



REGISTRY OF ELECTION FINANCE
404 JAMES ROBERTSON PARKWAY, SUITE 1614
NASHVILLE, TN 37243-1360
(615) 741-7959

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT January 30, 1995	2.A. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD
2.B. IF COMMITTEE, NAME OF CANDIDATE N/A	3. ELECTION DATE 1996
4.A. CAMPAIGN ADDRESS <small>Street or Rural Route</small> 707 Georgia Avenue, <small>City</small> Chattanooga, <small>State</small> TN <small>Zip Code</small> 37403 <small>Phone</small> (615) 756-6700	
4.B. CANDIDATE'S HOME ADDRESS (if different than 4.A.) <small>Street or Rural Route</small> 503 Battery Place <small>City</small> Chattanooga, <small>State</small> TN <small>Zip Code</small> 37403 <small>Phone</small> (615) 266-1418	
5. OFFICE SOUGHT (include district no., if applicable) State Senate - District 10	6. NAME OF POLITICAL TREASURER (may be candidate) Ward Crutchfield
7. CATEGORY OF REPORT PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> POST-GENERAL <input type="checkbox"/> SUPPLEMENTAL <input checked="" type="checkbox"/> AMENDED <input type="checkbox"/>	
8.A. BEGINNING DATE OF REPORTING PERIOD January 30, 1994	8.B. ENDING DATE OF REPORTING PERIOD January 29, 1995
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 political candidates/campaign 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. <div style="display: flex; justify-content: space-around; align-items: flex-end;"> <div style="text-align: center;"> signature of candidate </div> <div style="text-align: center;"> 1/30/95 date </div> <div style="text-align: center;"> signature of political treasurer </div> <div style="text-align: center;"> 1/30/95 date </div> </div>	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>30th</u> DAY OF <u>January</u> , 19 <u>95</u> <small>notary public</small> <u>July 20, 1997</u> <small>date commission expires</small> <small>Notary Seal</small>	SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>30th</u> DAY OF <u>January</u> , 19 <u>95</u> <small>notary public</small> <u>July 20, 1997</u> <small>date commission expires</small> <small>Notary Seal</small>
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT.....	\$ <u>72,715.13</u>
b. TOTAL RECEIPTS THIS PERIOD.....	\$ <u>7,583.56</u>
c. TOTAL DISBURSEMENTS THIS PERIOD.....	\$ <u>28,426.89</u>
d. BALANCE ON HAND (12a. plus 12b. minus 12c.).....	\$ <u>51,871.80</u>
e. TOTAL LOANS OUTSTANDING.....	\$ <u>-0-</u>
f. TOTAL OBLIGATIONS OUTSTANDING.....	\$ <u>-0-</u>



SUMMARY PAGE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) WARD CRUTCHFIELD	14. REPORT COVERING THE PERIOD FROM: 1/30/94 TO: 1/29/95
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period).....	\$ 895.00
b. Itemized Contributions (over \$100 from each source this period).....	\$ 5425.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15a. and 15b.).....	\$ 6320.00
16. LOANS RECEIVED THIS REPORTING PERIOD.....	\$ -0-
17. INTEREST RECEIVED THIS REPORTING PERIOD.....	\$ 1263.56
18. TOTAL RECEIPTS (add 15c., 16., and 17.) (must be shown in item 12b.).....	\$ 7583.56
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)	
Publications	\$ 169.64
Donations	\$ 2404.90
Meals	\$ 257.52
Dues/Memberships	\$ 286.00
1-800 phone service	\$ 91.38
Gifts	\$ 508.45
Campaign work	\$ 1140.80
Advertisement	\$ 50.00
Total of Expenditures (\$100 or less each payee).....	\$ 4908.69
b. Itemized Campaign Expenditures (Over \$100 each payee this period).....	\$ 12459.45
c. Itemized Other Expenditures (Over \$100 each payee this period).....	\$ 11058.75
d. TOTAL EXPENDITURES (other than loan repayments)(add 19a., 19b., and 19c.).....	\$ 28426.89
20. LOAN REPAYMENTS MADE THIS PERIOD.....	\$ -0-
21. TOTAL DISBURSEMENTS (add 19d. and 20.) (must be shown in item 12c.).....	\$ 28426.89
22. IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period).....	\$ -0-
b. Itemized in-kind contributions (over \$100 from each source this period).....	\$ -0-
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22a. and 22b.).....	\$ -0-
23. LOANS	
LOANS OUTSTANDING (must be shown in item 12e.).....	\$ -0-
24. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each).....	\$ -0-
b. Itemized Obligations Outstanding (Over \$100 each).....	\$ -0-
c. TOTAL OBLIGATIONS OUTSTANDING (add 24a. and 24b.) (must be shown in item 12f.).....	\$ -0-



ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD	2. REPORT COVERING THE PERIOD	
	1-30-94 FROM:	1-29-95 TO:
3. TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount - 0 -
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)		
Full Name, Address, City, State and Zip Code of Contributor THCA Political Action Committee P. O. Box 100129 Nashville, TN 37224	Amount 500.00	
Full Name, Address, City, State and Zip Code of Contributor Deere & Company Civic Action Fund John Deere Road Moline, IL 61265	Amount 150.00	
Full Name, Address, City, State and Zip Code of Contributor Stan Lanzo P. O. Box 15505 Chattanooga, TN 37415	Amount 125.00	
Full Name, Address, City, State and Zip Code of Contributor WMX PAC of Tennessee 3003 Butterfield Road Oak Brook, IL 60521	Amount 250.00	
Full Name, Address, City, State and Zip Code of Contributor TCPA-PAC 200 Powell Place, Suite 120, Box 596 Brentwood, TN 37024-0596	Amount 500.00	
Full Name, Address, City, State and Zip Code of Contributor Tennessee Radiologists PAC P. O. Box 120909 2301 21st Avenue South Nashville, TN 37212-0909	Amount 1,000.00	
Full Name, Address, City, State and Zip Code of Contributor TACAP TN Anesthesiology PAC 226 South Cleveland, Suite 105 Memphis, TN 38104	Amount 1,000.00	
Full Name, Address, City, State and Zip Code of Contributor American General PAC 2929 Allen Parkway Houston, Texas 77019	Amount 200.00	
Full Name, Address, City, State and Zip Code of Contributor DLCC Non Federal-Labor 430 S. Capitol Street, Suite 420 Washington, D.C. 20003	Amount 1,000.00	
5. TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) (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 page.)		4,725.00



ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD	2. REPORT COVERING THE PERIOD	
	1-30-94 FROM:	1-29-95 TO:
3. TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)	Amount 4,725.00	
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor during the period)		
Full Name, Address, City, State and Zip Code of Contributor Chang W. Son 8 Rock Crest Road Signal MT., TN 37377-2302	Amount 200.00	
Full Name, Address, City, State and Zip Code of Contributor Health Trust PAC P. O. Box 24350 Nashville, TN 37202-4350	Amount 500.00	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
Full Name, Address, City, State and Zip Code of Contributor	Amount	
5. TOTAL ITEMIZED CONTRIBUTIONS (Total of items 3. and 4.) (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 page.)	5,425.00	



ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD	
		1-30-94 FROM:	1-29-95 TO:
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			Amount - 0 -
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAMPAIGN EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Sandra Bowers 506 Kilmer Street Chattanooga, TN 37404	Campaign work	175.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Cindy Anderson 104 Fisher Street Springfield, TN	Campaign work	375.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Rita Fehring 424 Stone Ridge Drive Hixson, TN 37343	Campaign work	996.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Linda Johnson 7342 Sterling Road Hixson, TN 37343	Campaign work Reimburse expense	815.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Jane Bauer 8139 Moores Lane Brentwood, TN 37027	Campaign work	300.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Ella Bryant 1226 Poplar Street Chattanooga, TN 37403	Campaign work	790.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Missy Crutchfield P. O. Box 431 McDonald, TN 37353	Campaign work	750.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Tonda Bryant 1226 Poplar Street Chattanooga, TN 37403	Campaign work	155.00	
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Mary Ricketts 6229 Pine Marr Drive Hixson, TN 37343	Campaign work	507.25	
5. TOTAL ITEMIZED CAMPAIGN EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of campaign expenditures, this amount must be shown in item 19b. of summary page.)			4,863.25



ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDA

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD: FROM: 1-30-94 TO: 1-29-95	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter 50 if first page)			Amount 4,863.25
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAMPAIGN EXPENDITURE (expenditures totaling more than \$100 to any payee during the pe			
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount	
Internal Revenue Service Memphis, TN 37501	1120 POL	341.90	
Electric Mouse 605 Cherokee Blvd. Chattanooga, TN 37405	Computer repair	269.37	
Davids Restaurant 422 Vine Street Chattanooga, TN 37403	Meals	138.70	
Kelly Cadillac 900 Riverfront Parkway Chattanooga, TN 37402	Auto repair	2,019.51	
U. S. Postmaster 900 Georgia Avenue Chattanooga, TN 37401	Postage	850.00	
Ward Crutchfield 503 Battery Place Chattanooga, TN 37403	Travel-Meals	2,316.65	
Little Athens Restaurant 5611 Ringgold Road East Ridge, TN 37412	Meals	408.70	
Royal Typewriter P. O. Box 21404 Chattanooga, TN 37421	Fax	1,131.37	
Pam Davenport 5323 Dorsey Street Chattanooga, TN 37410	Campaign Work	120.00	
5. TOTAL ITEMIZED CAMPAIGN EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of campaign expenditures, this amount must be shown in item 19b. of summary page.)			12,459.45



ITEMIZED STATEMENT OF OTHER EXPENDITURES—CANDIDATE

(EXPENDITURES OTHER THAN CAMPAIGN EXPENDITURES)

