

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>4-28-14</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>JERRY FOSTER</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>5-6-14</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>1816 LIBERTY LN</u> City <u>GALLATIN</u> State <u>TN</u> Zip Code <u>37266</u> Phone <u>533-9746</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route <u>SAME</u> City _____ State _____ Zip Code _____ Phone _____			
5. OFFICE SOUGHT (include district number, if applicable) <u>COUNTY COMMISSIONER DISTRICT 4</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>JERRY FOSTER</u>	
7. CATEGORY OF REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input checked="" 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 <u>4-1-14</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>4-26-14</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 checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
<u>[Signature]</u> signature of candidate <u>Robin Foster</u>		<u>[Signature]</u> signature of political treasurer <u>4/28/14</u>	
<u>4-28-14</u> date		<u>4-28-14</u> date	
11. WITNESS SIGNATURE			
signature of witness		signature of witness	
date		date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>517.91</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>1,725.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>1,284.76</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>958.15</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>600.00</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>Ø</u>	

FILED

A.M. APR 29 2014 P.M.

SUMNER COUNTY
ELECTION COMMISSION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="text-align: center; font-size: 1.2em; font-family: cursive;"> Jerry Foster </div>	14. REPORT COVERING THE PERIOD FROM: 4-1-14 TO: 4-26-14
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 225.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 1,500.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 1,725.00
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.)	\$ 1,725.00
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)	
Fundraiser Station Camp High School	\$ 80.00
SHIRTS	\$ 48.30
Supplies	\$ 84.46
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee)	\$ 212.76
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 1,072.00
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 1,284.76
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 0
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 1,284.76
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)	\$ _____
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$ 0
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 i item 12.f.)	\$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE JERRY ESTE				2. REPORT COVERING THE PERIOD FROM: 4-1-14 TO: 4-26-14	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name ANGELO		Middle Name M		Contribution Received For:	
Last Name/Organization Name FORMOSA		Address 724 GINLEY DR		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City NASHVILLE		State TN		Zip Code 37205	
Occupation RETIRED		Employer		<input type="checkbox"/> Runoff (Local Elections Only)	
Date of Contribution 4-1-14				Amount of Contribution \$1,000.00	
Aggregate This Election \$1,000.00					
First Name THEODORE		Middle Name G		Contribution Received For:	
Last Name/Organization Name LEFTIS		Address 1977 B CENTER POINT RD		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation DEPUTY SHERIFF		Employer SUMNER CO SHERIFF'S OFFICE		<input type="checkbox"/> Runoff (Local Elections Only)	
Date of Contribution 4-1-14				Amount of Contribution \$300.00	
Aggregate This Election \$300.00					
First Name RICHARD		Middle Name C		Contribution Received For:	
Last Name/Organization Name ORGAIN		Address 131 INDIAN LAKE RD STE 100		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City HENDERSONVILLE		State TN		Zip Code 37075	
Occupation OPTOMETRIST		Employer SELF		<input type="checkbox"/> Runoff (Local Elections Only)	
Date of Contribution 4-1-14				Amount of Contribution \$200.00	
Aggregate This Election \$200.00					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Zip Code	
Occupation		Employer		<input type="checkbox"/> Runoff (Local Elections Only)	
Date of Contribution				Amount of Contribution	
Aggregate This Election					
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.)					\$1,500.00

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jenny Foster			2. REPORT COVERING THE PERIOD FROM: 9-1-14 TO: 9-26-14		
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 CAPITOL PROMOTIONS, INC		SIGNS	\$1,072.00		
Address POB 231					
City GLENSIDE	State PA				Zip Code 19338
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
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.)				\$1,072.00	