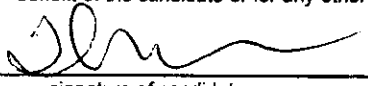

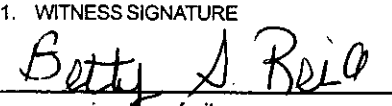
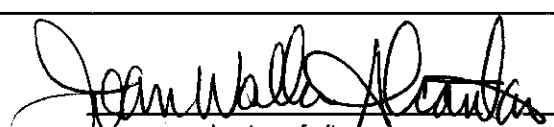


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>10-31-16</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Tommy Elsten For Mayor</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>Tommy Elsten</u>		3. ELECTION DATE <u>11-8-16</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>138 COUNTRY CLUB DR. HENDERSONVILLE TN 37075 (615) 533-7880</u>			
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) <u>MAYOR OF HENDERSONVILLE</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>JEAN GREENGLY</u>	
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 checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>10-1-16</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>10-29-16</u>	
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	
<u>10-31-16</u> date		<u>10-31-16</u> date	
11. WITNESS SIGNATURE			
 signature of witness		 signature of witness	
<u>10-31-16</u> date		<u>10-31-16</u> date	
12. SUMMARY			
FILED			
a. BALANCE ON HAND LAST REPORT		A.M. <u>33⁴⁰</u> P.M.	
b. TOTAL RECEIPTS THIS PERIOD		NOV 01 2016 \$ <u>7,375⁰⁰</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		SUMNER COUNTY \$ <u>1,474⁴⁰</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		ELECTION COMMISSION \$ <u>5,934⁰⁰</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Tommy Elsten For Mayor</u>	14. REPORT COVERING THE PERIOD FROM: <u>10/1/16</u> TO: <u>10/29/16</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>100⁰⁰</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>7275⁰⁰</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>7375⁰⁰</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>7375⁰⁰</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)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ _____
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>1474⁴⁰</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>1474⁴⁰</u>
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ _____
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ <u>1474⁴⁰</u>
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)	\$ <u>4000⁰⁰</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ <u>4000⁰⁰</u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$ _____
b. Itemized Obligations Outstanding (Over \$100 each)	\$ _____
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <u>JERRY ESTEN FOR MAYOR</u>				2. REPORT COVERING THE PERIOD FROM: <u>10-1-16</u> TO: <u>10-28-16</u>			
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 <u>STANLEY</u>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <u>HUNT</u>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<u>50⁻</u>	
Address <u>132 TWIN BAY DR.</u>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <u>HEND.</u>		State <u>TN</u>	Zip Code <u>37025</u>	Date of Contribution <u>10-12-16</u>		Aggregate This Election <u>50⁻</u>	
Occupation <u>RETIRED</u>				Employer			
First Name <u>GERALD</u>		Middle Name <u>R.</u>		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <u>PANKOW</u>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<u>50⁻</u>	
Address <u>711 LYNNBROOK RD.</u>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <u>NASHVILLE</u>		State <u>TN</u>	Zip Code <u>37216</u>	Date of Contribution <u>10-13-16</u>		Aggregate This Election <u>50⁻</u>	
Occupation <u>MANAGER</u>				Employer <u>GODDALL HOMES</u>			
First Name <u>KOBY</u>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <u>DUMONT</u>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<u>25⁻</u>	
Address <u>2725 SHARONDALE CT.</u>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <u>NASHVILLE</u>		State <u>TN</u>	Zip Code <u>37025</u>	Date of Contribution <u>10-14-16</u>		Aggregate This Election <u>25⁻</u>	
Occupation <u>MANAGER</u>				Employer <u>GODDALL HOMES</u>			
First Name <u>ROBERT</u>		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name <u>GODDALL</u>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<u>300⁻</u>	
Address <u>373 MAPLE ST.</u>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <u>GAULBRIN</u>		State <u>TN</u>	Zip Code <u>37066</u>	Date of Contribution <u>10-1-16</u>		Aggregate This Election <u>300⁻</u>	
Occupation <u>ATTORNEY</u>				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.)					<u>425.00</u>		

