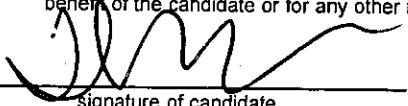
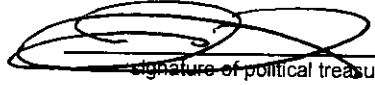

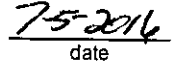
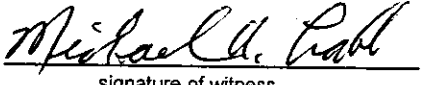
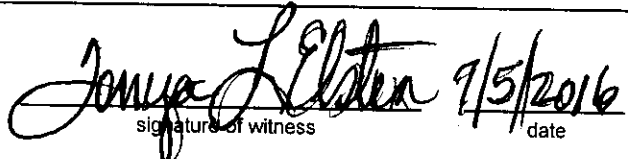




CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7/1/2016		2.a. NAME OF CANDIDATE OR COMMITTEE TOMMY ELSTEN FOR MAYOR	
2.b. IF COMMITTEE, NAME OF CANDIDATE TOMMY ELSTEN		3. ELECTION DATE NOV. 8TH, 2016	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone 138 COUNTRY CLUB DR. HENDERSONVILLE TN 37075 (615) 533-7080			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone			
5. OFFICE SOUGHT (include district number, if applicable) MAYOR OF HENDERSONVILLE		6. NAME OF POLITICAL TREASURER (may be candidate) JOHN GREGORY	
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 4-1-2016		8.b. ENDING DATE OF REPORTING PERIOD 6-30-2016	
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 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	
 date		 date	
11. WITNESS SIGNATURE			
 signature of witness		 signature of witness	
 date		 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>1597.76</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>11,232.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>6,757.74</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>6072.02</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>-0-</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>-0-</u>	

