

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/6/2009		2.a. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Joe Graham	
2.b. IF COMMITTEE, NAME OF CANDIDATE Joe Graham		3. ELECTION DATE March 3, 2009	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 2903 Cummings Hwy	City Chattanooga	State TN	Zip Code 37419 Phone 423-821-6834
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route 104 Fern Avenue	City Chattanooga	State TN	Zip Code 37419 Phone 423 821-3266
5. OFFICE SOUGHT (include district number, if applicable) City Council District 1		6. NAME OF POLITICAL TREASURER (may be candidate) Vonda Patrick	
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 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 February 24, 2009		8.b. ENDING DATE OF REPORTING PERIOD	
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>Joseph P. Graham</u> 4/8/09 signature of candidate date		<u>Vonda Patrick</u> 4/8/09 signature of political treasurer date	
<u>[Signature]</u> 4/8/09 signature of witness date		<u>[Signature]</u> 4/8/09 signature of witness date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT	\$ <u>4923.05</u>		
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>4256.24</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>9179.29</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>-0-</u>		
e. TOTAL LOANS OUTSTANDING	\$ <u>6656.24</u>		
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>-0-</u>		



HAMILTON COUNTY ELECTION COMMISSION

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Committee to Elect Joe Graham</u>	14. REPORT COVERING THE PERIOD FROM: <u>2/24/09</u> TO: <u>4/6/09</u>
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RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 100.00

b. Itemized Contributions (over \$100 from each source this period) \$ 500.00

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 600.00

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 3656.24

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 4256.24

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)

	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ -0-

b. Itemized Expenditures (Over \$100 each payee this period) \$ 9179.29

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 9179.29

20. LOAN REPAYMENTS MADE THIS PERIOD \$ -0-

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 9179.29

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.) \$ _____

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ -0-

b. Itemized Obligations Outstanding (Over \$100 each) \$ -0-

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 Committee to Elect Joe Graham			2. REPORT COVERING THE PERIOD FROM: 2/24/09 TO: 4/6/09		
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 Jerry		Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name Walls			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		500.00
Address 2923 Gordon Road			<input type="checkbox"/> Runoff (Local Elections Only)		
City Chattanooga	State TN	Zip Code 37419	Date of Contribution 3/10/2009		Aggregate This Election 550.00
Occupation Owner					
Employer Lookout Valley Tool & Machine					
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		Aggregate This Election
Occupation					
Employer					
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		Aggregate This Election
Occupation					
Employer					
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		Aggregate This Election
Occupation					
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.)				500.00	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Committee to Elect Joe Graham			2. REPORT COVERING THE PERIOD FROM: 2/24/09 TO: 4/6/09	
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 Hampton Inn		Election Night Reception Room Rental	150.00	
Address 3611 Cummings Highway				
City Chattanooga	State TN			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Accent Printing		Signs, Banners, buttons, stickers, napkins, plates with campaign design	6046.91	
Address 2903 Cummings Hwy				
City Chattanooga	State TN			
First Name Joe	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Graham		Postage for mailing campaign postcards	2982.38	
Address 104 Fern Avenue				
City Chattanooga	State TN			
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 <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>				9179.29



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Joe Graham</i>				2. REPORT COVERING THE PERIOD FROM: <i>2/24/09</i> TO: <i>4/6/09</i>			
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 <i>Note: This Loan will not be repaid to cand. date because of the amt of contributions.</i>							
First Name <i>Joe</i>		Middle Name <i>P</i>		Outstanding Loan Balance (Beginning of Period) <i>3000.00</i>	Loans Received <i>3656.24</i>	Loan Payments <i>0</i>	Outstanding Loan Balance (End of Period) <i>6656.24</i>
Last Name/Organization Name <i>Graham</i>				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <i>10/31/2008 & 4/13/09</i>	
Address <i>104 Fern Avenue</i>				<input type="checkbox"/> Runoff (Local Elections Only)			
City <i>Chattanooga</i>	State <i>TN</i>	Zip Code <i>37419</i>					
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) <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.e, on front page.)</small>				Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Committee to Elect Joe Graham				FROM: 2/24/09		TO: 4/6/09	
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		6046.91	-0-	6046.91	-0-
Last Name/Business Name							
Address							
City	State	Zip Code					
Joe				Sigs, banners, buttons, stickers, napkins & plates with campaign design.			
Accent Printing Inc.				2061.72	920.66	2982.38	-0-
Address							
101 Fern Avenue							
City	State	Zip Code					
Chattanooga		TN 37419		Postage for mailing campaign postcards			
Joe							
Graham							
Address							
101 Fern Avenue							
City	State	Zip Code					
Chattanooga		TN 37419					
Description of Obligation							
Postage for mailing campaign postcards							
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				8108.63	920.66	9029.29	-0-
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							