CAMPAIGN FINANCIAL DISCLOSURE STATEMENT
For State and Local Candidates
For Single-Candidate Committees

1. Date: 9-30-26 2.a. Candidate or Committee Name: Jerry Joslin

2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____

4. Campaign Address: 1105 Kennesaw Blvd

City: Gallatin State: TN Zip Code: 37066 Phone: 931-265-2363

5. Candidate Home Address: 1105 Kennesaw Blvd.

City: Gallatin State: TN Zip Code: 37066 Phone: 931-265-2363

Candidate Email Address: jerryjoslin72@gmail.com

6. Office Sought: (include district number, if applicable) Gallatin City Council at Large

7. Name of Political Treasurer (may be candidate): Sandy Joslin

Political Treasurer Email Address: sandyjoslin71@gmail.com

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: 7-1-2026 End Date: 9-30-2026

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.

FILED AM PM SEP 30 2026 SUMNER COUNTY ELECTION COMMISSION

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.

Jerry Joslin 9/30/2026 Sandy Joslin 9-30-2026

Candidate Signature Date Political Treasurer Signature Date

Mary Drew O'Neal 10-1-2026 Mary Drew O'Neal 10-1-2026

Witness Signature Date Witness Signature Date

12. Summary:

a.	Balance On Hand Last Report	$ 0
b.	Total Receipts This Period	$ 6400.00
c.	Total Disbursements This Period	$ 3340.38
d.	Balance On Hand (12.a. plus 12.b. minus 12.c.)	$ 3059.62
e.	Total Loans Outstanding	$ 0
f.	Total Obligations Outstanding	$ 0

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Jerry Joslin

14. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

15. Receipts:

a. Unitemized Contributions ($100 or less from each source this period) ..... $ 950.00
(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) ..... $ 5450.00

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.) ..... $ 6400.00

16. Disbursements:

a. Total Expenditures (other than loan payments) ..... $ 3340.38
(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.) ..... $ 3340.38

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: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

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: Thoroughbred Farms **OR**
First Name: Austin Middle Name: Last Name: Hayes
Address: 17613 Foxsprings Way City: Louisville State: Ky Zip Code: 40245
Occupation: Home Remodeling Employer: Thoroughbred Farms
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 200.00 Date of Contribution: 9-21-26 Aggregate This Election: $

Business or Organization Name: Rogers Group **OR**
First Name: Austin Middle Name: Last Name: Gamble
Address: 421 Great Circle Rd City: Nashville State: TN Zip Code: 37228
Occupation: Paving Co Employer: Rogers Group
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 750.00 Date of Contribution: 9-11-26 Aggregate This Election: $

Business or Organization Name: Farmer and Elected Official **OR**
First Name: Farrell Middle Name: Last Name: Hale
Address: 1900 Cairo Rd City: Gallatin State: TN Zip Code: 37066
Occupation: Farmer Employer: Self employed
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 500.00 Date of Contribution: 9-20-26 Aggregate This Election: $

Business or Organization Name: Retired **OR**
First Name: Sherry Middle Name: B. Last Name: Bentley
Address: 322 Woodberry Dr. City: Nashville State: ___ Zip Code: 37214
Occupation: retired Employer:
Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)
Amount of Contribution: $ 300.00 Date of Contribution: 9-23-26 Aggregate This Election: $

Total Contributions: $ 1750.00
(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: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1750.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Richard Middle Name: E Last Name: Murphy

Address: 940 Lakeshore Dr. City: Gallatin State: TN Zip Code: 37066

Occupation: _____ Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $300.00 Date of Contribution: 9-27-26 Aggregate This Election: $ _____

Business or Organization Name: Jimmy Overton (Volunteer State Bank **OR**

First Name: Jimmy Middle Name: _____ Last Name: Overton

Address: 901 Lakeview Court City: Gallatin State: TN Zip Code: 37066

Occupation: Banker Employer: Volunteer State Bank

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $250.00 Date of Contribution: 9-28-26 Aggregate This Election: $ _____

