

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates or Single-Candidate Committees

1. DATE OF REPORT	i gillale-ca			DOS	
JAN 16 2013		CANDIDATE OR CO	1 -	- 1.	
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 Pri	ends o	t le	my Hshe	,
Jerry Ashe				3. ELECTION DA	TE
4.a. CAMPAIGN ADDRESS AND PHONE					
Street or Rural Route	City	;	State	Zip Code	Phone
1284 Holloway Rd	. Lehan	uzni.	TN	37090	615-547-7880
4.b. CANDIDATE'S HOME ADDRESS (If different Street or Rural Route				01010	U15-341-100 U
SAME (4A)	City	(State	Zip Code	Phone
5. OFFICE SOUGHT (include district number, it	f applicable)	6. NAME OF	POLITICAL	REASURER (may	ne candidate)
Sheritt			rry	Ashe	oundidate)
7. CATEGORY OR REPORT (Check one)					
FIRST SECOND THIRD	FOURTH	PRE-	PRE-	MID-YEAR	□
QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD	QUARTER	PRIMARY	GENERAL	SUPPLEMENTA	YEAR-END L SUPPLEMENTAL
T)	12012	8.b. ENDING DA		1150550	
9. (Check one)	12012	Ja	n 15	2013	
1984 (1997) (1998) (199					
 This campaign is exempt from detailed tures total \$1,000 or less for this report 	disclosure because	e contributions (inc	cluding in-kin	d) received total \$1,	000 or less AND expendi-
	g poriou: (compi	CIC ILEMIS 12U., 12	e. and 121.)		
 This campaign is required to file a deta and/or expenditures total more than \$1 	iled financial disclos	sure because cont	tributions (inc	cluding in-kind) recei	ved total more than \$1,000
	, coo for this reporting	g period.			
I/we do solemnly swear or affirm that the infinaccurate accounting of campaign contribution	ormation contained	in this campaign f	inancial disc	logure reserved :	
accurate accounting of campaign contribution Financial Disclosure Act. Additionally, live si	is and expenditures	required to be rep	orted by the	candidate committee	and that this report is an
Financial Disclosure Act. Additionally, I/we so benefit of the candidate or for any other nonp	wear or affirm that n	o campaign contri	butions have	been expended for	the personal financial
	amaa, parpood ad o		rar internal fo	evenue code.	
ley (she	<u>/-/6-/3</u>		1040	(she	1-16-12
signature of candidate	date	-	signature of	political treasurer	date
					date
11. WITNESS SIGNATURE		ı	0		
Xing Down att	1-110-17		20 5	Roman	t 111.12
signature of witness	171415		WUS	prince	1-16-13
Signature of Witness	date		signatur	e of witness	date
12. SUMMARY					
				41 200	
a. BALANCE ON HAND LAST REPORT	•••••		\$	72,000	113
b. TOTAL RECEIPTS THIS PERIOD			\$		
c. TOTAL DISBURSEMENTS THIS PERIOD			\$	950 9	0
d. BALANCE ON HAND (12.a. plus 12.b. minu	us 12.c.)			\$	41,430.13
e. TOTAL LOANS OUTSTANDING			***************************************	\$	
f. TOTAL OBLIGATIONS OUTSTANDING					O
	***************************************		•••••	\$	



JAN 17 2013

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	1	COMPASION
The state of the s	14. REPORT CO FROM:	VERING THE PERIOD TO:
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)		10.
a. Unitemized Contributions (\$100 or less from each source this period)	s O	
b. Itemized Contributions (over \$100 from each source this period)		_
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	. •	
16. LOANS RECEIVED THIS REPORTING PERIOD		\$
17. INTEREST RECEIVED THIS REPORTING PERIOD	•••••••••••••••••••••••••	\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$
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)
\$ <u>0</u> \$ <u>0</u>	-	
\$ <u>O</u>	_	
\$_0	_	
\$ <u>O</u>		
\$ 0	-	
* <u>O</u>	_	
* <u>O</u>	_	
\$	_	
Total of Expenditures (\$100 or less each payee)\$	50 00	
b. Itemized Expenditures (Over \$100 each payee this period)\$		·
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		asp 06
20. LOAN REPAYMENTS MADE THIS PERIOD		\$ 150
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		000
22.IN-KIND CONTRIBUTIONS		\$ 430
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$	0	
b. Itemized in-kind contributions (over \$100 from each source this period)\$		a a
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)		
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)\$	\circ	
b. Itemized Obligations Outstanding (Over \$100 each)\$		
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f		
Zina	.,\$	



