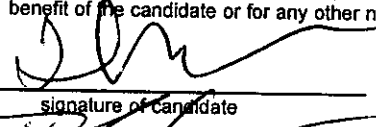

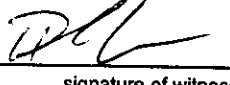
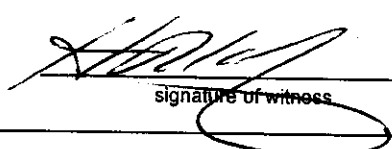


# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <b>10-10-16</b>	2.a. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR MAYOR</b>
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>TOMMY ELSTEN</b>	
3. ELECTION DATE <b>Nov 8TH 2016</b>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <b>138 COUNTRY CLUB DR HENDERSONVILLE TN 37075 615-533-7080</b>	
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) <b>MAYOR OF HENDERSONVILLE</b>	6. NAME OF POLITICAL TREASURER (may be candidate) <b>JOHN GREGORY</b>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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 <b>7-1-2016</b>	8.b. ENDING DATE OF REPORTING PERIOD <b>9-30-2016</b>
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
<b>10/10/16</b> date	<b>10-10-16</b> date
11. WITNESS SIGNATURE	
 signature of witness	 signature of witness
<b>10/10/16</b> date	<b>10/10/16</b> date
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <b>6072.02</b>
b. TOTAL RECEIPTS THIS PERIOD	\$ <b>3895.00</b>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <b>9933.62</b>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <b>33.40</b>
e. TOTAL LOANS OUTSTANDING	\$ <b>- 0 -</b>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <b>- 0 -</b>



## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)

TOMMY ELSTEN FOR MAYOR

14. REPORT COVERING THE PERIOD

FROM: 7-1

TO: 9-30

### RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) ..... \$ 120.00

b. Itemized Contributions (over \$100 from each source this period) ..... \$ 3775.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) ..... \$ 3895.00

16. LOANS RECEIVED THIS REPORTING PERIOD ..... \$ - 0 -

17. INTEREST RECEIVED THIS REPORTING PERIOD ..... \$ - 0 -

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) ..... \$ 3895.00

### 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) ..... \$ 9933.62

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) ..... \$ 9933.62

20. LOAN REPAYMENTS MADE THIS PERIOD ..... \$ - 0 -

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) ..... \$ 9933.62

### 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) ..... \$ 2750.00

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) ..... \$ 2750.00

### 23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) ..... \$ - 0 -

b. Itemized Obligations Outstanding (Over \$100 each) ..... \$ - 0 -

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) ..... \$ - 0 -



## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR MAYOR</b>				2. REPORT COVERING THE PERIOD FROM: <b>7-1</b> TO: <b>9-30</b>	
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 <b>JOMELIA</b>		Middle Name <b>D</b>		Contribution Received For:	
Last Name/Organization Name <b>CHENAULT</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>418 EAST MAIN ST</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-8-16</b>	
Occupation <b>RETIRED</b>				Aggregate This Election <b>100.00</b>	
Employer					
First Name <b>NEIL</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>CHENAULT III</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>410 EAST MAIN ST</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-8-16</b>	
Occupation <b>FARMING</b>				Aggregate This Election <b>100.00</b>	
Employer <b>SELF</b>					
First Name <b>CARLENE</b>		Middle Name <b>N</b>		Contribution Received For:	
Last Name/Organization Name <b>VASSAR</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>163 JONES LANE</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-9-16</b>	
Occupation <b>REALTOR</b>				Aggregate This Election <b>250.00</b>	
Employer <b>RELIANT REALTY</b>					
First Name <b>KENNETH</b>		Middle Name <b>D</b>		Contribution Received For:	
Last Name/Organization Name <b>HUDGEN'S</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>156 BLUE GRASS DR.</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-10-16</b>	
Occupation <b>RETIRED</b>				Aggregate This Election <b>100.00</b>	
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.)					<b>550.00</b>



