

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates *Judicial*  
For Single-Candidate Committees

1. DATE OF REPORT <b>APRIL 24, 2006</b>		2.a. NAME OF CANDIDATE OR COMMITTEE <b>TOM CRUTCHFIELD FOR JUDGE</b>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <b>TOM CRUTCHFIELD</b>		3. ELECTION DATE <b>5/2/06</b>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <b>POB # 548 CHATTANOOGA TN 37401 423-517-8868</b>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <b>905 MT. VERNON AVE. CHATTANOOGA TN 37405 266-4095</b>			
5. OFFICE SOUGHT (include district number, if applicable) <b>CIRCUIT COURT JUDGE - II</b>		6. NAME OF POLITICAL TREASURER (may be candidate) <b>JEFF MISCALL</b>	
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 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 <b>4/01/06</b>		8.b. ENDING DATE OF REPORTING PERIOD <b>4/22/06</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 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.			
<i>Tom Crutchfield</i> signature of candidate		<i>Jeff Miscall</i> signature of political treasurer	
4/24/06 date		4/24/06 date	
11. WITNESS SIGNATURE			
<i>Linda Johnson</i> signature of witness		<i>Linda Johnson</i> signature of witness	
4/24/06 date		4/24/06 date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$ <u>5,420.26</u>	
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <u>5,975.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <u>6,461.50</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <u>4933.96</u>	
e. TOTAL LOANS OUTSTANDING .....		\$ <u>5000.00</u>	
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <u>3639.00</u>	





## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOM CRUTCHFIELD FOR JUDGE</b>		2. REPORT COVERING THE PERIOD FROM: <b>4/1/06</b> TO: <b>4/22/06</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>0</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <b>RAYOR</b>	Middle Name	Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution  <b>250.00</b>
Last Name/Organization Name <b>MACON</b>			
Address <b>6221 BAYSHORE DRIVE</b>			
City <b>HARRISON</b>	State <b>TN</b>	Zip Code <b>37341</b>	Date of Contribution  <b>4/11/06</b>
Occupation <b>DEVELOPER</b>		Aggregate This Election  <b>250.00</b>	
Employer <b>SELF</b>			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
Employer			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election  <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name			
Address			
City	State	Zip Code	Date of Contribution
Occupation		Aggregate This Election	
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>250.00</b>

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Tom Crutchfield for Judge</b>			2. REPORT COVERING THE PERIOD FROM: <b>4/1/06</b> TO: <b>4/22/06</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>HANSEN COMPANY</b>		<b>ADVERTISING</b>		<b>3000.00</b>	
Address <b>POB # 1475</b>					
City <b>HIXSON</b>	State <b>TN</b>				
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name <b>LAUSON WHITAKER PHOTOGRAPHY</b>		<b>PRINTING</b>		<b>3386.75</b>	
Address <b>POB 1601</b>					
City <b>CHATTANOOGA</b>	State <b>TN</b>				
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State				
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State				
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State				
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
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>6386.75</b>	



## ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>TOM CRUTCHFIELD FOR JUDGE</b>				2. REPORT COVERING THE PERIOD, FROM: <b>4/1/06</b> TO: <b>4/24/06</b>	
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 <b>THOMAS</b>	Middle Name	Outstanding Loan Balance (Beginning of Period) <b>0</b>	Loans Received <b>5,000.00</b>	Loan Payments <b>0</b>	Outstanding Loan Balance (End of Period) <b>5,000.00</b>
Last Name/Organization Name <b>CRUTCHFIELD</b>		Address <b>905 MT. VERNON AVE</b>			Date of Loan <b>4/7/06</b>
City <b>CHATTANOOGA</b>	State <b>TN</b>	Zip Code <b>37405</b>	Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)					
First Name		Middle Name		First Name	
Last Name/Organization Name		Last Name/Organization Name		Last Name/Organization Name	
Address		Address		Address	
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name		Middle Name		First Name	
Last Name/Organization Name		Last Name/Organization Name		Last Name/Organization Name	
Address		Address		Address	
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name		Middle Name		First Name	
Last Name/Organization Name		Last Name/Organization Name		Last Name/Organization Name	
Address		Address		Address	
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	
First Name		Middle Name		First Name	
Last Name/Organization Name		Last Name/Organization Name		Last Name/Organization Name	
Address		Address		Address	
City	State	Zip Code	City	State	Zip Code
Amount Guaranteed Outstanding		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.a, on front page.)</small>				Outstanding Loan Balance (Beginning of Period) <b>0</b>	Loans Received <b>5000.00</b>
				Loan Payments <b>0</b>	Outstanding Loan Balance (End of Period) <b>5000.00</b>



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
Tom CRUTCHFIELD FOR JUDGE			FROM: 4/1/06		TO: 4/22/06	
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		0	5,485	3,000	2,485
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
HANSEN COMPANY POB# 1475 HIXSON TN 37343 ADVERTISING						
First Name	Middle Name		0	1,154	0	1,154
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation						
KICKOFF PUBLISHING 1401 CARTER ST. CHATTANOOGA TN 37401 MAILING						
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						3,637
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)						