CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For Contributions and Expenditures of State and Local Political Campaigns in Tennessee

INSTRUCTIONS: This form must be used to account for all money or things of value required by Tennessee Code Annotated §2-10-102 to be reported by political candidates, single-candidate political campaign committees, multi-candidate political campaign committees and committees formed to support or approve local measures.

If receipts total $1,000 or less and expenditures total $1,000 or less for the period shown in Item 4 of this form, complete page one (items 1-9) only. Signatures of both the candidate (or appointing authority) and the political treasurer are required in item 8. Both signatures must be notarized in item 9.

If receipts and/or expenditures total more than $1,000 for the period shown in Item 4 of this form, complete pages one and two, placing signatures of both the candidate (or appointing authority) and the political treasurer in item 10. Both signatures must be notarized in item 9. Additionally, supplemental pages may be necessary.

Candidates for state public office (as defined in T.C.A. §2-10-102) must file the original of this statement with the Office of the Secretary of State, Division of Elections, 500 James K. Polk Building, Nashville, TN 37219-5040. **Candidates for the General Assembly** or committees supporting such candidates must also file a copy with the County Election Commission of the candidate's residence.

Candidates for local public office (as defined in T.C.A. §2-10-102) and committees formed to support or approve local measures file **ONLY** with the County Election Commission. (Some candidates are exempt from filing as outlined in T.C.A. §2-10-101.)

Each multi-candidate political campaign committee must file reports quarterly, within ten (10) days following the first day of January, April, July and October respectively. Each report must include transactions occurring since the preceding report, and must be filed with The Office of the Secretary of State, Division of Elections, 500 James K. Polk Building, Nashville, TN 37219-5040.

* The total number of pages, in the completed report (including all forms/copies/sheets, etc. used) must be shown in the lower right corner of each page. Please type or print all information in black ink.

1. DATE OF REPORT	2. NAME OF CANDIDATE OR COMMITTEE
Feb. 1, 1990	Ward Crutchfield

2. A. SHORT NAME OF COMMITTEE (if applicable): N/A

3. ADDRESS AND PHONE — Street or Rural Route: 503 Battery Place; City: Chattanooga; State: TN; Zip Code: 37403; Phone: (615) 756-1700

4. A. BEGINNING DATE OF REPORTING PERIOD	4. B. ENDING DATE OF REPORTING PERIOD
Feb. 13, 1989	Jan. 31, 1990

ITEMS 5-7 DO NOT APPLY TO MULTI-CANDIDATE POLITICAL CAMPAIGN COMMITTEES

5. OFFICE SOUGHT	6. ELECTION DATE
State Senate - District 10	Nov. 1992

7. CATEGORY OF REPORT (Check One)

PRE PRIMARY [X] POST PRIMARY [ ] PRE GENERAL [ ] POST GENERAL [ ] SUPPLEMENTAL [ ]

8. I/we do solemnly swear that neither the contributions received nor the expenditures made during the period shown in 4. A. and 4. B. exceeded $1,000, and that I/we have not violated the provisions of §§2-10-101, et seq., Tennessee Code Annotated, in letter or in spirit.

signature of candidate or appointing authority — date — signature of political treasurer — date

9.

Notary Seal

SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF Hamilton AND THE STATE OF Tennessee THIS 1st DAY OF February 19 90

Rita B Harper — notary public

May 27, 1991 — date commission expires

Notary Seal

SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF Hamilton AND THE STATE OF Tennessee THIS 1st DAY OF February 19 90

Rita B Harper — notary public

May 27, 1991 — date commission expires

10. I/we do solemnly swear that the contributions and/or expenditures shown on the following page(s) account for all money or things of value required by §§2-10-101, et seq., Tennessee Code Annotated, to be reported by political candidates/committees, and that I/we have not violated its provisions in letter or in spirit.