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ESTEN FOR MAYOR</b>				2. REPORT COVERING THE PERIOD FROM: <b>7-1</b> TO: <b>9-30</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>550.00</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>DARLENE</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>CRAIDOCK</b>		Address <b>101 NICKOY TRAIL</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Amount of Contribution <b>100.00</b>	
Occupation <b>RETIRED</b>		Date of Contribution <b>8-13-16</b>		Aggregate This Election <b>100.00</b>	
Employer					
First Name <b>JILL</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>ANDERSON</b>		Address <b>161 WYNBROOKE TRACE</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Amount of Contribution <b>100.00</b>	
Occupation <b>NURSE</b>		Date of Contribution <b>8-1-16</b>		Aggregate This Election <b>100.00</b>	
Employer <b>RIVERGATE SURGERY CENTER</b>					
First Name <b>STEPHEN</b>		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>ANDERSON</b>		Address <b>161 WYNBROOKE TRACE</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Amount of Contribution <b>100.00</b>	
Occupation <b>INSURANCE</b>		Date of Contribution <b>8-1-16</b>		Aggregate This Election <b>100.00</b>	
Employer					
First Name <b>GORDON</b>		Middle Name <b>RAY</b>		Contribution Received For:	
Last Name/Organization Name <b>MORRIS</b>		Address <b>131 HATCHER LANE</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Amount of Contribution <b>25.00</b>	
Occupation		Date of Contribution <b>8-15-16</b>		Aggregate This Election <b>25.00</b>	
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.)					<b>875.00</b>

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR MAYOR</b>				2. REPORT COVERING THE PERIOD FROM: <b>7-1</b> TO: <b>9-30</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>875.00</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>JOHN</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>EVANS</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>155 CUMBERLAND DR</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-24-16</b>	
Occupation <b>INSURANCE</b>				Aggregate This Election <b>250.00</b>	
Employer <b>SELF</b>					
First Name <b>JOANN</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>MAGGART</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>156 COUNTRY CLUB DR</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-18-16</b>	
Occupation <b>RETIRED</b>				Aggregate This Election <b>200.00</b>	
Employer <b>-</b>					
First Name <b>ML</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>MARKSBERRY</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>138 COUNTRY CLUB DR</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>-</b>	
Occupation <b>RETIRED</b>				Aggregate This Election <b>300.00</b>	
Employer <b>-</b>					
First Name <b>JOHN</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>BASTIAN</b>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address <b>734 E MAIN ST</b>				<input type="checkbox"/> Runoff (Local Elections Only)	
City <b>HENDERSONVILLE</b>		State <b>TN</b>	Zip Code <b>37075</b>	Date of Contribution <b>8-15-16</b>	
Occupation <b>DENTIST</b>				Aggregate This Election <b>250.00</b>	
Employer <b>SELF</b>					
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.)					<b>1875.00</b>

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ESTEN FOR MAYOR</b>				2. REPORT COVERING THE PERIOD FROM: <b>7-1</b> TO: <b>9-30</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>1875.00</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>EDWARD</b>		Middle Name <b>W</b>		Contribution Received For:	
Last Name/Organization Name <b>SKULLEY</b>		Address <b>139 COUNTRY CLUB DR</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>RETIRED</b>		Employer		Date of Contribution <b>8-2-2016</b>	
				Amount of Contribution <b>100.00</b>	
				Aggregate This Election <b>100.00</b>	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name <b>HENDERSONVILLE TIRE CENTER</b>		Address <b>800 WEST MAIN</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation		Employer <b>HENDERSONVILLE TIRE CENTER</b>		Date of Contribution <b>8-30-16</b>	
				Amount of Contribution <b>500.00</b>	
				Aggregate This Election <b>500.00</b>	
First Name <b>DONALD</b>		Middle Name <b>G</b>		Contribution Received For:	
Last Name/Organization Name <b>CIMAGLIA</b>		Address <b>176 ALLEN DRIVE</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>REALTOR</b>		Employer <b>ONE STOP REALTY</b>		Date of Contribution <b>8-29-16</b>	
				Amount of Contribution <b>100.00</b>	
				Aggregate This Election <b>100.00</b>	
First Name <b>ANDREW</b>		Middle Name <b>R.</b>		Contribution Received For:	
Last Name/Organization Name <b>BARRETT</b>		Address <b>121 SKYVIEW</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>REALTOR</b>		Employer <b>REMAX</b>		Date of Contribution <b>8-27-16</b>	
				Amount of Contribution <b>100.00</b>	
				Aggregate This Election <b>100.00</b>	
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.)					<b>2675.00</b>

## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ESTEN FOR MAYOR</b>				2. REPORT COVERING THE PERIOD FROM: <b>7-1</b> TO: <b>9-30</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>2675.00</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <b>KAREN</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>MADDOX</b>		Address <b>247 LAKE TERRACE DR</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>RN</b>		Employer <b>RETIRED</b>		Date of Contribution <b>9-2-16</b>	
				Amount of Contribution <b>100.00</b>	
				Aggregate This Election <b>100.00</b>	
First Name <b>DARLENE</b>		Middle Name <b>M</b>		Contribution Received For:	
Last Name/Organization Name <b>RAWLS</b>		Address <b>700 WEST MAIN ST</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>MCCLOUD PEST CONTROL</b>		Employer <b>OWNER</b>		Date of Contribution <b>8-30-16</b>	
				Amount of Contribution <b>250.00</b>	
				Aggregate This Election <b>250.00</b>	
First Name <b>DAVID</b>		Middle Name <b>-</b>		Contribution Received For:	
Last Name/Organization Name <b>SWANN</b>		Address <b>115 VEEBELT DR.</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>SELF</b>		Employer <b>LAWN CARE</b>		Date of Contribution <b>9-20-16</b>	
				Amount of Contribution <b>250.00</b>	
				Aggregate This Election <b>250.00</b>	
First Name <b>GEORGE</b>		Middle Name <b>C</b>		Contribution Received For:	
Last Name/Organization Name <b>SPENNER</b>		Address <b>-</b>		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
City <b>HENDERSONVILLE</b>		State <b>TN</b>		Zip Code <b>37075</b>	
Occupation <b>SELF</b>		Employer <b>PROMOTIONAL ITEMS</b>		Date of Contribution <b>9-20-16</b>	
				Amount of Contribution <b>500.00</b>	
				Aggregate This Election <b>500.00</b>	
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.)					<b>3775.00</b>

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR MAYOR</b>		2. REPORT COVERING THE PERIOD FROM: <b>7/1/16</b> TO: <b>9/30/16</b>	
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 <b>Robert</b>		Middle Name	
Last Name/Organization Name <b>HOLTHOFFER</b>		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <b>334 W. MAIN ST.</b>		Value of In-Kind Contribution <b>1500.00</b>	
City <b>MEND.</b> State <b>TN</b> Zip Code <b>37075</b>		Date of In-Kind Contribution <b>7/15/16</b>	
Occupation <b>OWNER</b> Employer <b>BUSY BEE</b>		Aggregate this Election <b>1500.00</b>	
Description of In-Kind Contribution <b>PRINTING</b>			
First Name <b>BETTY</b>		Middle Name	
Last Name/Organization Name <b>HOLTHOFFER</b>		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <b>334 W. MAIN ST.</b>		Value of In-Kind Contribution <b>\$750.00</b>	
City <b>HENDERSONVILLE</b> State <b>TN</b> Zip Code <b>37075</b>		Date of In-Kind Contribution <b>8/19/16</b>	
Occupation <b>OWNER</b> Employer <b>BUSY BEE</b>		Aggregate this Election <b>\$750.00</b>	
Description of In-Kind Contribution <b>PRINTING</b>			
First Name		Middle Name	
Last Name/Organization Name <b>SPECIAL T'S LLC</b>		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <b>830 INDUSTRIAL PARK DR</b>		Value of In-Kind Contribution <b>500.00</b>	
City <b>HENDERSONVILLE</b> State <b>TN</b> Zip Code <b>37075</b>		Date of In-Kind Contribution <b>8/19/16</b>	
Occupation		Employer	
		<b>BUSY BEE</b>	
Aggregate this Election <b>1500.00</b>			
Description of In-Kind Contribution <b>T-SHIRTS</b>			
First Name		Middle Name	
Last Name/Organization Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address		Value of In-Kind Contribution	
City		Date of In-Kind Contribution	
Occupation		Employer	
Aggregate this Election			
Description of In-Kind Contribution			
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.)			<b>2750.00</b>



# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR Mayor</b>			2. REPORT COVERING THE PERIOD FROM: <b>7/1/16</b> TO: <b>9/30/16</b>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>0</b>		
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 <b>SHELL SERVICE STATION</b>	Address	<b>GAS FOR DOOR KNOCKING</b>		<b>30<sup>00</sup></b>	
City <b>HENDERSONVILLE</b>	State <b>TN</b>				Zip Code <b>37075</b>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <b>SAM'S CLUB</b>	Address	<b>SUPPLIES FOR MEET + GREETINGS</b>		<b>207<sup>74</sup></b>	
City	State				Zip Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <b>GORDON FOOD SERVICE</b>	Address	<b>FOOD FOR MEET + GREETINGS</b>		<b>153<sup>48</sup></b>	
City <b>GIDDLETSVILLE</b>	State <b>TN</b>				Zip Code
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <b>AVANTI GOURMET</b>	Address <b>E MAIN ST.</b>	<b>Meeting</b>		<b>37<sup>34</sup></b>	
City <b>HENDERSONVILLE</b>	State <b>TN</b>				Zip Code <b>37075</b>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <b>CUMBERLAND LAND DEVELOP</b>	Address	<b>VIDEO'S</b>		<b>3500<sup>00</sup></b>	
City <b>HENDERSONVILLE</b>	State <b>TN</b>				Zip Code <b>37075</b>
First Name	Middle Name				Purpose of Expenditure
Last Name/Business Name <b>NEIL SIDERS</b>	Address	<b>CONSULTING</b>		<b>\$1000<sup>00</sup></b>	
City <b>GALLATIN</b>	State <b>TN</b>				Zip Code <b>37066</b>
First Name	Middle Name				Purpose of Expenditure
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.)				<b>4928.54</b>	

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR Mayor</b>			2. REPORT COVERING THE PERIOD FROM: <b>7/1/16</b> TO: <b>9/30/16</b>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>4928<sup>56</sup></b>	
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 <b>FOX'S PIZZA DEN</b>					
Address					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>SAX DELI</b>					
Address <b>W. MAIN ST.</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>WALMART</b>					
Address <b>N. ANDERSON LN</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>CARABBAS</b>					
Address <b>N. ANDERSON LN.</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>SAMS CLUBS</b>					
Address <b>INDIAN LAKE BLVD.</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>HEND. CHAMBER OF COMM.</b>					
Address <b>COUNTRY CLUB DR.</b>					
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.)					<b>5557<sup>33</sup></b>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Tommy Elsten For Mayor</b>			2. REPORT COVERING THE PERIOD FROM: <b>7/1/16</b> TO: <b>9/30/16</b>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>5557.33</b>	
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 <b>LUNCH Meeting</b>	Amount of Expenditure <b>13.89</b>
Last Name/Business Name <b>Ruby's KITCHEN</b>					
Address <b>NEW SADDLE ISLAND</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure <b>ICE FOR Meet + GREET</b>	Amount of Expenditure <b>18.29</b>
Last Name/Business Name <b>CITGO FOOD MART</b>					
Address <b>SANDERS FERRY RD.</b>					
City <b>Hendersonville</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure <b>OFFICE SUPPLIES</b>	Amount of Expenditure <b>139.17</b>
Last Name/Business Name <b>WALMART</b>					
Address <b>ANDERSON RD.</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure <b>FOOD FOR Meet + GREET</b>	Amount of Expenditure <b>207.23</b>
Last Name/Business Name <b>SAMS CLUB</b>					
Address <b>INDIAN LAKE BLD.</b>					
City <b>Hendersonville</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure <b>SIGN MATERIALS</b>	Amount of Expenditure <b>53.76</b>
Last Name/Business Name <b>Lowes</b>					
Address					
City <b>Hendersonville</b>	State <b>TN</b>	Zip Code <b>37075</b>			
First Name		Middle Name		Purpose of Expenditure <b>Meeting</b>	Amount of Expenditure <b>18.31</b>
Last Name/Business Name <b>ARBY'S</b>					
Address <b>W. MAIN ST.</b>					
City <b>HENDERSONVILLE</b>	State <b>TN</b>	Zip Code <b>37075</b>			
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.)				<b>6007.98</b>	