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY ESTEN FOR MAYOR				2. REPORT COVERING THE PERIOD FROM: 10-1-16 TO: 10-29-16		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 425.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name BYRON		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name HUCKEBY				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		400⁻
Address 144 RIVERCHASE DR.				<input type="checkbox"/> Runoff (Local Elections Only)		
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-17-16		Aggregate This Election 400⁻
Occupation SALES MANAGER						
Employer KODAK						
First Name DON		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name MERCER				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		750⁻
Address 242 WEST MAIN ST.				<input type="checkbox"/> Runoff (Local Elections Only)		
City HENDERSONVILLE		State TN	Zip Code 37075	Date of Contribution 10-25-16		Aggregate This Election 750⁻
Occupation REALTOR						
Employer PARKS REALTY						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name MAPLE MOTORS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500⁻
Address 829 WEST MAIN ST.				<input type="checkbox"/> Runoff (Local Elections Only)		
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-25-16		Aggregate This Election 500⁻
Occupation						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name STOP & BUY				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500⁻
Address 240 SANDERS FERRY RD.				<input type="checkbox"/> Runoff (Local Elections Only)		
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-26-16		Aggregate This Election 500⁻
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.)					2575.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Tommy ELSTEN FOR Mayor				2. REPORT COVERING THE PERIOD			
				FROM: 10-1-16	TO: 10-29-16		
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount 2575.00			
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 ALL THINGS CHROME				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1000	
Address 126 COMMERCE DR.				<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-12-16		Aggregate This Election 1000	
Occupation							
Employer							
First Name MARY		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name RUSEY				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200	
Address 110 DONNA DR.				<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-2-16		Aggregate This Election 200	
Occupation TRAINING							
Employer SERVE PRO							
First Name HERMAN		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name MOORE				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		100	
Address 107 JENNINGS DR.				<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-1-16		Aggregate This Election 100	
Occupation RETIRED							
Employer							
First Name DON		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name DUKES				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		300	
Address 113 WEXINGTON PLACE				<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.		State TN	Zip Code 37075	Date of Contribution 10-5-16		Aggregate This Election 300	
Occupation RETIRED							
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS						4175.00	
(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				2. REPORT COVERING THE PERIOD	
Tommy Elsten For Mayor				FROM: OCT. 1	TO: OCT. 29
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 4175.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name BARBARA	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name HOLDER		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500-	
Address 1409 SHORESIDE DR.		<input type="checkbox"/> Runoff (Local Elections Only)			
City HENDERSONVILLE	State TN	Zip Code 37075	Date of Contribution 10-10-16		Aggregate This Election 1000-
Occupation self employed		Employer HOLDER Family Fun Care			
First Name CHRIS	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name FLSREK		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		50-	
Address 260 W. MAIN ST.		<input type="checkbox"/> Runoff (Local Elections Only)			
City HENDERSONVILLE	State TN	Zip Code 37075	Date of Contribution 10-12-16		Aggregate This Election 50-
Occupation self employed		Employer INSURANCE			
First Name AL	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name PATEL		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200-	
Address 152 TURNING LEAFWAY		<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.	State TN	Zip Code 37075	Date of Contribution 10/12/16		Aggregate This Election 200-
Occupation self employed		Employer BAINO MART			
First Name TOM	Middle Name	Contribution Received For:		Amount of Contribution	
Last Name/Organization Name BRUCE		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		100-	
Address 1004 CREEKLEN CT.		<input type="checkbox"/> Runoff (Local Elections Only)			
City HEND.	State TN	Zip Code 37075	Date of Contribution 10-5-16		Aggregate This Election 100-
Occupation RETIRED		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.)					5025.00

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY ELSTEN FOR MAYOR				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 5025.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name LAURIE	Middle Name B	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution 1000	
Last Name/Organization Name WEAVER		<input type="checkbox"/> Runoff (Local Elections Only)			
Address 100 RIVA RIDGE		Date of Contribution 10-12-16		Aggregate This Election 1000	
City HEND.	State TN	Zip Code 37075			
Occupation NONE					
Employer					
First Name JOHN	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution 50	
Last Name/Organization Name DOYLE		<input type="checkbox"/> Runoff (Local Elections Only)			
Address 102 RIVERCHASE		Date of Contribution 10-1-16		Aggregate This Election 50	
City Hend	State TN	Zip Code 37075			
Occupation RETIRED					
Employer					
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution 1000	
Last Name/Organization Name TN UNDERGROUND LLC		<input type="checkbox"/> Runoff (Local Elections Only)			
Address 1073 CHESIRE WAY		Date of Contribution 10-13-16		Aggregate This Election 1000	
City GALLATIN	State TN	Zip Code 37066			
Occupation					
Employer					
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Amount of Contribution 200	
Last Name/Organization Name VANDENBURGH INSURANCE		<input type="checkbox"/> Runoff (Local Elections Only)			
Address 221 B CITY SQUARE		Date of Contribution 10-12-16		Aggregate This Election 200	
City HENDERSONVILLE	State TN	Zip Code 37075			
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.)					7275.00

