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CAMPAIGN FINANCIAL DISCLOSURE STATEMENT For State and Local Candidates For Single-Candidate Committees								
DATE OF REPORT		ANDIDATE OR COMMITTE		JAN 19 2020				
1-19-23	Robe		0 0	VILSON CONTRACTOR				
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE	TION COMMISSION				
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone				
P.D. BOX 803 L	ebanon	TN	37088-0803	615-574-3426				
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	than 4.a.) City	State	Zip Code	Phone 21/0/				
424 Walter Morris Rd	. Lebano			5-574-3426				
5. OFFICE SOUGHT (include district number, if Sheriff	applicable)	6. NAME OF POLITI	CAL TREASURER (may be	candidate)				
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRE-	RAL SUPPLEMENTAL	YEAR-END SUPPLEMENTAL				
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING DATE OF	_					
9. (Check one)		1-15	23					
tures total \$1,000 or less for this report b. This campaign is required to file a det and/or expenditures total more than \$ 10. I/we do solemnly swear or affirm that the in accurate accounting of campaign contribution Financial Disclosure Act. Additionally, I/we should be benefit of the candidate or for any other non signature of candidate	ailed financial disclo	d in this campaign financies required to be reported no campaign contribution defined by the federal interpretations.	ns (including in-kind) received al disclosure report is true a by the candidate committee as have been expended for the	nd that this report is an by the Campaign				
11. WITNESS SIGNATURE DICKY Hu down signature of witness	! ~ 19-23 date	Mul	arci Buatos Signature of witness	1-19-23 date				
12. SUMMARY			7.					
a. BALANCE ON HAND LAST REPORT	•••••		\$34,924.7					
b. TOTAL RECEIPTS THIS PERIOD			\$ 					
c. TOTAL DISBURSEMENTS THIS PERIOD			\$\$	22 425 71				
d. BALANCE ON HAND (12.a. plus 12.b. m	inus 12.c.)		\$	35,425,11				
e. TOTAL LOANS OUTSTANDING			\$	0				
f. TOTAL OBLIGATIONS OUTSTANDING			\$	-0				





SUMMARY PAGE - CANDIDATE

JAN 19 2023

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD						
Robert C. Bryan	FROM: 10-1-23 TTON BOTH SSION						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)							
a. Unitemized Contributions (\$100 or less from each source this period)	\$ O						
b. Itemized Contributions (over \$100 from each source this period)							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	*						
16. LOANS RECEIVED THIS REPORTING PERIOD	_						
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>θ</u>						
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>-9</u>						
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)							
Donations \$ 200.							
\$	 -						
\$	_						
\$							
\$							
\$							
\$							
\$							
\$							
	• 200 -						
Total of Expenditures (\$100 or less each payee)	1 299 -						
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>L</u> + 1 1.						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)							
20. LOAN REPAYMENTS MADE THIS PERIOD	5.00						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)							
22.IN-KIND CONTRIBUTIONS							
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$							
b. Itemized in-kind contributions (over \$100 from each source this period)\$							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$							
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	\$						
Itemized Obligations Outstanding (Over \$100 each)\$							
. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							

JAN 19 2023

ITEMIZED STATEMENT OF EXPENDITURES TO A STATEMENT

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD			
Robert C. Brug	TO: 1-15-23							
	Amount							
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)								
First Name	Middle Na	300	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Gladeville Comm	, Center	Donation		2.00				
Address 95 Mc Crary	Road			200.				
City Lebanon	State	3709D			A			
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name Faternal Order of Police			Sponsorship		Z 00			
Address P. D. Box 2614) po 150.51	" "	200.			
City Lebanon	State TN	Zip Code 37088						
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name					14.40			
Address P. O. Box 399			Ad		H49,-			
City	State	Zip Code						
Lebanon	TH	37080	S (Fare and Mars		Amount of Evpanditure			
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name HAWR LIKE MErrick			Dancition		250			
Address III N. Tarver			La sarro	·	250.			
city	State	Zip Code 37087						
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name WCSD Special Response Team Address D5 E. High Street			Donation	$\overline{}$	200			
City LCDAOO	State Ti	Zip Code 37097						
First Name	Middle Nam	е	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name								
Address								
City	State	Zip Code						
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus)					1,299,-			