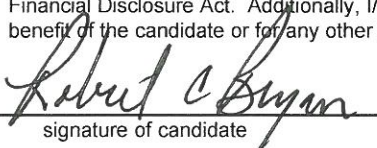
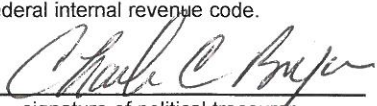
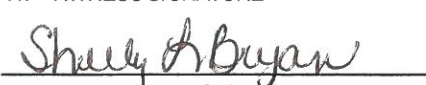
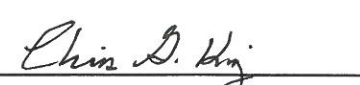


JUL 03 2014  
JUL 03 2014  
ELECTION COMMISSION

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates

### For Single-Candidate Committees

1. DATE OF REPORT 07/01/14		2.a. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE AUGUST 7, 2014	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route PO BOX 803		City LEBANON	State TN Zip Code 37088-0803 Phone 615-970-0007
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route 424 WALTER MORRIS ROAD		City LEBANON	State TN Zip Code 37087 Phone
5. OFFICE SOUGHT (include district number, if applicable) SHERIFF		6. NAME OF POLITICAL TREASURER (may be candidate) ROBERT C. BRYAN	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input checked="" type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input 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 January 16, 2014		8.b. ENDING DATE OF REPORTING PERIOD March 31, 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		 signature of political treasurer	
07/01/14 date		07/01/14 date	
11. WITNESS SIGNATURE			
 signature of witness		 signature of witness	
07/01/14 date		07/01/14 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$ 28,232.71	
b. TOTAL RECEIPTS THIS PERIOD .....		\$ 525.00	
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ 5,864.22	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ 22,893.49	
e. TOTAL LOANS OUTSTANDING .....		\$ 0.00	
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ 0.00	



# SUMMARY PAGE - CANDIDATE

JUL 03 2014  
WILSON COUNTY  
ELECTION COMMISSION

<b>13. NAME OF CANDIDATE OR COMMITTEE (In Full)</b> ROBERT C. BRYAN	<b>14. REPORT COVERING THE PERIOD</b> FROM: 04/01/14      TO: 06/30/14	
--	---	--

**RECEIPTS**

**15. CONTRIBUTIONS (other than loans and interest)**

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 25.00

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 500.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 525.00

**16. LOANS RECEIVED THIS REPORTING PERIOD** ..... \$ 0.00

**17. INTEREST RECEIVED THIS REPORTING PERIOD** ..... \$ 0.00

**18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)** ..... \$ 525.00

**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)

EVENT SPONSORSHIP	\$	175.00
PRINTING	\$	38.24
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) ..... \$ 213.24

b. Itemized Expenditures (Over \$100 each payee this period) ..... \$ 5650.98

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 5864.22

**20. LOAN REPAYMENTS MADE THIS PERIOD** ..... \$ 0.00

**21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)** ..... \$ 5864.22

**22. IN-KIND CONTRIBUTIONS**

a. Unitemized in-kind contributions (\$100 or less from each source this period) ..... \$ 0.00

b. Itemized in-kind contributions (over \$100 from each source this period) ..... \$ 0.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ 0.00

**23. OBLIGATIONS**

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ 0.00

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ 0.00

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ 0.00





JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name TN REALTORS POLITICAL ACTION CMT				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 901 19TH AVE SOUTH				<input type="checkbox"/> Runoff (Local Elections Only)	
City NASHVILLE	State TN	Zip Code 37212	Date of Contribution 05/01/14		Amount of Contribution 200.00
Occupation				Aggregate This Election	
Employer					
First Name JEFF		Middle Name		Contribution Received For:	
Last Name/Organization Name LASATER				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 2004 NEW MARKET AVE				<input type="checkbox"/> Runoff (Local Elections Only)	
City LEBANON	State TN	Zip Code 37087	Date of Contribution 05/15/14		Amount of Contribution 300.00
Occupation SELF				Aggregate This Election	
Employer SELF					
First Name		Middle Name		Contribution Received For:	
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		Amount of Contribution
Occupation				Aggregate This Election	
Employer					
First Name		Middle Name		Contribution Received For:	
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		Amount of Contribution
Occupation				Aggregate This Election	
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.)					500.00



JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0.00
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		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Date of In-Kind Contribution		Value of In-Kind Contribution	
City	State	Zip Code	Aggregate this Election		
Occupation	Employer		Description of In-Kind Contribution		
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.)					0.00



RECEIVED

JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0.00
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 PO BOX RENTAL	Amount of Expenditure 146.00
Last Name/Business Name US POSTMASTER					
Address LEBANON PO					
City LEBANON	State TN	Zip Code 37088			
First Name		Middle Name		Purpose of Expenditure REIMBURSEMENT ON BUILDING EVENT RENTAL 8/7/14	Amount of Expenditure 350.00
Last Name/Business Name PHIL TOMERLIN					
Address 1246 HARTSVILLE PIKE					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure SPONSOR	Amount of Expenditure 150.00
Last Name/Business Name LHS BAND BOOSTER SPONSOR					
Address PO BOX 206					
City LEBANON	State TN	Zip Code 37088			
First Name		Middle Name		Purpose of Expenditure DONATION	Amount of Expenditure 200.00
Last Name/Business Name HABITAT FOR HUMANITY WILSON					
Address 606 EAST MAIN STREET					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure SPONSOR	Amount of Expenditure 200.00
Last Name/Business Name PROSPECT					
Address 960 MADDOX SIMPSON PKWY					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure SPONSOR	Amount of Expenditure 300.00
Last Name/Business Name WILSON COUNTY FOP					
Address PO BOX 2614					
City LEBANON	State TN	Zip Code 37088			
5. TOTAL ITEMIZED EXPENDITURES (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 19b. of summary.)					1346.00





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JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN				2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 1346.00
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 CAMPAIGN SHIRTS	Amount of Expenditure 1885.11
Last Name/Business Name MJ SHIRTWORKS					
Address 1006 UNIT C CHARLIE DANIELS PKWY					
City MT JULIET	State TN	Zip Code 37122			
First Name		Middle Name		Purpose of Expenditure SPONSOR	Amount of Expenditure 275.00
Last Name/Business Name LHS PROJECT GRADUATION					
Address 1333C WEST MAIN STREET					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure REIMBURSE FOR PAYMENT ON REBAR	Amount of Expenditure 136.34
Last Name/Business Name JOHN KINCAID					
Address 840 FESSLERS PKWY					
City NASHVILLE	State TN	Zip Code 37210			
First Name		Middle Name		Purpose of Expenditure DONATION	Amount of Expenditure 150.00
Last Name/Business Name DWIGHT HUDDLESTON FUND					
Address 623 WEST MAIN STREET					
City LEBANON	State TN	Zip Code 37087			
First Name		Middle Name		Purpose of Expenditure CAMPAIGN APPAREAL	Amount of Expenditure 1588.21
Last Name/Business Name MIDSOUTH					
Address PO BOX 601					
City ELLENDAL	State TN	Zip Code 38029			
First Name		Middle Name		Purpose of Expenditure SIGN CONSTRUCTION	Amount of Expenditure 270.32
Last Name/Business Name LOWES					
Address 634 SOUTH CUMBERLAND STREET					
City LEBANON	State TN	Zip Code 37087			
5. TOTAL ITEMIZED EXPENDITURES (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 19b. of summary.)					4304.98



JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF LOANS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN					2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14	
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		0.00	0.00	0.00	0.00	
Address		Loan Received For:			Date of Loan	
		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election				
		<input type="checkbox"/> Runoff (Local Elections Only)				
City	State	Zip Code				
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)						
		Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
		0.00	0.00	0.00	0.00	



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JUL 03 2014

WILSON COUNTY  
ELECTION COMMISSION**ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE ROBERT C. BRYAN			2. REPORT COVERING THE PERIOD FROM: 04/01/14 TO: 06/30/14			
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) 0.00	Debt Incurred This Period 0.00	Payments This Period 0.00	Outstanding Balance (End of Period) 0.00
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
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.)			0.00	0.00	0.00	0.00