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY EUSTEN FOR MAYOR</b>			2. REPORT COVERING THE PERIOD FROM: <b>8/1/16</b> TO: <b>9/30/16</b>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount: <b>6007.98</b>	
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 <b>WAREHOUSE MULTIMEDIA</b>		<b>WEBSITE</b>		<b>800<sup>00</sup></b>
Address				
City <b>GOODLETTSVILLE</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>WALMART</b>		<b>CAMPAIGN HEADQUARTERS MATERIALS</b>		<b>158.96</b>
Address				
City <b>HENDERSONVILLE</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>SAM'S CLUB</b>		<b>FOOD FOR MEET + GREENS</b>		<b>463<sup>16</sup></b>
Address <b>INDIAN LAKE BLVD.</b>				
City <b>HENDERSONVILLE</b>	State <b>TN</b>			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>COMCAST</b>		<b>TV/PHONE/INTERNET BILL</b>		<b>290.73</b>
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>NASHVILLE ELECTRIC SVC.</b>		<b>ELECTRIC BILL</b>		<b>599.85</b>
Address				
City	State			
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>REDMONT NATURAL GAS</b>		<b>GAS BILL</b>		<b>64<sup>16</sup></b>
Address				
City	State			
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.)				<b>8384.84</b>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>TOMMY ELSTEN FOR MAYOR</i>		2. REPORT COVERING THE PERIOD FROM: <i>7-1</i> TO: <i>9-30</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>8384<sup>84</sup></i>
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 <i>HENDERSONVILLE UTILITY DIST.</i>		<i>WATER BILL</i>	<i>54<sup>83</sup></i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>VOTER GRAVITY</i>		<i>CAMPAIGN SOFTWARE</i>	<i>297<sup>00</sup></i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>SHELL SERVICE STATION</i>		<i>GAS</i>	<i>46<sup>50</sup></i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>LOWES</i>		<i>SIGN MATERIALS</i>	<i>53<sup>06</sup></i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>AVANGATE BITDEFENDER</i>		<i>SOFTWARE</i>	<i>58<sup>47</sup></i>
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <i>RED ROOSTER</i>		<i>Meetings</i>	<i>22<sup>64</sup></i>
Address <i>W. MAIN ST.</i>			
City	State		
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.)			<i>8917<sup>36</sup></i>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOMMY ELSTEN FOR Mayor</b>		2. REPORT COVERING THE PERIOD FROM: <b>7/1/16</b> TO: <b>9/30/16</b>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>8917.36</b>
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 <b>HENDERSONVILLE CHAMBER OF COM.</b>		<b>FREEDOM FESTIVAL BOOTH</b>	<b>200<sup>00</sup></b>
Address			
City	State    Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>CRIME STOPPERS</b>		<b>GOLF TOURNAMENT SPONSORSHIP.</b>	<b>600<sup>00</sup></b>
Address			
City	State    Zip Code <b>HN 37075</b>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>HENDERSONVILLE SENIOR CENTER</b>		<b>Booth</b>	<b>75<sup>00</sup></b>
Address			
City	State    Zip Code <b>HN 37075</b>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>TRACTOR Supply</b>		<b>Sign Supplies</b>	<b>129.36</b>
Address			
City	State    Zip Code <b>HN 37075</b>		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name <b>VOLUNTEER STATE BANK</b>		<b>SERVICE CHARGE</b>	<b>12<sup>00</sup></b>
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.)			<b>9933.62</b>