



Filing ID #10036469

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Mr. Ronald Brown
Status: Congressional Candidate
State/District: TN07

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2020
Filing Date: 06/16/2020

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
KNIGHTS OF COLUMBUS [OT] DESCRIPTION: FLEXIBLE ANNUITY	JT	\$1 - \$1,000	Dividends	None	None
National Life Group [FN] DESCRIPTION: Fixed Income Annuity	JT	\$50,001 - \$100,000	Interest	\$201 - \$1,000	None

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
US ARMY RETIRED	RETIREMENT	\$5,000.00	\$12,000.00
VETERANS ADMINISTRATION RETIREMENT	22 YEARS OF FEDERAL SERVICE	\$4,500.00	\$50,000.00
SOCIAL SECURITY	RETIREMENT AT AGE 62	\$6,825.00	N/A
MARIDEL C BROWN	WORKING ARMY AIRFORCE EXCHANGE	\$9,395.00	\$22,553.00

Source	Type	Amount Current Year to Filing	Amount Preceding Year
	SERVICES AAFESS		
SOCIAL SECURITY	2 CHILDRENS UDER 18 SOCIAL SECURITY	\$6,120.00	N/A

SCHEDULE D: LIABILITIES

Owner	Creditor	Date Incurred	Type	Amount of Liability
SP	STUDENT LOANS	2011	STUDENT LOANS	\$50,001 - \$100,000
JT	NAVY FEDERAL CREDIT UNION	MARCH 2015	FURNITURE, OTHER HOME ACCESSORIES	\$15,001 - \$50,000
JT	FORTERA CREDIT UNION	MARCH 2015	TRAVEL	\$10,000 - \$15,000
SP	WALMART	MAY 2018	CARE ACCESSORIES, OTHER	\$2,703.00
SP	TJ MAXX	MAY 2015	CLOTHING TOOLS TRAVEL	\$2,448.00
JT	LOAN DEPOT	FEB 2009	HOUSING MORTGAGE	\$250,001 - \$500,000
JT	MILITARY STAR CARD	NOVEMBER 2019	HOME APPLIANCE	\$1,110.00
JT	CARE CREDIT	MARCH 2019	DENTAL CARE	\$564.00
JT	HOME DEPOT	2017 MAY	HOME AND GARDEN	\$508.00
SP	RURAL KING REDSTONE FEDERAL CREDIT UNION	MAR 2019	HOME AND GARDEN	\$360.00

SCHEDULE E: POSITIONS

Position	Name of Organization
PATIENT SERVICES ASSISTANT	CLARKSVILLE VA OUTPATIENT CLINIC
TEST ADMINISTRATOR	MEPS NASHVILLE

SCHEDULE F: AGREEMENTS

None disclosed.

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

None disclosed.

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☒ Yes ☐ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☒ Yes ☐ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Mr. Ronald Brown , 06/16/2020