



# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates

## For Single-Candidate Committees

1. Date: 1-27-26 2.a. Candidate or Committee Name: Jamie Clary
- 2.b. If Committee, Name of Candidate: \_\_\_\_\_ 3. Election Date: 11-7-28
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: jamieclary@comcast.net
6. Office Sought: (include district number, if applicable) Hendersonville Mayor
7. Name of Political Treasurer (may be candidate): self
- 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, 2025 End Date: January 15, 2026

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 1-27-26  
Candidate Signature Date

Jamie Clary 1-27-26  
Political Treasurer Signature Date

Jamie Clary 1-27-26  
Witness Signature Date

Jamie Clary 1-27-26  
Witness Signature Date

12. Summary:

a. Balance On Hand Last Report	<u>46,576.57</u>	\$ <u>46,576.57</u>
b. Total Receipts This Period		\$ <u>8375.00</u>
c. Total Disbursements This Period		\$ <u>7847.09</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)		\$ <u>47,104.48</u>
e. Total Loans Outstanding		\$ <u>0</u>
f. Total Obligations Outstanding		\$ <u>0</u>

# SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jamie Clary

14. Reporting Period: Start Date: 7-1-25 End Date: 1-15-26

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 3,725  
(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) ..... \$ 4,650
- 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.) ..... \$ 8,375

16. Disbursements:

- a. Total Expenditures (other than loan payments) ..... \$ 7,847.09  
(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.) ..... \$ 7,847.09

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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jamie Clary
2. Reporting Period: Start Date: 7-1-75 End Date: 1-15-26
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \_\_\_\_\_

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: Mail Chimp OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Purpose of Expenditure: emailing  
Amount of Expenditure: \$ 1,763 Date of Expenditure: \$ 9-5-25

Business or Organization Name: Direct Edge OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2000 Glen Echo Rd. City: Nashville State: TN Zip Code: 37215  
Purpose of Expenditure: Printing and postage  
Amount of Expenditure: \$ 3,135.71 Date of Expenditure: \$ 10-15-25

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: \$ 1,459.41 Date of Expenditure: \$ 9-4-25

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: \$ 1014 Date of Expenditure: \$ 9-15-25

Business or Organization Name: Office Max OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 252 East Main St. City: Hendersonville State: TN Zip Code: 37075  
Purpose of Expenditure: Postage and printing  
Amount of Expenditure: \$ ~~399.93~~ 399.93 Date of Expenditure: \$ 11-13-25

Total Expenditures: \$ 7772.09

(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 CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Tamie Clary  
2. Reporting Period: Start Date: 7-1-25 End Date: 1-15-26  
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: Todd Middle Name: \_\_\_\_\_ Last Name: kerr  
Address: 102 Green Meadows Drive City: Hendersonville State: TN Zip Code: 37075  
Occupation: accountant Employer: self  
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ 300 Date of Contribution: 12-24-25 Aggregate This Election: \$ 300

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Robert 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)  
Amount of Contribution: \$ 150 Date of Contribution: 10-2-25 Aggregate This Election: \$ 150

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Mary Middle Name: \_\_\_\_\_ Last Name: Bensall  
Address: 100 Surrey Hill 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: \$ 200 Date of Contribution: 10-2-25 Aggregate This Election: \$ 200

Business or Organization Name: \_\_\_\_\_ OR  
First Name: Kenneth Middle Name: \_\_\_\_\_ Last Name: Verble  
Address: 110 The Landings 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: 10-16-25 Aggregate This Election: \$ 500

Total Contributions: \$ 1150

(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: Jamie Clary  
2. Reporting Period: Start Date: 7-1-25 End Date: 1-15-26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 1,150

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

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: best effort  
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 10-22-25 Aggregate This Election: \$ 500

Business or Organization Name: Land Solutions Company OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 250 Lake Valley Rd. City: Hendersonville State: TN Zip Code: 37075  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 10-30-25 Aggregate This Election: \$ 500

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: \$ 1,000 Date of Contribution: 12-8-25 Aggregate This Election: \$ 1,000

Business or Organization Name: \_\_\_\_\_ OR  
First Name: John & Barbara Middle Name: \_\_\_\_\_ Last Name: Erans  
Address: 155 Cumberland Dr. 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: \$ 1,000 Date of Contribution: 12-10-25 Aggregate This Election: \$ 1,000

Total Contributions: \$ 4,150

(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: Jamie clary  
2. Reporting Period: Start Date: 7-1-25 End Date: 1-15-26  
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 4,150

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: David Owen Real Estate OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: 2054 Nashville Pike City: Gallatin State: TN Zip Code: 37066  
Occupation: business owner Employer: self  
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ 500 Date of Contribution: 10-10-25 Aggregate This Election: \$ 500

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Business or Organization Name: \_\_\_\_\_ OR  
First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)  
Amount of Contribution: \$ \_\_\_\_\_ Date of Contribution: \_\_\_\_\_ Aggregate This Election: \$ \_\_\_\_\_

Total Contributions: \$ 4,650

(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.)