

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

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| 1. DATE OF REPORT JULY 25, 2006 | 2.a. NAME OF CANDIDATE OR COMMITTEE TOM CRUTCHFIELD FOR JUDGE |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE TOM CRUTCHFIELD | 3. ELECTION DATE AUGUST 3, 2006 |
| 4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone POB 548 CHATTANOOGA TN 37401 517-8868 | |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone 905 MT. VERNON AVE. CHATTANOOGA TN 37405 266-4095 | |
| 5. OFFICE SOUGHT (include district number, if applicable) CIRCUIT COURT JUDGE - II | 6. NAME OF POLITICAL TREASURER (may be candidate) JEFF MCCALL |
| 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 checked="" type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL | |
| 8.a. BEGINNING DATE OF REPORTING PERIOD JULY 1, 2006 | 8.b. ENDING DATE OF REPORTING PERIOD JULY 24, 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. | |
| <i>Tom Crutchfield</i> _____ signature of candidate | 7/27/06 _____ date |
| <i>Jeffrey S. McCall</i> _____ signature of political treasurer | 7/27/06 _____ date |
| 11. WITNESS SIGNATURE | |
| <i>Patricia D. Branham</i> _____ signature of witness | 7/27/06 _____ date |
| <i>Patricia D. Branham</i> _____ signature of witness | 7/27/06 _____ date |
| 12. SUMMARY | |
| a. BALANCE ON HAND LAST REPORT | \$ 6,810.70 |
| b. TOTAL RECEIPTS THIS PERIOD | \$ 2,395.00 |
| c. TOTAL DISBURSEMENTS THIS PERIOD | \$ 6,767.70 |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) | \$ 2,438.00 |
| e. TOTAL LOANS OUTSTANDING | \$ 13,193.00 |
| f. TOTAL OBLIGATIONS OUTSTANDING | \$ 0 |



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | | |
|--|--------------------|--|--|---|
| 1. NAME OF CANDIDATE OR COMMITTEE TOM CRITCHFIELD FOR JUDGE | | 2. REPORT COVERING THE PERIOD FROM 7/1/06 TO: 7/24/06 | | |
| 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 SERVICE EMPLOYEES UNION | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | | 500.00 |
| Address 135 GALLATIN ROAD | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City NASHVILLE | State TN | Zip Code 37206 | Date of Contribution 7/11/06 | Aggregate This Election 500.00 |
| Occupation | Employer | | | |
| First Name | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name IBEW | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | | 1000.00 |
| Address 900 SEVENTH ST., NW | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City WASHINGTON | State DC | Zip Code 20001 | Date of Contribution 7/11/06 | Aggregate This Election 1000.00 |
| Occupation | Employer | | | |
| First Name | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name RICHARD THOMPSON | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | | 350.00 |
| Address 1000 REARS LAKE ROAD | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City CHATTANOOGA | State TN | Zip Code 37380 | Date of Contribution 7/17/06 | Aggregate This Election 150.00 |
| Occupation | Employer | | | |
| First Name WILLIAM E. | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name WEBB | | <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | | 200.00 |
| Address 1701 CARTER ST. | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City CHATTANOOGA | State TN | Zip Code 37402 | Date of Contribution 7/10/06 | Aggregate This Election 200.00 |
| Occupation DENTIST | 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.) | | | | 1850.00 |

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ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | |
|--|--------------------|---|--|
| 1. NAME OF CANDIDATE OR COMMITTEE TOM CROTCHFIELD FOR JUDGE | | 2. REPORT COVERING THE PERIOD FROM 7/1/06 TO 7/24/06 | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | Amount 1850.00 |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | |
| First Name HERBERT | | Middle Name | |
| Last Name-Organization Name ADCOX | | Contribution Received For <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 5721 LEE HWY | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City CHATTANOOGA | State TN | Zip Code 37421 | Date of Contribution 6/24/06 |
| Occupation BUSINESSMAN | | Aggregate This Election 250.00 | |
| Employer SELF | | | |
| First Name JOHN | | Middle Name | |
| Last Name-Organization Name McMAHAN | | Contribution Received For <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election | |
| Address 323 HIGH ST | | <input type="checkbox"/> Runoff (Local Elections Only) | |
| City CHATTANOOGA | State TN | Zip Code 37403 | Date of Contribution 6/30/06 |
| Occupation | | Aggregate This Election 250.00 | |
| Employer | | | |
| First Name | | Middle Name | |
| Last Name-Organization Name | | Contribution Received For <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 |
| Occupation | | Aggregate This Election | |
| Employer | | | |
| First Name | | Middle Name | |
| Last Name-Organization Name | | Contribution Received For <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 |
| Occupation | | Aggregate This Election | |
| 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> | | | 2350.00 |

