/14 date	 signature of witness	4/28/14 date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ 2958.31		
b. TOTAL RECEIPTS APR 28 2014	\$ 2425.00		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ 2822.97		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ 2560.34		
e. TOTAL LOANS OUTSTANDING	\$ 0		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ 0		



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO RE-ELECT JUDGE BROWN				2. REPORT COVERING THE PERIOD FROM: 4/1/14 TO: 4/26/14		
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 JAY		Middle Name		Contribution Received For:		Amount of Contribution 250.00
Last Name/Organization Name LONGMIRE				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 3615 HAMPTON AVE				<input type="checkbox"/> Runoff (Local Elections Only)		
City NASHVILLE		State TN	Zip Code 37215	Date of Contribution 4/3/2014		Aggregate This Election 250.00
Occupation ATTORNEY						
Employer SELF EMPLOYED						
First Name BARRY		Middle Name		Contribution Received For:		Amount of Contribution 1000.00
Last Name/Organization Name BROWN				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 245 MARK CIR				<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 4/3/2014		Aggregate This Election 2000.00
Occupation JUDGE/CANDIDATE						
Employer SUMNER COUNTY						
First Name SUE		Middle Name		Contribution Received For:		Amount of Contribution 200.00
Last Name/Organization Name HERRON				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 133 PERRY STREET				<input type="checkbox"/> Runoff (Local Elections Only)		
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 4/17/2014		Aggregate This Election 200.00
Occupation RETIRED						
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 (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.)					1450.00	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO RE-ELECT JUDGE BROWN			2. REPORT COVERING THE PERIOD	
			FROM: 4/1/14	TO: 4/26/14
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 GALLATIN NEWS EXAMINER		ADVERTISING		1350.00
Address 1 EXAMINER CT				
City GALLATIN	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name WESTMORELAND NEWS		ADVERTISING		360.00
Address P.O. BOX 239				
City WESTMORELAND	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name PORTLAND LEADER		ADVERTISING		459.00
Address 109 S BROADWAY				
City PORTLAND	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name CONCEPT ONE		ADVERTISING T SHIRTS		353.97
Address 210 LOCUST ST				
City GALLATIN	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name BL&D MANAGEMENT CO		FUNDRAISER		300.00
Address 1501 EAST MAIN ST				
City GALLATIN	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES				2822.97
<small>(Carry forward to item 3. of next page if additional pages of this form are used.)</small>				
<small>(If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)</small>				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO RE-ELECT JUDGE BROWN				2. REPORT COVERING THE PERIOD		
				FROM: 4/1/14	TO: 4/26/14	
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 BARRY		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
				<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		113.62
Last Name/Organization Name BROWN				<input type="checkbox"/> Runoff (Local Elections Only)		
Address 245 MARK CIRCLE				Date of In-Kind Contribution 4/11/2014		Aggregate this Election
City GALLATIN		State TN	Zip Code 37066			Description of In-Kind Contribution CAMPAIGN MATERIAL
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code			Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State	Zip Code			Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
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.)					113.62	