



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. Date: July 11, 2023 2.a. Candidate or Committee Name: Clary for Mayor
 2.b. If Committee, Name of Candidate: Jamie Clary 3. Election Date: 11-5-24
 4. Campaign Address: 125 N. Shadowhaven Way
 City: Hendersonville State: TN Zip Code: 37075 Phone: 615-824-5999
 5. Candidate Home Address: SAME
 City: _____ State: _____ Zip Code: _____ Phone: _____
 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

9. Reporting Period: Start Date: 1-16-23 End Date: 6-30-23

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.

<u>Jamie Clary</u>	<u>7-14-23</u>	<u>Jamie Clary</u>	<u>7-14-23</u>
Candidate Signature	Date	Political Treasurer Signature	Date

<u>Jamie Clary</u>	<u>7/14/23</u>	<u>Jamie Clary</u>	<u>7/14/23</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report	JUL 14 2023	\$	15,928.26
b. Total Receipts This Period	SUMNER COUNTY	\$	12,925.00
c. Total Disbursements This Period	ELECTION COMMISSION	\$	1,331.01
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)		\$	27,522.25
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: 1-16-23 End Date: 6-30-23

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 4470
(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) \$ 8455
- 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.) \$ 12,925.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 1,331.01
(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.)..... \$ 1331.01

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: 1-10-23 End Date: 6-30-23
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: Kathy & Conrad Middle Name: _____ Last Name: Shackelford
Address: 1002 Golf Club Ct. 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: 5-10-23 Aggregate This Election: \$ 300

Business or Organization Name: _____ OR
First Name: James Middle Name: _____ Last Name: Flockencier
Address: 394 Bayshore 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: 5-11-23 Aggregate This Election: \$ 100

Business or Organization Name: _____ OR
First Name: James Middle Name: _____ Last Name: Stonehacker
Address: 93 Hidden Point City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 150 Date of Contribution: 5-11-23 Aggregate This Election: \$ 250

Business or Organization Name: _____ OR
First Name: Ron and Patricia Middle Name: _____ Last Name: Woods
Address: 181 B Clifftop 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: \$ 500 Date of Contribution: 5-13-23 Aggregate This Election: \$ 500

Total Contributions: \$ 950

(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: 1-16-23 End Date: 6-30-23
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 950

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: John Middle Name: M. Last Name: Martin
Address: 124 Ashland Pt. City: Hendersonville State: TN Zip Code: 37075
Occupation: dentist Employer: self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 200 Date of Contribution: 5-13-23 Aggregate This Election: \$ 200

Business or Organization Name: _____ OR
First Name: John & Barbara Middle Name: _____ Last Name: Evans
Address: 155 Cumberland Pr. City: Hendersonville State: TN Zip Code: 37075
Occupation: insurance Employer: self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 5-15-23 Aggregate This Election: \$ 1500

Business or Organization Name: _____ OR
First Name: David Middle Name: _____ Last Name: Owen
Address: 104 Stuart Drive 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: 5-16-23 Aggregate This Election: \$ 1100

Business or Organization Name: _____ OR
First Name: Steve Middle Name: _____ Last Name: Knight
Address: 210 Sequoyah Cir. City: Hendersonville State: TN Zip Code: 37075
Occupation: property owner Employer: self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 5-17-23 Aggregate This Election: \$ 1000

Total Contributions: \$ 3,650

(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: 1-16-23 End Date: 6-30-23
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3650

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ OR
First Name: Grace + Rhonda Middle Name: _____ Last Name: Oliver, Marko
Address: 104 Liberty Ct. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 5-22-23 Aggregate This Election: \$ 2,000

Business or Organization Name: _____ OR
First Name: Bob Middle Name: _____ Last Name: Hendricks
Address: 137 Deerfoot Ct. City: Hendersonville State: TN Zip Code: 37075
Occupation: retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only) 215
Amount of Contribution: \$ 105 Date of Contribution: 5-24-23 Aggregate This Election: \$ _____

Business or Organization Name: _____ OR
First Name: Jane Middle Name: _____ Last Name: Hamm
Address: 117 Cumberland Blue Tr. 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: 6-22-23 Aggregate This Election: \$ 500

Business or Organization Name: _____ OR
First Name: Bobbie Middle Name: _____ Last Name: Welty
Address: 125 Haddaway 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: 6-1-23 Aggregate This Election: \$ 130

Total Contributions: \$ 5,355
(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: 1-16-23 End Date: 6-30-23
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 5355

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: 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: 6-7-23 Aggregate This Election: \$ 500

Business or Organization Name: _____ OR
First Name: Craig & Leslie Middle Name: _____ Last Name: Heinrich
Address: 715 Cumberland Hills Dr. City: Hendersonville State: TN Zip Code: 37075
Occupation: engineer Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 6-8-23 Aggregate This Election: \$ 500

Business or Organization Name: _____ OR
First Name: Susan Middle Name: _____ Last Name: Bale
Address: 106 Berrington Ct City: Hendersonville State: TN Zip Code: 37075
Occupation: sales Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100 Date of Contribution: 6-11-23 Aggregate This Election: \$ 200

Business or Organization Name: _____ OR
First Name: Sara & Wendy Middle Name: _____ Last Name: Slatery
Address: 125 Shorecrest Cir. City: Hendersonville State: TN Zip Code: 37075
Occupation: _____ Employer: best effort
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 2000 Date of Contribution: 6-11-23 Aggregate This Election: \$ 2100

Total Contributions: \$ 8455

(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: 1-16-23 End Date: 6-30-23
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: ASAP Printing OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 110 Imperial Blvd. City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: printing
Amount of Expenditure: \$ 744.37 Date of Expenditure: 5-1-23

Business or Organization Name: Office Depot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 252 E. Main Street City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: postage
Amount of Expenditure: \$ 63.00 Date of Expenditure: 3-17-23

Business or Organization Name: Office Depot OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 252 E. Main Street City: Hendersonville State: TN Zip Code: 37075
Purpose of Expenditure: postage & supplies
Amount of Expenditure: \$ 523.64 Date of Expenditure: 5-3-23

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: \$ 1331.01

(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.)