

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 4/10/2009	2.a. NAME OF CANDIDATE OR COMMITTEE Citizens to Re-Elect Sally Robinson		
2.b. IF COMMITTEE, NAME OF CANDIDATE Sally Robinson		3. ELECTION DATE 03/03/09	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route 1136 Constitution Drive	City Chattanooga	State TN	Zip Code 37405  Phone (423) 266-1776
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)			
Street or Rural Route 1136 Constitution Drive	City Chattanooga	State TN	Zip Code 37405  Phone (423) 266-1776
5. OFFICE SOUGHT (include district number, if applicable) City Council, District 2		6. NAME OF POLITICAL TREASURER (may be candidate) W. Coleman Powell, CPA	
7. CATEGORY OR REPORT (Check one)			
<input checked="" 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 checked="" type="checkbox"/> PRE-GENERAL <i>Post</i>	<input type="checkbox"/> MID-YEAR SUPPLEMENTAL	<input type="checkbox"/> YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD 02/22/09		8.b. ENDING DATE OF REPORTING PERIOD 03/31/09	
9. (Check one)			
a. <input checked="" 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 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>Sally Robinson</u> signature of candidate		<u>4/17/09</u> date	<u>W. Coleman Powell</u> signature of political treasurer
			<u>4/10/09</u> date
11. WITNESS SIGNATURE			
<u>Shirley Cromover</u> signature of witness		<u>4/17/09</u> date	<u>Wynette N Elder</u> signature of witness
			<u>4/16/09</u> date
12. SUMMARY			
a.	BALANCE ON HAND LAST REPORT.....	\$ 4,536.81	
b.	TOTAL RECEIPTS THIS PERIOD.....	\$ 300.00	
c.	TOTAL DISBURSEMENTS THIS PERIOD.....	\$ 422.80	
d.	BALANCE ON HAND (12 a. plus 12 b. minus 12 c.).....	\$ 4,414.01	
e.	TOTAL LOANS OUTSTANDING.....	\$ -	
f.	TOTAL OBLIGATIONS OUTSTANDING.....	\$ -	



## ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Citizens to Re-Elect Sally Robinson				2. REPORT COVERING THE PERIOD FROM: 02/22/09 TO: 03/31/09	
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>Michael</b>		Middle Name <b>F.</b>		Contribution Received For:	
Last Name/Organization Name <b>McGauley</b>				Primary Election <input type="checkbox"/> General Election <input checked="" type="checkbox"/>	
Address <b>720 Cherry St.</b>				Runoff (Local Elections Only) <input type="checkbox"/>	
City <b>Chattanooga</b>		State <b>TN</b>	Zip Code <b>37402</b>	Date of Contribution(s)	
Occupation <b>Finance</b>				Aggregate this Election <input type="checkbox"/>	
Employer <b>Fidelity Trust Company</b>				3/23/2009	
Amount of Contribution				250.00	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				Primary Election <input type="checkbox"/> General Election <input type="checkbox"/>	
Address				Runoff (Local Elections Only) <input type="checkbox"/>	
City		State	Zip Code	Date of Contribution(s)	
Occupation				Aggregate this Election <input type="checkbox"/>	
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS				\$ 250.00	
(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.)					

**ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE**

1. NAME OF CANDIDATE OR COMMITTEE Citizens to Re-Elect Sally Robinson			2. REPORT COVERING THE PERIOD FROM: 02/22/09 TO:03/31/09	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$ -
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 Redline Printing & Sign Co.		Printing Flyers	\$422.80	
Address 1609-B Hamill Road				
City Hixson	State TN			
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		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED EXPENDITURES				\$ 422.80
(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.)				