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE TOMMY ELSTEN FOR Mayor				2. REPORT COVERING THE PERIOD			
				FROM:	TO:		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount		
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		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1500	
Last Name/Organization Name		Address		Date of In-Kind Contribution		Aggregate this Election	
OPTION RENTAL		3300 GALLATIN PK.		10-15-16		1500	
City		State		Zip Code		Description of In-Kind Contribution	
NASHVILLE		TN		37201			
Occupation		Employer		FURNITURE			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1000 ⁰⁰	
Last Name/Organization Name		Address		Date of In-Kind Contribution		Aggregate this Election	
BUSY BEE PRINTING		W. MAIN ST.		10-15-16		1000⁰⁰	
City		State		Zip Code		Description of In-Kind Contribution	
MEMO.		TN		37075			
Occupation		Employer		PRINTING			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1500	
Last Name/Organization Name		Address		Date of In-Kind Contribution		Aggregate this Election	
WAREHOUSE MULTIMEDIA		3050 BUSINESS PARK CIRCLE		10-1-16		1500	
City		State		Zip Code		Description of In-Kind Contribution	
GOODLETTSVILLE		TN		37072			
Occupation		Employer		INTERNET SET UP			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Last Name/Organization Name		Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution	
Occupation		Employer					
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Last Name/Organization Name		Address		Date of In-Kind Contribution		Aggregate this Election	
City		State		Zip Code		Description of In-Kind Contribution	
Occupation		Employer					
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.)							

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Tommy Eisten for Mayor		2. REPORT COVERING THE PERIOD FROM: 10-1-16 TO: 10-29-16	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount
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 TRACTOR Supply		SIGN SUPPLIES	1473
Address CENTER POINT RD.			
City HEND.	State TN Zip Code 37075		
First Name	Middle Name		
Last Name/Business Name NASHVILLE ELECTRIC SERV.		ELECTRIC	62466
Address CHURCH ST.			
City NASHVILLE	State TN Zip Code 37046		
First Name	Middle Name		
Last Name/Business Name WATERHOUSE MULTIMEDIA		INTERNET SET UP.	500-
Address 3050 BUSINESS PARK CIRCLE			
City GOODLETTSVILLE	State TN Zip Code 37072		
First Name	Middle Name		
Last Name/Business Name LOWES		SIGN SUPPLIES	96¹⁰
Address			
City HENDERSONVILLE	State TN Zip Code 37075		
First Name	Middle Name		
Last Name/Business Name KED ROOSTER		LUNCH Meeting	31²²
Address W. MAIN ST.			
City HEND.	State TN Zip Code 37075		
First Name	Middle Name		
Last Name/Business Name SHIPLEY'S DONUTS		DONUTS FOR CAMPAIGN Meeting	36⁵⁷
Address W. MAIN ST.			
City HENDERSONVILLE	State TN Zip Code 37075		
First Name	Middle Name		
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.)			1303.28

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Tommy Eisten for Mayor		2. REPORT COVERING THE PERIOD		
		FROM: 10-1-16	TO: 10-29-16	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 1303.28	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name AMANDA		Middle Name	Purpose of Expenditure HQ WORK	Amount of Expenditure 50⁰⁰
Last Name/Business Name HARRISON				
Address				
City HENDERSONVILLE	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure SOFTWARE	Amount of Expenditure 99⁰⁰
Last Name/Business Name VOYER GRAVITY				
Address				
City POBLELLVILLE	State VA	Zip Code		
First Name		Middle Name	Purpose of Expenditure WATER	Amount of Expenditure 9⁰³
Last Name/Business Name THORNTONS				
Address E MAIN ST.				
City HEND.	State TN	Zip Code 37075		
First Name		Middle Name	Purpose of Expenditure WATER + ICE	Amount of Expenditure 13⁰⁹
Last Name/Business Name KHINO MART				
Address OLD SHACKLE ISLAND				
City HEND.	State TN	Zip Code 37075		
First Name		Middle Name		
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name		Middle Name		
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.)			1474.40	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Tommy Elsten For Mayor</i>				2. REPORT COVERING THE PERIOD FROM: <i>10-1-16</i> TO: <i>10-29-16</i>					
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		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	
Last Name/Organization Name				Loan Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan			
Address		City						State	Zip Code
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	Zip Code	City		State	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	Zip Code	City		State	Zip Code		
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
4. Totals for all Loans (complete on last page of itemized loans) <small>(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.)</small>				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>JOHN ELSTEN FOR MAYOR</i>				FROM: <i>10-1-16</i>		TO: <i>10-31-16</i>	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
4. TOTALS							
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							