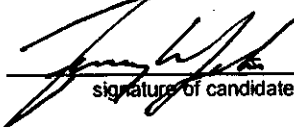
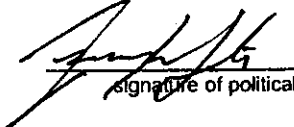




CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 1-28-16	2.a. NAME OF CANDIDATE OR COMMITTEE JERRY FOSTER		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE 3-1-16	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 1816 LIBERTY LN	City GALLATIN	State TN	Zip Code Phone 37066 615 5339746
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route SAME		City	State Zip Code Phone
5. OFFICE SOUGHT (include district number, if applicable) REGISTER OF DEEDS		6. NAME OF POLITICAL TREASURER (may be candidate) JERRY FOSTER	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input 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 checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 7-1-15		8.b. ENDING DATE OF REPORTING PERIOD 1-15-16	
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		1-28-16 date	 signature of political treasurer
			1-28-16 date
11. WITNESS SIGNATURE			
 signature of witness		1-28-16 date	 signature of witness
			1-28-16 date
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ 0	
b. TOTAL RECEIPTS THIS PERIOD		\$ 2,779.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ 2,305.61	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ 473.39	
e. TOTAL LOANS OUTSTANDING		\$ 2,779.00	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ _____	

FILED
A.M. FEB. 01 2016
SUMNER COUNTY
ELECTION COMMISSION



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE SERGEY FOSTER				2. REPORT COVERING THE PERIOD			
				FROM: 7-15	TO: 1-15-16		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0		
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 SIGNS		Amount of Expenditure	
Last Name/Business Name BUILDASIGN						Amount of Expenditure \$2,045.09	
Address 11525A STONEHOLLOW DR							
City AUSTIN		State TX	Zip Code 78758				
First Name		Middle Name		Purpose of Expenditure PRINTING		Amount of Expenditure	
Last Name/Business Name ASAP PRINTING						Amount of Expenditure \$130.01	
Address 116 IMPERIAL BLVD							
City H'VILLE		State TN	Zip Code 37575				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						Amount of Expenditure	
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						Amount of Expenditure	
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						Amount of Expenditure	
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						Amount of Expenditure	
Address							
City		State	Zip Code				
First Name		Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						Amount of Expenditure	
Address							
City		State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES					Amount		
(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.)					\$275.10		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <p style="text-align: center; font-size: 1.2em;">JERRY FOSTER</p>	2. REPORT COVERING THE PERIOD FROM: 7-1-15 TO: 1-15-16
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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 JERRY	Middle Name	Outstanding Loan Balance (Beginning of Period) 0	Loans Received 82,779.00	Loan Payments 0	Outstanding Loan Balance (End of Period) 82,779.00
Last Name/Organization Name FOSTER					
Address 1816 LIBERTY LN		Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Date of Loan 1-11 & 1-25/16	
City GALLATIN	State TN	Zip Code 37064			
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	City	State
Zip Code		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	City	State
Zip Code		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	City	State
Zip Code		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	City	State
Zip Code		Zip Code	
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e, on front page.)	Outstanding Loan Balance (Beginning of Period) 0	Loans Received 27790	Loan Payments 0	Outstanding Loan Balance (End of Period) 2779.00
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