A.M. **FILED** P.M.
 JUL 11 2016
 SUMNER COUNTY
 ELECTION COMMISSION



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ELSTEN FOR MAYOR				2. REPORT COVERING THE PERIOD FROM: 4-1 TO: 6-30	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount —
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name KEN		Middle Name K		Contribution Received For:	
Last Name/Organization Name KOTH		Address 131 BLUERIDGE DRIVE		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation FINANCIAL OFFICER		Date of Contribution 5/23/16		Amount of Contribution 1100	
Employer HCA HEALTHCARE		Zip Code 37075		Aggregate This Election 1100	
First Name MICHELE		Middle Name A		Contribution Received For:	
Last Name/Organization Name KOTH		Address 131 BLUERIDGE DRIVE		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation HOME WORKER		Date of Contribution 5/23/16		Amount of Contribution 1100	
Employer		Zip Code 37075		Aggregate This Election 1100	
First Name LEWIS		Middle Name G		Contribution Received For:	
Last Name/Organization Name ELLIS		Address 136 COUNTRY CLUB DR.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation RETIRED		Date of Contribution 5/21/16		Amount of Contribution 100	
Employer		Zip Code 37075		Aggregate This Election 100	
First Name JEANNIE		Middle Name M		Contribution Received For:	
Last Name/Organization Name ISBELL		Address 108 WALTON TRACE N.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation		Date of Contribution 5/21/16		Amount of Contribution 100	
Employer		Zip Code 37075		Aggregate This Election 100	
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.)					2400.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ELSTEN FOR MAJORITY				2. REPORT COVERING THE PERIOD	
				FROM: 4-1	TO: 6-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 2400.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name BETH		Middle Name		Contribution Received For:	
Last Name/Organization Name GABRIELLE				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 129 OTER GLEN DRIVE				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/22/16	
Occupation SALES				Amount of Contribution 100	
Employer INDIVIOR				Aggregate This Election 100	
First Name HARVEY		Middle Name		Contribution Received For:	
Last Name/Organization Name MARTIN				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 115 ORCHARD VALLEY CIR.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Hendersonville		State TN	Zip Code 37075	Date of Contribution 5/18/16	
Occupation self employed				Amount of Contribution 300	
Employer MARTIN ELECTRIC				Aggregate This Election 300	
First Name JACKIE		Middle Name		Contribution Received For:	
Last Name/Organization Name FENSTERMACHER				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 143 COUNTRY CLUB DR				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/21/16	
Occupation RETIRED				Amount of Contribution 25	
Employer				Aggregate This Election 25	
First Name MARGARET		Middle Name		Contribution Received For:	
Last Name/Organization Name BOKESCH				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 623 BONITA PKWY				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/21/16	
Occupation RETIRED				Amount of Contribution 50	
Employer				Aggregate This Election 50	
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.)					2875.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ELSTEN FOR MAYOR				2. REPORT COVERING THE PERIOD FROM: 4-1 TO: 6-30	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 2875.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name JAMES		Middle Name LARRY		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name DARKS		Address 108 CORNELIA DRIVE		Amount of Contribution 300	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 6/1/16	
Occupation RETIRED		Employer		Aggregate This Election 300	
First Name JAMES		Middle Name C		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name ANDERSON		Address 629 BONITA PKWY		Amount of Contribution 1000	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 6/22/16	
Occupation self employed		Employer JAMES C ANDERSON INC.		Aggregate This Election 1000	
First Name		Middle Name		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name SUMNER ROOFING		Address 115 POWELL DR.		Amount of Contribution 500	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 4/12/16	
Occupation		Employer		Aggregate This Election 500	
First Name ELAINE		Middle Name J		Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name AVALITT		Address 123 GEORGETOWN DR.		Amount of Contribution 100	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/28/16	
Occupation RETIRED /		Employer		Aggregate This Election 100	
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.)					4675.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ELSTEN FOR MAYOR				2. REPORT COVERING THE PERIOD	
				FROM: 4-1	TO: 6-30
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name R		Middle Name KIRKLAND		Contribution Received For:	
Last Name/Organization Name MOSE				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 189 WYNBROOKE TRACE				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSHVILLE		State TN	Zip Code 37075	Date of Contribution 5/28/16	
Occupation ATTORNEY				Amount of Contribution 200	
Employer OLD REPUBLIC				Aggregate This Election 200 ✓	
First Name AMY		Middle Name L		Contribution Received For:	
Last Name/Organization Name OBRIEN				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1017 GADWALL CIRCLE				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/28/16	
Occupation INS BROKER				Amount of Contribution 125⁰⁰	
Employer CBA INS. BROKER				Aggregate This Election 125⁰⁰ ✓	
First Name TIM		Middle Name		Contribution Received For:	
Last Name/Organization Name OBRIEN				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1017 GADWALL CIRCLE				<input type="checkbox"/> Runoff (Local Elections Only)	
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 5/28/16	
Occupation INSPECTOR				Amount of Contribution 125⁰⁰	
Employer METRO NASHVILLE				Aggregate This Election 125⁰⁰ ✓	
First Name LANNY		Middle Name CLARK		Contribution Received For:	
Last Name/Organization Name CHAMBERS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1123 FAIRVIEW VILLAGE LANE				<input type="checkbox"/> Runoff (Local Elections Only)	
City GALLATIN		State TN	Zip Code 37066	Date of Contribution 5/27/16	
Occupation REALTOR				Amount of Contribution 100	
Employer GOODALL HOMES				Aggregate This Election 500	
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.)					5225.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE ELSTEN FOR MAYOR				2. REPORT COVERING THE PERIOD FROM: 4-1 TO: 6-30	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 5225.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name ROBERT		Middle Name P.		Contribution Received For:	
Last Name/Organization Name FOGOLIN		Address 1131 STIRLINGSHIRE DR.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation DOCTOR		Employer PREMIER ORTHOPAEDICS		Date of Contribution 5/1/16	
				Amount of Contribution 400	
				Aggregate This Election 400	
First Name DONALD		Middle Name C		Contribution Received For:	
Last Name/Organization Name FRANKS		Address 176 HOLLY WALTON DR STE. B		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation self employed		Employer IMAGING DIAGNOSTICS		Date of Contribution 5/29/16	
				Amount of Contribution 50⁰⁰	
				Aggregate This Election 50⁰⁰	
First Name DINA		Middle Name H.		Contribution Received For:	
Last Name/Organization Name COLLINS		Address 97 VALLEYBROOK DR.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation REALTOR		Employer		Date of Contribution 5/26/16	
				Amount of Contribution 30⁰⁰	
				Aggregate This Election 30⁰⁰	
First Name WADE		Middle Name W		Contribution Received For:	
Last Name/Organization Name WARREN		Address 106 BELMONT CR		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation PILOT		Employer AMERICAN AIRLINES		Date of Contribution 5/27/16	
				Amount of Contribution 192⁰⁰	
				Aggregate This Election 192⁰⁰	
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.)					5897.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>TERMY ELSTEN FOR MAYOR</i>				2. REPORT COVERING THE PERIOD FROM: <i>4/1/16</i> TO: <i>6/30/16</i>					
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>5897.00</i>				
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)									
First Name <i>ART</i>		Middle Name		Contribution Received For:		Amount of Contribution			
Last Name/Organization Name <i>GRAY</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>200</i>			
Address <i>128 HEDGELAWN</i>				<input type="checkbox"/> Runoff (Local Elections Only)		<i>200</i>			
City <i>HENDERSONVILLE</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>5/31/16</i>				Aggregate This Election <i>200</i>	
Occupation <i>REAL ESTATE APPRAISER</i>									
Employer									
First Name <i>JANET</i>		Middle Name <i>H.</i>		Contribution Received For:		Amount of Contribution			
Last Name/Organization Name <i>CAREY</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>35⁰⁰</i>			
Address <i>P.O. Box 2496 - CUMBERLAND HILLS DR.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		<i>35⁰⁰</i>			
City <i>HENDERSONVILLE</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>5/31/16</i>				Aggregate This Election <i>35⁰⁰</i>	
Occupation <i>REALTOR</i>									
Employer <i>AMERICAN TRUST REALTY</i>									
First Name <i>LINDSAY</i>		Middle Name <i>A</i>		Contribution Received For:		Amount of Contribution			
Last Name/Organization Name <i>MACRUETRIE</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>75⁰⁰</i>			
Address <i>5314 MONTHAVEN PARK PLACE</i>				<input type="checkbox"/> Runoff (Local Elections Only)		<i>75⁰⁰</i>			
City <i>HENDERSONVILLE</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>5/31/16</i>				Aggregate This Election <i>75⁰⁰</i>	
Occupation <i>RECEPT.</i>									
Employer <i>TN HEART + VASC.</i>									
First Name <i>TIM</i>		Middle Name <i>D</i>		Contribution Received For:		Amount of Contribution			
Last Name/Organization Name <i>CRANFORD</i>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>100</i>			
Address <i>111 AVONDALE ACCESS RD.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		<i>100</i>			
City <i>HENDERSONVILLE</i>		State <i>TN</i>	Zip Code <i>37075</i>	Date of Contribution <i>5/31/16</i>				Aggregate This Election <i>100</i>	
Occupation <i>SALES</i>									
Employer <i>ATLAS COOL</i>									
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.)					<i>6307.00</i>				