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

Last Name/Organization Name Address City State Occupation Employer	S FROM PRECEDING TEMIZED CONTRIBUTIO le Name Zip Code	Contributions totaling more than \$100 Contribution Received For: Primary Election Ge Runoff (Local Elections Or Date of Contribution Contribution Received For:	from any contribut	Amount of Contributio Aggregate This Electio	
A. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMS FOR EACH ITEMS Name Last Name/Organization Name Address City Occupation Employer Address State Address State Address State Address City State City State City State City Cocupation Address City State	TEMIZED CONTRIBUTIO	Contributions totaling more than \$100 Contribution Received For: Primary Election Ge Runoff (Local Elections Or Date of Contribution Contribution Received For: Primary Election Gel	eneral Election	Amount of Contribution Aggregate This Election	
Last Name/Organization Name Address City Occupation Employer First Name Middle Address State Middle State State City State	Zip Code Name	Contribution Received For: Primary Election Ge Runoff (Local Elections Or Date of Contribution Contribution Received For: Primary Election Ge	eneral Election	Amount of Contribution Aggregate This Election	
Address City Occupation Employer First Name Middle Address City State City State	∋ Name	Date of Contribution Contribution Received For: Primary Election Get	niy)	Aggregate This Election	
Address City Occupation Employer First Name Middle Address City State City State	∋ Name	Date of Contribution Contribution Received For: Primary Election Get	niy)		
City State Occupation Employer First Name Middle ast Name/Organization Name Address City State	∋ Name	Date of Contribution Contribution Received For: Primary Election Get			
Occupation Employer First Name Middle ast Name/Organization Name Address State Ccupation	∋ Name	Contribution Received For:	neral Florian		
Employer First Name Middle ast Name/Organization Name Address State Ccupation		Contribution Received For:	neral Florian		
Employer First Name Middle ast Name/Organization Name Address State Ccupation		Primary Election Gel	neral Florian	Amount of Contribution	
First Name Middle .ast Name/Organization Name Address State ccupation		Primary Election Gel	neral Florian	Amount of Contribution	
Address State		Primary Election Gel	neral Election	Amount of Contribution	
Address State		Primary Election Gel	neral Flortica	Amount of Contribution	
Address Sity State	Zip kode		neral Election		
State occupation	Zip ©ode				
State occupation	Zip Code	Rupoff (Local Elections Col			
ccupation	Zip Code	- Marion (Locar Elections Onl	у)		
		Date of Contribution			
		J Suit of Solid Gallon		Aggregate This Election	
nployer					
		-			
rst Name Middle N	lame	Contribution Received For:		Amount of Contribution	
st Name/Organization Name	/	Primary Election Gen	eral Election	o. Contribution	
		Trimary Election	arai Election		
dress		Ronoff (Local Elections Only)		
y State	Zip Code	Date of Contribution			
cupation		22.0 5. 55.16.15.26.51		Aggregate This Election	
эрвион					
ployer		1			
/	-				
t Name Middle Na	Contribution Received For:		Amount of Contribution		
Name/Organization Name	☐ Primary Election ☐ Genel	ral Election			
	— Timaly Election — Gene	ai Liection			
ress	Runoff (Local Elections Only)				
State	Zip Code	Date of Contribution		Aggregate This Floor	
pation			N	Aggregate This Election	
				3/	
pyer					
TOTAL ITEMIZED CONTRIBUTIONS					
Carry forward to item 3. of next page if additional pages of this form a If this is the last page of contributions, this amount must be shown in i	ire used.)				