Ward Crutchfield — signature of candidate or appointing authority — 2/1/90 date

Ward Crutchfield — signature of political treasurer — 2/1/90 date

* TOTAL NUMBER OF PAGES IN COMPLETED REPORT: Page 1 of 4 Pages (include all forms used)

Campaign Financial Disclosure Statement, Continued

For Contributions and Expenditures of State and Local Political Campaigns in Tennessee

11. NAME OF CANDIDATE OR COMMITTEE *(must match name shown in item 2. of this form)*

Ward Crutchfield

12. A. BEGINNING DATE OF REPORTING PERIOD *(must match date shown in item 4.A. of this form)*	**12. B.** ENDING DATE OF REPORTING PERIOD *(must match date shown in item 4.B. of this form)*
Feb. 13, 1989	Jan. 31, 1990

CONTRIBUTIONS

13. "TOTAL OF CONTRIBUTIONS TO DATE" FROM PREVIOUS PERIOD *(if this is your first report, enter zero)* ..... $ -0-

14. TOTAL OF CONTRIBUTIONS, $100 OR LESS EACH, RECEIVED THIS PERIOD 210.00

15. TOTAL OF CONTRIBUTIONS, OVER $100 EACH, RECEIVED THIS PERIOD 42,610.55
(must be itemized in detail on form SS-1119-C, "Itemized Statement of Contributions")

16. TOTAL OF CONTRIBUTIONS RECEIVED THIS PERIOD *(sum of items 14. and 15.)* 42,820.55

17. TOTAL OF CONTRIBUTIONS TO DATE *(sum of items 13. and 16.)* ..... $ 42,820.55
(this total must be shown as item 13. on your next report)

EXPENDITURES

18. "TOTAL OF EXPENDITURES TO DATE" FROM PREVIOUS PERIOD *(if this is your first report, enter zero)* $ -0-

19. EXPENDITURES, $100 OR LESS EACH, MADE THIS PERIOD
(must be itemized by category only — e.g., printing, postage, gasoline, etc.)

Computer Consultant	58.33
Advertisement	75.00
Memberships	60.00
Flowers	75.30
Donations	674.00
Meals, entertainment, mileage	964.15
Bank charges	18.76

TOTAL OF EXPENDITURES, $100 OR LESS EACH, MADE THIS PERIOD 1,925.54

20. TOTAL OF EXPENDITURES, OVER $100 EACH, MADE THIS PERIOD 3,216.70
(must be itemized in detail on form SS-1119-E, "Itemized Statement of Expenditures")

21. TOTAL OF EXPENDITURES MADE THIS PERIOD *(sum of items 19. and 20.)* ..... $ 5,142.24

22. TOTAL OF EXPENDITURES TO DATE *(sum of items 18. and 21.)* $ 5,142.24
(this total must be shown as item 18. on your next report)

23. BALANCE ON HAND *(difference between items 17. and 22.)* ..... $ 37,578.31

* TOTAL NUMBER OF PAGES IN COMPLETED REPORT
Page 2 of 4 Pages *(include all forms used)*

ITEMIZED STATEMENT OF CONTRIBUTIONS

A List of Contributions, Over $100 Each, Required by Item 15. of Form SS-1109

INSTRUCTIONS: Item 4. of this form must show the full name, complete address, telephone and total contributions of each person who contributed money or things of value totaling more than one hundred dollars ($100) during the period shown in Item 2. of this form. The candidate's personal funds (including loans) must be included. Before entering any information in Item 4., please determine how many spaces you will need. If more than thirteen (13) spaces are required, additional space may be created by making copies of this blank form. If more than one (1) copy of this form is used, the amount from item 5. of each page must be shown in item 3. of each succeeding page, and the amount from item 5. of the last page must be shown in Item 15. of form SS-1109. All copies of this form must be attached to, and submitted with, form SS-1109.
* The total number of pages in the completed report (including all forms/copies/sheets,etc., used) must be shown in the lower right corner of each page. Please type or print all information in black ink.

1. NAME OF CANDIDATE OR COMMITTEE *(must match name shown in items 2. and 11. of form SS-1109)*

Ward Crutchfield

2. A. BEGINNING DATE OF REPORTING PERIOD *(must match date shown in items 4.A. and 12.A. of form SS-1109)*: Feb. 13, 1989

2. B. ENDING DATE OF REPORTING PERIOD *(must match date shown in items 4.B. and 12.B. of form SS-1109)*: Jan. 31, 1990

3. "TOTAL OF CONTRIBUTIONS, OVER $100 EACH" FROM PRECEEDING PAGE *(enter zero if this is the first or only page of this form)* $ -0-

