

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>October 28, 2002</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Jack Sharp</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>November 5, 2002</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>7536 Sims rd. Harrison, TN 37341 344-1523</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>3211 Old Ringgold rd. East Ridge, TN 37412 698-4339</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>State Rep. Dist. 30</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Patricia A. Kays</u>	
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> POST-GENERAL <input type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> AMENDED			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>September 16, 2002</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>October 26, 2002</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>Jack Sharp</u> 10-29-02 signature of candidate date		<u>Patricia A. Kays</u> 10/29/02 signature of political treasurer date	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>Tenn</u> THIS <u>29th</u> DAY OF <u>October</u> 20 <u>02</u> <u>Steve Pine</u> notary public MY COMMISSION EXPIRES: <u>May 7, 2003</u> date commission expires Notary Seal		SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>Tenn</u> THIS <u>29th</u> DAY OF <u>October</u> 20 <u>02</u> <u>Steve Pine</u> notary public MY COMMISSION EXPIRES: <u>May 7, 2003</u> date commission expires Notary Seal	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>6362.41</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>600.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>4,047.13</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>5815.28</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>3,000.00</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jack Sharp			2. REPORT COVERING THE PERIOD FROM: 9-16-02 TO: 10-26-02		
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 Van Hillery		Middle Name		Purpose of Expenditure Campaign Contribution	Amount of Expenditure \$1,000.00
Last Name/Business Name Committee to Elect Governor					
Address PO BOX 680127					
City Franklin		State TN	Zip Code 37068		
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 <small>(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.)</small>				1,000.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jack Sharp			2. REPORT COVERING THE PERIOD FROM 9-16-02 TO: 10-26-02		
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 TN Bankers Political		Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Action State Comm.			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address 201 Venture Circle			<input type="checkbox"/> Runoff (Local Elections Only)		500.00
City Nashville	State TN	Zip Code 37228	Date of Contribution(s) 10-8-02		Aggregate this Election
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(s)		Aggregate this Election
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(s)		Aggregate this Election
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(s)		Aggregate this Election
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(s)		Aggregate this Election
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(s)		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.)				0	

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="text-align: center; font-size: 1.2em; font-family: cursive;">Jack Sharp</div>				2. REPORT COVERING THE PERIOD							
				FROM: 9-16-02		TO: 10-26-02					
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 <div style="font-size: 1.2em; font-family: cursive;">Jack</div>		Middle Name		Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)			
Last Name/Organization Name <div style="font-size: 1.2em; font-family: cursive;">Sharp</div>				3,000.00		0	0	3,000.00			
Address <div style="font-size: 1.2em; font-family: cursive;">3211 Old Briggold rd.</div>				Loan Received For:			Date of Loan				
City <div style="font-size: 1.2em; font-family: cursive;">East Ridge</div>				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election			May 1996				
State <div style="font-size: 1.2em; font-family: cursive;">TN</div>				<input type="checkbox"/> Runoff (Local Elections Only)							
Zip Code <div style="font-size: 1.2em; font-family: cursive;">37412</div>											
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							
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)				Outstanding Loan Balance (Beginning of Period)		Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)			
(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.)											



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Jack Sharp				2. REPORT COVERING THE PERIOD FROM: <u>9-16-02</u> TO: <u>10-26-02</u>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <u>0</u>		
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	
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 In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election			
Address				<input type="checkbox"/> Runoff (Local Elections Only)			
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		Aggregate this Election	
Description of In-Kind Contribution							
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind 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 In-Kind Contribution		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.)					<u>0</u>		

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
Jack Sharp			FROM: 9-16-02		TO: 10-26-02	
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.)			0	0	0	0