Business or Organization Name: _____ **OR**

First Name: Jim Middle Name: _____ Last Name: Harrison

Address: 1650 Boardwalk Pl. City: Gallatin State: TN Zip Code: 37066

Occupation: Engineer Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $500.00 Date of Contribution: 9-23-26 Aggregate This Election: $ _____

Business or Organization Name: Retired Military **OR**

First Name: Dennis Middle Name: D. Last Name: Cavin

Address: 1167 Plantation Pass City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Military Employer: _____

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $250.00 Date of Contribution: 9-28-26 Aggregate This Election: $ _____

Total Contributions: $ 1300.00

(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: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

3. Total campaign contributions from preceding page (enter $0 if first page) $ 1300.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: United Community Bank **OR**

First Name: Paula Middle Name: C. Last Name: Deberry

Address: 102 Bluewater Dr. City: Gallatin State: TN Zip Code: 37066

Occupation: Retired Employer:

Contribution Received For: ☐ Primary Election ☒ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 500.00 Date of Contribution: Aggregate This Election: $

Business or Organization Name: **OR**

First Name: Jesse [redacted] Middle Name: J Last Name: Hughes

Address: 1031 Lakeshore City: Gallatin State: TN Zip Code: 37066

Occupation: CPA Employer:

Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: $ 1,900.00 Date of Contribution: 9-28-26 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: $ 2400.00

(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 IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

3. Total in-kind contributions from preceding page (enter $0 if first page) $ Ø

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars ($100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

In-Kind Contribution Value: $_____ In-Kind Contribution Date: _____ Aggregate This Election: $_____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: $ _____

(Carry forward to the 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 the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

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: Payton Prints **OR**
First Name: Caitlin Middle Name: Last Name: Minda
Address: 131 S. Water Ave City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Signs, shirts, cards
Amount of Expenditure: $ 2530.73 Date of Expenditure: $ 9-15-26

Business or Organization Name: Tractor Supply **OR**
First Name: Middle Name: Last Name:
Address: 670 A Nashville Pk City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Sign poles
Amount of Expenditure: $ 136.75 Date of Expenditure: $ 9-18-26

Business or Organization Name: D3 Prints **OR**
First Name: Jared Middle Name: [redacted] Last Name: Dickens
Address: City: Nashville State: TN Zip Code:
Purpose of Expenditure: Signs
Amount of Expenditure: $ 521.31 Date of Expenditure: $ 9-18-26

Business or Organization Name: Circle K Fuel **OR**
First Name: Middle Name: Last Name:
Address: Nashville Pike City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: Fuel for placing signs
Amount of Expenditure: $ 76.84 Date of Expenditure: $

Business or Organization Name: Sumner Co. Election Commission **OR**
First Name: Middle Name: Last Name:
Address: 109 Union School Rd City: Gallatin State: TN Zip Code: 37066
Purpose of Expenditure: flashdrive
Amount of Expenditure: $ 75.00 Date of Expenditure: $ 8-7-26

Total Expenditures: $ 3340.38
(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

3. Complete the appropriate items for each loan totaling more than one hundred dollars ($100).

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Outstanding Loan Balance (Beginning) ..... $ _____

Loans Received ..... $ _____

Loan Payments ..... $ _____

Outstanding Loan (End) ..... $ _____

Loan Received For: ☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $ _____

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Amount Guaranteed Outstanding: $ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) ..... $ _____

Loans Received ..... $ 0

Loan Payments ..... $ 0

Outstanding Loan (End) ..... $ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Jerry Joslin

2. Reporting Period: Start Date: 7-1-26 End Date: 9-30-26

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of Obligation:			
Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)
$	$	$	$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding Balance (Period Beginning)	Debt Incurred	Payments This Period	Outstanding Balance (Period End)
$ 0	$ 0	$ 0	$ 0