4. FULL NAME, COMPLETE ADDRESS, PHONE AND TOTAL CONTRIBUTIONS OF EACH PERSON WHO CONTRIBUTED OVER $100

Name of person or organization	Street or Rural Route	City	State	Zip Code	Phone	Amount
Tennesseans for Good Government	419 Glenway	Signal Mountain	TN	37377	( )	104.16
William Hudson, Jr.	26 Hidden Ridge Rd.	Englewood	NJ	07631	( )	500.00
1st Tennessee Bank (Interest)	701 Market Street	Chattanooga	TN	37402	( )	355.20
Volunteer Bank (Interest)	817 Broad Street	Chattanooga	TN	37402	( )	682.69
Ward Crutchfield 1988 Campaign	503 Battery Place	Chattanooga	TN	37403	( )	40,965.50

5. TOTAL OF CONTRIBUTIONS, OVER $100 EACH *(sum of items 3. and 4.)* $ 42,610.55
(carry forward to item 3. of next page if additional copies of this form are used)
(if this is the last page of such contributions, this amount must be shown in item 15. of form SS-1109)

* TOTAL NUMBER OF PAGES IN COMPLETED REPORT
Page 3 of 4 Pages *(include all forms used)*

SS-1119-C

ITEMIZED STATEMENT OF EXPENDITURES

A List of Expenditures, Over $100 Each, Required by Item 20. of Form SS-1109

INSTRUCTIONS: Item 4. of this form must show the full name and complete address of each person to whom a total amount of more than one hundred dollars ($100) was paid during the period shown in Item 2. of this form, the total amount paid to each person and the purpose thereof. Before entering any information in Item 4., please determine how many spaces you will need. If more than thirteen (13) spaces are required, additional space may be created by making copies of this blank form. If more than one (1) copy of this form is used, the amount from Item 5. of each page must be shown in Item 3. of each succeeding page, and the amount from Item 5. of the last page must be shown in Item 20. of form SS-1109. All copies of this form must be attached to, and submitted with, form SS-1109.

* The total number of pages in the completed report (including all forms/copies/sheets,etc., used) must be shown in the lower right corner of each page. Please type or print all information in black ink.

1. NAME OF CANDIDATE OR COMMITTEE *(must match name shown in Items 2. and 11. of form SS-1109)*

Ward Crutchfield

2. A. BEGINNING DATE OF REPORTING PERIOD *(must match date shown in Items 4.A. and 12.A. of form SS-1109)*: Feb. 13, 1989

2. B. ENDING DATE OF REPORTING PERIOD *(must match date shown in Items 4.B. and 12.B. of form SS-1109)*: Jan. 31, 1990

3. TOTAL OF EXPENDITURES, OVER $100 EACH" FROM PRECEDING PAGE *(enter zero if this is the first or only page of this form)* $ -0-

4. FULL NAME AND COMPLETE ADDRESS OF EACH PERSON TO WHOM OVER $100 WAS PAID, THE TOTAL AMOUNT PAID AND THE PURPOSE THEREOF

Name of person or organization	Street or Rural Route	City	State	Zip Code	Purpose	Amount
Harris / 3M	P. O. Box 105533	Atlanta	GA	30348	Copier cost	387.03
Pelican Pipe Shop	804 Broad Street	Chattanooga	TN	37402	Gifts	110.00
Ward Crutchfield	503 Battery Place	Chattanooga	TN	37403	Reimburse for expenses	934.60
Soddy-Daisy High School	600 Sequoyah Access Road	Soddy-Daisy	TN	37379	Wrestling Team	200.00
Tenn. Black Leadership Roundtable	209 War Memorial Bldg.	Nashville	Tn	37219	Conference	125.00
Missy Crutchfield	615 Lindsay Street	Chattanooga	TN	37402	Work	300.00
Ronald McDonald House	702 East Fifth Street	Chattanooga	TN	37403	Donation	175.00
Ruth Harmon	409 Cameron Circle	Chattanooga	TN	37403	Reimburse for expenses	540.21
Jane Bauer	10 Legislative Plaza	Nashville	TN	37219	Reimburse for expenses	225.00
Rothberger Directory Service	P. O. Box 4003	Chattanooga	TN	37405	City Directory	219.86

5. TOTAL OF EXPENDITURES, OVER $100 EACH *(sum of Items 3. and 4.)* $3,216.70
(carry forward to Item 3. of next page if additional copies of this form are used)
(if this is the last page of such expenditures, this amount must be shown in Item 20. of form SS-1109)

* TOTAL NUMBER OF PAGES IN COMPLETED REPORT *(Include all forms used)*
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SS-1119-E
Revised 11-85