

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 7-1-2006		2.a. NAME OF CANDIDATE OR COMMITTEE KENNY Smith			
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE 8-3-2006		
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route 4308 Fountain Ave		City CHATTANOOGA	State TN	Zip Code 37412	Phone 423-629-1883
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) HAMILTON Co. School Board - Dist. 8			6. NAME OF POLITICAL TREASURER (may be candidate) Dwight Wilhoit		
7. CATEGORY OR REPORT (Check one)					
<input type="checkbox"/> FIRST QUARTER		<input checked="" type="checkbox"/> SECOND QUARTER		<input 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 4-1-2006			8.b. ENDING DATE OF REPORTING PERIOD 6-30-2006		
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><i>Kenny Smith</i></u> signature of candidate		<u>7-10-06</u> date		<u><i>Dwight Wilhoit</i></u> signature of political treasurer	
				<u>7/10/06</u> date	
11. WITNESS SIGNATURE					
<u><i>Paul L. Gasa</i></u> signature of witness		<u>7-10-06</u> date		<u><i>Paul L. Gasa</i></u> signature of witness	
				<u>7-10-06</u> date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT		\$ <u>10,245</u>			
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>2345</u>			
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>9,241.⁰⁸</u>			
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>3348.⁹²</u>			
e. TOTAL LOANS OUTSTANDING		\$ <u>- 0 -</u>			
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>- 0 -</u>			



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE KENNY SMITH				2. REPORT COVERING THE PERIOD FROM: 4-1-06 TO: 6-30-06			
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		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name IRON WORKERS LU. 704				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		1000 \$	
Address 2715 Belle ARBOR Ave.				<input type="checkbox"/> Runoff (Local Elections Only)			
City CHATT.		State TN	Zip Code 37402	Date of Contribution 4-8-06		Aggregate This Election	
Occupation							
Employer							
First Name Robert		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name SISKIN				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		200 \$	
Address 36 S. Crest Rd.				<input type="checkbox"/> Runoff (Local Elections Only)			
City CHATTANOOGA		State TN	Zip Code 37404	Date of Contribution 6-9-06		Aggregate This Election	
Occupation							
Employer							
First Name ROGER		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name TUDOR				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500 \$	
Address 1020 WESTBRIDGE LANE				<input type="checkbox"/> Runoff (Local Elections Only)			
City CHATTANOOGA		State TN	Zip Code 37405	Date of Contribution 6.9.06		Aggregate This Election	
Occupation A.G.C.							
Employer							
First Name DALE		Middle Name		Contribution Received For:		Amount of Contribution	
Last Name/Organization Name MABEE				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		250 \$	
Address 115 Mc FARLAND Ave.				<input type="checkbox"/> Runoff (Local Elections Only)			
City CHATT.		State TN	Zip Code 37405	Date of Contribution 6.29.06		Aggregate This Election	
Occupation Home Building							
Employer							
5. TOTAL ITEMIZED CONTRIBUTIONS <small>(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.)</small>					\$1950		

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Kenny Smith			2. REPORT COVERING THE PERIOD FROM: 4-1-06 TO: 6-30-06		
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 Bill Ortwein SIGN				YARD SIGNS	2647.¹⁸
Address 2806 E. 50th St.					
City CHATT.	State TN	Zip Code 37407			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Tucker PHOTOGRAPHY				Photos for SIGNS & MAIL OUTS	158.⁸⁵
Address P.O. Box 734					
City Hixson	State TN	Zip Code 37343			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Bill Ortwein SIGN				4x3 STREET SIGNS	262.²⁰
Address 2806 E. 50th St.					
City CHATT.	State TN	Zip Code 37407			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Fairway OUTDOORS				SIGNS	2400.⁰⁰
Address S. Market St.					
City CHATT.	State TN.	Zip Code 37408			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Williams PRINTING				MAIL-OUTS	2456.⁴⁹
Address 6129 Airways BLVD					
City CHATT.	State TN	Zip Code 37421			
First Name		Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name Bill Ortwein SIGN				4x3 STREET SIGNS	983.²⁵
Address 2806 E. 50th St.					
City CHATT.	State TN.	Zip Code 37407			
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.)				8907.⁹⁷	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Kenny Smith</i>			2. REPORT COVERING THE PERIOD FROM: <i>4-1-06</i> TO: <i>6-30-06</i>	
			Amount <i>8907.⁹⁷</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				
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>Lowes</i>		<i>PLYWOOD & Glue</i>	<i>103.⁹⁶</i>	
Address <i>5429 Hwy 153</i>				
City <i>Hixson</i>	State <i>TN</i>			
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				<i>9011.⁹³</i>
(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.)				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Kenny Smith</i>				2. REPORT COVERING THE PERIOD			
				FROM: <i>4-1-06</i>	TO: <i>6-30-06</i>		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>-0-</i>		
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	
				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		<i>300 \$</i>	
Last Name/Organization Name		Address		<input type="checkbox"/> Runoff (Local Elections Only)			
<i>Tucker Photography</i>		<i>P.O. Box 734</i>		Date of In-Kind Contribution		Aggregate this Election	
<i>5-9-06</i>		City		State		Zip Code	
<i>Hixson</i>		<i>TN</i>		<i>37343</i>		Description of In-Kind Contribution	
Occupation		Employer		<i>CD MADE of Photos</i>			
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Last Name/Organization Name		Address		<input type="checkbox"/> Runoff (Local Elections Only)			
				Date of In-Kind Contribution		Aggregate this Election	
		City		State		Zip Code	
		Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Last Name/Organization Name		Address		<input type="checkbox"/> Runoff (Local Elections Only)			
				Date of In-Kind Contribution		Aggregate this Election	
		City		State		Zip Code	
		Occupation		Employer		Description of In-Kind Contribution	
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution	
				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election			
Last Name/Organization Name		Address		<input type="checkbox"/> Runoff (Local Elections Only)			
				Date of In-Kind Contribution		Aggregate this Election	
		City		State		Zip Code	
		Occupation		Employer		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.)					<i>300 \$</i>		