



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 9-30-24 2.a. Candidate or Committee Name: Jamie clary
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11-5-24
4. Campaign Address: Home address
- City: _____ State: _____ Zip Code: _____ Phone: _____
5. Candidate Home Address: 125 N. Shadowhaven Way
- City: Hendersonville State: TN Zip Code: 37075 Phone: 615-824-5999
- Candidate Email Address: jamielclary@comcast.net
6. Office Sought: (include district number, if applicable) Hendersonville Mayor
7. Name of Political Treasurer (may be candidate): Jamie clary
- Political Treasurer Email Address: _____
8. Category or Report: (check one)
- ☐ First Quarter ☐ Second Quarter ☒ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
- ☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: July 1, 2024 End Date: Sept. 30, 2024
10. Detailed Disclosure: (Check one)
- ☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
- ☒ 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.
11. 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.

Jamie Clary

Candidate Signature

Oct. 7, 2024

Date

Jamie Clary

Political Treasurer Signature

Oct. 7, 2024

Date

Dem B. Dodson

Witness Signature

Oct. 7, 2024

Date

Karen Elms

Witness Signature

10/7/2024

Date

12. Summary:

a. Balance On Hand Last Report AM **FILED** PM \$ 50,400.75

b. Total Receipts This Period \$ 11,105.00

c. Total Disbursements This Period **OCT 7 2024** \$ 8,712.72

d. Balance On Hand (12.a. plus 12.b. minus 12.c.) **SUMNER COUNTY ELECTION COMMISSION** \$ 52,793.03

e. Total Loans Outstanding \$ 0

f. Total Obligations Outstanding \$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Clary for Mayor

14. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 3070
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ 8035
- c. Loans Received This Reporting Period \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 8035 11105

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 8712.72
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.) \$ 8712.72

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 0
- c. Total In-Kind Contributions Received This Period \$ 0

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR

First Name: Dave and Jennifer Middle Name: _____ Last Name: Easton

Address: 136 Wynnbrooke Trace City: Hendersonville State: TN Zip Code: 37075

Occupation: Communications Director Employer: State of Tennessee

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 100 Date of Contribution: 7-4-24 Aggregate This Election: \$ 400

Business or Organization Name: _____ OR

First Name: Jack Middle Name: _____ Last Name: Madden

Address: 110 Governors Pt. City: Hendersonville State: TN Zip Code: 37075

Occupation: retired Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 500 Date of Contribution: 7-7-24 Aggregate This Election: \$ 1500

Business or Organization Name: _____ OR

First Name: Vicki & Dennis Middle Name: _____ Last Name: Wilson

Address: 116 Natchez Dr. City: Hendersonville State: TN Zip Code: 37075

Occupation: Best Effort Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 100 Date of Contribution: 7-5-24 Aggregate This Election: \$ 225

Business or Organization Name: _____ OR

First Name: Joseph & Janice Middle Name: _____ Last Name: King

Address: 104 Golf View Dr. City: Hendersonville State: TN Zip Code: 37075

Occupation: retired Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ 100 Date of Contribution: 7-7-24 Aggregate This Election: \$ 250

Total Contributions: \$ 800

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 800

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Ottis & Sherrill Middle Name: _____ Last Name: Jones
Address: 144 Nathan Forester Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-7-24 Aggregate This Election: \$ 345

Business or Organization Name: _____ OR
First Name: Joe & Shelley Middle Name: _____ Last Name: Holland
Address: 126 Riviera Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 7-8-24 Aggregate This Election: \$ 400

Business or Organization Name: _____ OR
First Name: John & Kim Middle Name: _____ Last Name: Peel
Address: 162 Hedgeland Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: Best Effort Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-15-24 Aggregate This Election: \$ 550

Business or Organization Name: _____ OR
First Name: Joyce Middle Name: _____ Last Name: Clary
Address: 117 Lake Valley Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-17-24 Aggregate This Election: \$ 200

Total Contributions: \$ 1,300

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Clary For Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,300

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: David Middle Name: _____ Last Name: Owen
Address: 104 Stuart Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 7-16-24 Aggregate This Election: \$ 1600

Business or Organization Name: Lyn Ealey, Land Solutions Company OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2925 Berry Hill Dr. City: Nashville State: TN Zip Code: 37204
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 7-17-24 Aggregate This Election: \$ 1000

Business or Organization Name: _____ OR
First Name: Lee & Cindy Middle Name: _____ Last Name: Peterson
Address: 248 Lake Terrace Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: Grant coordinator Employer: State of Tennessee
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-17-24 Aggregate This Election: \$ 260

Business or Organization Name: _____ OR
First Name: Sheryl Middle Name: _____ Last Name: Hodde
Address: 1 Lynnwood Dr. City: Nashville State: TN Zip Code: 37205
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-15-24 Aggregate This Election: \$ 300