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Tommy Elston for Mayor				FROM: 4/1/16	TO: 6/30/16		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount: 6307.00		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		360 ⁰⁰	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation				5/24/16		360 ⁰⁰	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500 ⁰⁰	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation				5/28/16		500 ⁰⁰	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		70 ⁰⁰	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation				5/24/16		70 ⁰⁰	
Employer							
First Name		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		400 ⁰⁰	
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation				5/1/16		400 ⁰⁰	
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS					7637.00		
(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.)							

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY ELSTON FOR MAYOR			2. REPORT COVERING THE PERIOD	
			FROM: 4-1-16	TO: 6-30-16
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 7637.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name RICK	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name WILLIAMS		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		100.00
Address PO. BOX 291202		<input type="checkbox"/> Runoff (Local Elections Only)		
City NASHVILLE	State TN	Zip Code 37229	Date of Contribution 5-28-16	Aggregate This Election 100.00
Occupation OWNER				
Employer NASHVILLE LIMO				
First Name THOMAS	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name GIBSON		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200.00
Address 1003 HOGANS BRANCH		<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075	Date of Contribution 5-21-16	Aggregate This Election 200.00
Occupation DEVELOPER				
Employer OMAN GIBSON				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name IMAGING DIAGNOSTICS		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00
Address 176 B. MOLLY WALTER DRIVE		<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE	State TN	Zip Code 37075	Date of Contribution 5-20-16	Aggregate This Election 500.00
Occupation				
Employer				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
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	Aggregate This Election
Occupation				
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.)				8437.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Tommy EUSTON For Mayor	2. REPORT COVERING THE PERIOD FROM: 4/1/16 TO: 6/30/16
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3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount
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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 SCOTT	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution 155⁰⁰
Last Name/Organization Name MCFADDEN		Date of In-Kind Contribution 6/18/16	
Address LAKE VALLEY DR.		Aggregate this Election 155⁰⁰	
City Hendersonville	State TN	Description of In-Kind Contribution Ball Caps	
Occupation self employed	Employer GUINNESS	Zip Code 37075	

