

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Robert Brian Johnson				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 1000.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)						
First Name WAYNE		Middle Name A		Contribution Received For:		Amount of Contribution 500.00
Last Name/Organization Name RICH				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 8417 Roy Lane				Date of Contribution		Aggregate This Election
City Ooltewah	State TN	Zip Code 37363		7/14/06		
Occupation Retired						
Employer						
First Name		Middle Name		Contribution Received For:		Amount of Contribution 500.00
Last Name/Organization Name Plumbers & Steamfitters				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		
Address 3009 Riverside DR				Date of Contribution		Aggregate This Election
City CHATTANOOGA	State TN	Zip Code 37406				
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 <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of Contribution		Aggregate This Election
City	State	Zip Code				
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 <input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of Contribution		Aggregate This Election
City	State	Zip Code				
Occupation						
Employer						
5. TOTAL ITEMIZED CONTRIBUTIONS					Amount	
(Carry forward to item 3. of next page if additional pages of this form are used.)					1000.00	
(If this is the last page of contributions, this amount must be shown in item 15c. of summary.)						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Robert Brian Johnson			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 1500.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name MARK	Middle Name	Purpose of Expenditure web site		Amount of Expenditure 1500.00
Last Name/Business Name FRainie				
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 <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>				1500.00