Total Contributions: \$ 2,500

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 2,500

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Harriet Middle Name: _____ Last Name: Griffith
Address: 125 Indian Lake Blvd. #4413 City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 35 Date of Contribution: 7-25-24 Aggregate This Election: \$ 110

Business or Organization Name: _____ OR
First Name: Jeff Middle Name: _____ Last Name: Coker
Address: 101 Houghland St. City: Hendersonville State: TN Zip Code: 37075
Occupation: Business owner Employer: Coker Insurance
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 7-26-24 Aggregate This Election: \$ 1000

Business or Organization Name: _____ OR
First Name: Kathy b Lawrence Middle Name: _____ Last Name: Munumaker
Address: 104 Bluegrass Court City: Hendersonville State: TN Zip Code: 37075
Occupation: Best Effort Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-22-24 Aggregate This Election: \$ 220

Business or Organization Name: _____ OR
First Name: Bob Middle Name: _____ Last Name: Pospicil
Address: 178 River Chase City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 7-25-24 Aggregate This Election: \$ 1500

Total Contributions: \$ 4135

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,135

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Jeff Middle Name: _____ Last Name: Phillips
Address: 128 Allen Drive City: Hendersonville State: TN Zip Code: 37075
Occupation: Retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 7-27-24 Aggregate This Election: \$ 150

Business or Organization Name: Twin Hills Group OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 110 Glen Leven Way City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 1800 Date of Contribution: 8-5-24 Aggregate This Election: \$ 1800

Business or Organization Name: _____ OR
First Name: Steve Middle Name: _____ Last Name: Knight
Address: 210 Sequoyah Trail City: Hendersonville State: TN Zip Code: 37075
Occupation: retired property owner Employer: self
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 800 Date of Contribution: 8-7-24 Aggregate This Election: \$ 1800

Business or Organization Name: _____ OR
First Name: Byron Middle Name: _____ Last Name: Stephens
Address: 1001 Forest Harbor Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: business owner Employer: self
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 8-8-24 Aggregate This Election: \$ 200

Total Contributions: \$ 7,035

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 7,035

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Bruce Middle Name: _____ Last Name: Hurst
Address: 260 Hidden Lake Rd. City: Hendersonville State: TN Zip Code: 37075
Occupation: Business Owner Employer: Self
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 8-11-24 Aggregate This Election: \$ 500

Business or Organization Name: _____ OR
First Name: John and Patti Middle Name: _____ Last Name: Grigsby
Address: 113 Cumberland Blue Trail City: Hendersonville State: TN Zip Code: 37075
Occupation: Business Owner Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 8-15-24 Aggregate This Election: \$ 300

Business or Organization Name: _____ OR
First Name: Andy Middle Name: _____ Last Name: Griffin
Address: 113 Jefferson Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: referee Employer: ~~MTBOA~~ HBOA
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 8-15-24 Aggregate This Election: \$ 200

Business or Organization Name: _____ OR
First Name: Tod and June Middle Name: _____ Last Name: Burnham
Address: 125 Dorcas Drive City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 9-18-24 Aggregate This Election: \$ 400

Total Contributions: \$ 8035

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Wix OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: web site

Amount of Expenditure: \$ 340.86 Date of Expenditure: \$ 9-30-24

Business or Organization Name: Baskin - Robbins OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 170 E. Main St City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: refreshments

Amount of Expenditure: \$ 115.02 Date of Expenditure: \$ 9-15-24

Business or Organization Name: ASAP OR

First Name: 116 Imperial Blvd. Middle Name: _____ Last Name: _____

Address: _____ City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Printing

Amount of Expenditure: \$ 174.63 Date of Expenditure: \$ 7-22-24

Business or Organization Name: ASAP OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 116 Imperial Blvd. City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Printing

Amount of Expenditure: \$ 874.30 Date of Expenditure: \$ 7-30-24

Business or Organization Name: Office Depot OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 252 East Main St. City: Hendersonville State: TN Zip Code: 37075

Purpose of Expenditure: Postage b ink

Amount of Expenditure: \$ 187.30 Date of Expenditure: \$ 7-29-24

Total Expenditures: \$ 1688.11

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Clary for Mayor
2. Reporting Period: Start Date: 7-1-24 End Date: 9-30-24
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,688.11

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. All expenditures must be itemized. If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: William Slater for State Rep. OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 299 Sunset Island Trail City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Sponsorship / Advertising
Amount of Expenditure: \$ 250 Date of Expenditure: \$ 9-20-24

Business or Organization Name: Mail Chimp OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: emailing
Amount of Expenditure: \$ 4,728.61 Date of Expenditure: \$ Aug. 30, 2024

Business or Organization Name: USPS OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 105 Imperial Blvd. City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: Postage
Amount of Expenditure: \$ 2046.00 Date of Expenditure: \$ July 22, 2024

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ 8712.72

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)