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution	
Address		Aggregate this Election	
City	State	Description of In-Kind Contribution	
Occupation	Employer	Zip Code	

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution	
Address		Aggregate this Election	
City	State	Description of In-Kind Contribution	
Occupation	Employer	Zip Code	

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution	
Address		Aggregate this Election	
City	State	Description of In-Kind Contribution	
Occupation	Employer	Zip Code	

First Name	Middle Name	In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Value of In-Kind Contribution
Last Name/Organization Name		Date of In-Kind Contribution	
Address		Aggregate this Election	
City	State	Description of In-Kind Contribution	
Occupation	Employer	Zip Code	

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.)	Amount
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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JAMMY ELSTEN FOR MAYOR			2. REPORT COVERING THE PERIOD FROM: 4/1/16 TO: 6/30/16	
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		Amount of Expenditure
Last Name/Business Name DANSONS SWEET CAKES		REFRESHMENT		6.54
Address Old STACKLE ISLAND				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Lowes		MATERIALS FOR SIGNS		195.00
Address				
City Hendersonville	State TN			
First Name Neil	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name SIDERS		CONSULTING		1650.00
Address 100 LEE CT.				
City GALLATIN	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name CENTER POINT BAR BQ		LUNCH Meeting		33.50
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Hendersonville First United Methodist		GOLF TOURNAMENT		510.00
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name PIEDMONT GAS		GAS BILL		428.55
Address				
City NASHVILLE	State TN			
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.)				2824.39

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Tommy EUSTEN FOR Mayor			2. REPORT COVERING THE PERIOD FROM: 4/1/16 TO: 6/30/16	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 2824.39	
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	Amount of Expenditure	
Last Name/Business Name SUMNER COUNTY REPUBLICAN PARTY		TABLE @ BANQUET	650⁰⁰	
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name HVILLE UTILITIES		WATER BILL	82³⁴	
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name JAMUS SPORTS GRILL		LUNCH meeting	31.06	
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name NES		ELECTRIC BILL	331.⁵²	
Address				
City NASHVILLE	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name LOST CAJON		LUNCH meeting	75²⁹	
Address				
City Hendersonville	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name SAR DELI		Lunch meeting	17³⁴	
Address				
City Hendersonville	State TN			
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.)			4011.94	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY EUSTEN FOR Mayor		2. REPORT COVERING THE PERIOD FROM: 4/1/16 TO: 6/30/16		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 4011.94	
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	Amount of Expenditure
Last Name/Business Name COMCAST			INTERNET CABLE PHONE	504⁴³
Address				
City NASHVILLE	State TN	Zip Code		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name I HORNTONS			ICE	30⁰⁰
Address				
City Hendersonville	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name KROGER			AMERICAN FLAGS	33¹⁰
Address				
City Hendersonville	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name DOMINOS			PIZZA FOR meeting	44⁵⁷
Address				
City Hendersonville	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name JAMES CLUBS			MATERIALS FOR FREEDOM FEST	631⁰⁸
Address				
City Hendersonville	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name RED ROOSTER			meeting	42⁷⁸
Address				
City Hendersonville	State TN	Zip Code 37075		
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.)			5297.90	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY ELSTEN FOR Mayor			2. REPORT COVERING THE PERIOD FROM: 4/1/16 TO: 6/30/16		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 5297.90		
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 FREEDOM REST MATERIALS	Amount of Expenditure 263.84
Last Name/Business Name ORIENTAL TRADING Co.					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure LIABILITY INSURANCE	Amount of Expenditure 650⁰⁰
Last Name/Business Name WATSON INSURANCE					
Address					
City Hendersonville		State TN	Zip Code 37075		
First Name MIKE		Middle Name		Purpose of Expenditure PORTA JON RENTAL	Amount of Expenditure 220⁰⁰
Last Name/Business Name COLE					
Address					
City NASHVILLE		State TN	Zip Code		
First Name SCOTT		Middle Name		Purpose of Expenditure Ball CAPS	Amount of Expenditure 155⁰⁰
Last Name/Business Name McFADDEN					
Address LAKE VALLEY DR.					
City Hendersonville		State TN	Zip Code 37075		
First Name		Middle Name		Purpose of Expenditure COMPUTER MATERIALS	Amount of Expenditure 198⁰⁰
Last Name/Business Name VOTERS INC.					
Address					
City		State	Zip Code		
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name					
Address					
City		State	Zip Code		
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.)					6757.74