Page _____ of ____

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ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

					FROM:	VERING THE PERIOD TO:
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE			GE (enter \$0 if first itemized page	e) /	Amount	
4. COMPLETE THE APPROPRIA	ATE ITEMS FOR EA	ACH ITEMIZ	ED IN-KIND CON	FRIBUTION (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 Contrib		
Last Name/Organization Name				I	General Election	
Address			Date of In-Kind Contribution	Aggregate this Election		
City		State	Zip Code	Description of In-Kind Contribution	/	03 -3-10 1110
Occupation	Employer			- /	/	
	-					
First Name Middle Name Last Name/Organization Name			In-Kind Contribution Received For: Primary Election General Election			
Address		-/-		Runoff (Local Elections Only) Date of In-Kind Contribution		
City	Т	State	ZipCode			Aggregate this Election
Occupation	Employer	State	ZID CODE	Description of In-Kind Contribution		
	Employer					
irst Name		Middle Name		/ In-Kind Contribution Received	For	Value of la Kind Co. 4 1
.ast Name/Organization Name				General Election	Value of In-Kind Contribu	
ddress				Runoff (Local Elections	Only)	
				Date of In-Kind Contribution		Aggregate this Election
ity	S	State	Zip Code	Description of In-Kind Contribution		
ccupation	Employer		/	7 \		
mt Nama		/	/			
st Name Middle Name st Name/Organization Name		In-Kind Contribution Received		Value of In-Kind Contribut		
		Runoff (Local Elections				
dress		/	·	Date of In-Kind Contribution	Only)	Aggregate this Election
y	St	tate Z	ip Code	Description of In-Kind Contribution		
cupation	Employer			-		
Name	Mic	ddle Name		In-Kind Contribution Received		Value of In-Kind Contribution
Name/Organization Name		1	Primary Election General Election			
ress				Runoff (Local Elections (Only)	
	Stat	to T =:-	Code	Provide Children and a table for finite Children 200 beautiful 6 May Child		Aggregate this Election
pation	Employer	LE ZIP	Code	Description of In-Kind Contribution		
	Linployer					
TOTAL ITEMIZED IN-KIND CO					1	
(Carry forward to item 3. of next page if a (If this is the last page of in-kind contribu	additional pages of this tions, this amount mus	s form are user st be shown in	d.) item 22b. of summar	v.)		
SS-1128 (Rev. 2/06)	-			Page _	of	RDA 1159

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMM	AITTEE C	1 ,	2. REPORT COVERING THE PERIOD
	ds of Terry:		FROM: July 1900 To: Tank 15 30
3. TOTAL ITEMIZED CAMPAIGN EXP	PENDITURES FROM PRECEDING F	PAGE (enter \$0 if first itemized page	\
4. COMPLETE THE APPROPRIATE ITEM	IS FOR EACH ITEMIZED EXPENDITUR	E (expenditures totaling more than \$100 to	to any payee during the period)
riist Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Cladeu/le Comm	P. 1. 2		
Andress		DONATIO	200
P.U. Bux 97		1 ,000	100
Gladeville	State Zip Code 7071		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ast Name/Business Name WILSON 6. Reserve	· Deputy Fund	-	
ddress 105 EAST High J		- Donatio	100
ity ,	State Zip Code	- DONA	100
Lebanon	TN 37087		
IST Name SUSAN LYNN	Middle Name	Purpose of Expenditure	
st Name/Business Name			Amount of Expenditure
dean-	ie State House		An
510 Barton S	hore	Donation	400
,	State Zip Code	+	1
LEBANUN	TN. 37087		
st Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Name/Business Name		1	and a Exponditure
iress/		DONATION	00
Lodge #71		DONATION	100
Lebanon	State Zip Code	,	
Name	IN 37087		
-	Middle Name	Purpose of Expenditure	Amount of Expenditure
Name/Business Name STAMP MS			
255 1213 B-AF.	11/11/21/07	DONATION	200 00
ALD DEHOUNG	Valley Court		200
NASHVILLE	TN 37221		
Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
ame/Bosiness Name	1100		
Giddenos	(LAVORN)	DONATION	00
Lebanion (Amp Box		00,000	50
Lebanion	State Zip Code 37087		
OTAL ITEMIZED EXPENDITURES			
Carry forward to item 3. of next page if additional page of this is the last page of expenditures, this amount m	ges of this form are used.)		00
The second secon	rust be shown in item 19h of summan 1		450

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