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ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | | | |
|--|--------------------|----------------------------------|---|--|--------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE TOM CRUTCHFIELD FOR JUDGE | | | 2. REPORT COVERING THE PERIOD FROM: 7/1/06 TO: 7/28/06 | | |
| 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 CHATTANOOGA COURIER | | ADVERTISING | 1260.00 | | |
| Address POB 1505 | | | | | |
| City CHATTANOOGA | State TN | | | | Zip Code 37405 |
| First Name | | | | | Middle Name |
| Last Name/Business Name SIGN BY TOMORROW | | PRINTING | 1174.43 | | |
| Address 5250 L BRAINERD RD | | | | | |
| City CHATTANOOGA | State TN | | | | Zip Code 37411 |
| First Name | | | | | Middle Name |
| Last Name/Business Name SIGNAL MTN. POST | | ADVERTISING | 805.00 | | |
| Address | | | | | |
| City SIGNAL MTN | State TN | | | | Zip Code 37377 |
| First Name | | | | | Middle Name |
| Last Name/Business Name ADVANTAGE PRINTING | | PRINTING | 301.92 | | |
| Address 4031 BRAINERD RD | | | | | |
| City CHATTANOOGA | State TN | | | | Zip Code 37411 |
| First Name | | | | | Middle Name |
| Last Name/Business Name ADVANTAGE SPORTS | | PRINTING/ ADVERTISING | 550.35 | | |
| Address 4518 HWY 58 | | | | | |
| City CHATTANOOGA | State TN | | | | Zip Code 37416 |
| First Name | | | | | Middle Name |
| Last Name/Business Name KENNETH SIMPSON | | CAMPAIGN WORKERS | 2000.00 | | |
| Address 506 BLUE JAY RD | | | | | |
| City EAST RIDGE | State TN | | | | Zip Code 37412 |
| First Name | | | | | Middle Name |
| 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> | | | 5491.70 | | |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | | |
|--|--------------------|---|----------------------------|-----------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE TOM CROCKFIELD FOR JUDGE | | 2. REPORT COVERING THE PERIOD FROM: 7/1/06 TO: 7/24/06 | | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | Amount 5491.70 | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period) | | | | |
| First Name BREATHER | | Middle Name | Purpose of Expenditure | Amount of Expenditure |
| Last Name/Business Name TINKER | | | CAMPAIGN WORKER | 180.00 |
| Address 4405 LONA LANE | | | | |
| City CHATTANOOGA | State TN | Zip Code 37411 | | |
| First Name NADINE | | Middle Name | | |
| Last Name/Business Name VARNELL | | | CAMPAIGN WORKER | 180.00 |
| Address 805 EDDING ST | | | | |
| City CHATTANOOGA | State TN | Zip Code 37407 | | |
| First Name CYNTHIA | | Middle Name | | |
| Last Name/Business Name TAYLOR | | | CAMPAIGN WORKER | 180.00 |
| Address 112 LAWN ST. | | | | |
| City CHATTANOOGA | State TN | Zip Code 37405 | | |
| First Name TERRILYN | | Middle Name | | |
| Last Name/Business Name VARNELL | | | CAMPAIGN WORKER | 180.00 |
| Address 507 SEQUOIA DR. | | | | |
| City CHATTANOOGA | State TN | Zip Code 37411 | | |
| First Name CANDACE | | Middle Name | | |
| Last Name/Business Name CHENKUS | | | CAMPAIGN WORKER | 390.00 |
| Address 9025 AMOS RD | | | | |
| City CHATTANOOGA | State TN | Zip Code 37363 | | |
| First Name | | Middle Name | | |
| Last Name/Business Name | | | | |
| Address | | | | |
| City | State | Zip Code | | |
| 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.) | | | 6601.70 | |

ITEMIZED STATEMENT OF LOANS - CANDIDATE

| | | | | | | | | | |
|--|--|------------------------------|----------|---|--|-------------------------------|------------------------------|---|--|
| 1. NAME OF CANDIDATE OR COMMITTEE TOM CRUTCHFIELD FOR JUDGE | | | | 2. REPORT COVERING THE PERIOD FROM: 7/1/06 TO: 7/25/06 | | | | | |
| 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 TOM | | Middle Name CRUTCH | | Outstanding Loan Balance (Beginning of Period) 13,193.00 | | Loans Received 0 | Loan Payments 0 | Outstanding Loan Balance (End of Period) 13,193.00 | |
| Last Name/Organization Name CRUTCHFIELD | | | | Loan Received For: <input checked="" type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only) | | | | Date of Loan VARIOUS | |
| Address 905 MT. VERNON | | | | City CHATTANOOGA TN | | State TN | | Zip Code 37405 | |
| 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) (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.) | | | | Outstanding Loan Balance (Beginning of Period) 13,193.00 | | Loans Received 0 | Loan Payments 0 | Outstanding Loan Balance (End of Period) 13,193.00 | |