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD FROM: 1-30-94 TO: 1-29-95	
		Amount - 0 -	
3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
Full Name, Address, City, State and Zip Code of Payee McKnight for Senate 134 Pine Tree Drive Jackson, TN 38301	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Rochelle for Senate 148 Public Square Lebanon, TN 37087	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Comm. to elect Pete Springer 4551 Elkins Drive Centerville, TN	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Henry for State Senate 226 Capitol Blvd. Building Nashville, Tennessee 37219	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Button for Congress P. O. Box 1093 Kingston, TN 37763	Purpose of Expenditure Contribution	Amount 500.00	
Full Name, Address, City, State and Zip Code of Payee Jolly for Congress 3006-C Wilson Drive Ooltewah, TN 37363	Purpose of Expenditure Contribution	Amount 1,000.00	
Full Name, Address, City, State and Zip Code of Payee Larry Guy Campaign Rout 1, Box 580 Benton, TN 37307	Purpose of Expenditure Contribution	Amount 200.00	
Full Name, Address, City, State and Zip Code of Payee Gary C. Ledbetter Campaign 1016 Oakdale Drive Columbia, TN 38401	Purpose of Expenditure Contribution	Amount 200.00	
Full Name, Address, City, State and Zip Code of Payee William (Bear) Stevenson Route 7, Box 7 Clinton, TN 37716	Purpose of Expenditure Contribution	Amount 250.00	
5. TOTAL ITEMIZED OTHER EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of other expenditures, this amount must be shown in item 19c. of summary page.)			Amount 3,750.00



ITEMIZED STATEMENT OF OTHER EXPENDITURES—CANDIDATE
(EXPENDITURES OTHER THAN CAMPAIGN EXPENDITURES)

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD FROM: 1-30-94 TO: 1-29-95	
3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			Amount 3,750.00
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
Full Name, Address, City, State and Zip Code of Payee Friends of Tommie Brown 603 N. Highland Park Avenue Chattanooga, TN 37404	Purpose of Expenditure Contribution	Amount 250.00	
Full Name, Address, City, State and Zip Code of Payee Friends of Brenda Turner 1101 Dodds Avenue Chattanooga, TN 37404	Purpose of Expenditure Contribution	Amount 350.00	
Full Name, Address, City, State and Zip Code of Payee Rosco Dixon 3529 Huckleberry Memphis, TN 38116	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Friends of Tommy Burks Route 2 Monterey, TN 38574	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Rusty Crowe Campaign 808 East 8th Avenue Johnson City, TN 37601	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee John Ford Senate Campaign Post Office Box 9433 Memphis, TN 38109	Purpose of Expenditure Contribution	Amount 400.00	
Full Name, Address, City, State and Zip Code of Payee Friends of Thelma Harper 714 Ringgold Drive Nashville, TN 37207	Purpose of Expenditure Contribution	Amount 250.00	
Full Name, Address, City, State and Zip Code of Payee Jane Dawkins Senate Campaign 508 Holly Avenue South Pittsburg, TN 37380	Purpose of Expenditure Contribution	Amount 550.00	
Full Name, Address, City, State and Zip Code of Payee Judy Medearis 300 Cross Creek Drive Chattanooga, TN 37415	Purpose of Expenditure Contribution	Amount 150.00	
5. TOTAL ITEMIZED OTHER EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of other expenditures, this amount must be shown in item 19c. of summary page.)			6,900.00



ITEMIZED STATEMENT OF OTHER EXPENDITURES—CANDIDATE
(EXPENDITURES OTHER THAN CAMPAIGN EXPENDITURES)

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD FROM: 1/30/94 TO: 1/29/95	
3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			Amount 6,900.00
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
Full Name, Address, City, State and Zip Code of Payee Brainerd Lee Hwy Business Coalition 5716 Brainerd Road Chattanooga, TN 37411	Purpose of Expenditure Contribution	Amount 150.00	
Full Name, Address, City, State and Zip Code of Payee Committee to elect Walt Ward 5700 Roper Street Chattanooga, TN 37379	Purpose of Expenditure Contribution	Amount 350.00	
Full Name, Address, City, State and Zip Code of Payee Arnold Stulce Campaign 141 Lewis Street Soddy Daisy, TN 37379	Purpose of Expenditure Contribution	Amount 200.00	
Full Name, Address, City, State and Zip Code of Payee TN State Democratic Caucus Suite 2, Legislative Plaza Nashville, TN 37219	Purpose of Expenditure Contribution	Amount 500.00	
Full Name, Address, City, State and Zip Code of Payee Hills Flowers 636 Market Street Chattanooga, TN 37402	Purpose of Expenditure Flowers	Amount 771.00	
Full Name, Address, City, State and Zip Code of Payee Robert Johnson Campaign 3138 Seminole Crest Lane East Ridge, TN 37412	Purpose of Expenditure Contribution	Amount 200.00	
Full Name, Address, City, State and Zip Code of Payee Better Business Bureau 1010 Market Street Chattanooga, TN 37402	Purpose of Expenditure Membership	Amount 285.00	
Full Name, Address, City, State and Zip Code of Payee The Ivy Basket 2021 Gallatin Road Madison, TN 37115	Purpose of Expenditure Flowers	Amount 110.00	
Full Name, Address, City, State and Zip Code of Payee University of Tennessee 615 McCallie Avenue Chattanooga, TN 37402	Purpose of Expenditure Tickets	Amount 140.00	
5. TOTAL ITEMIZED OTHER EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of other expenditures, this amount must be shown in item 19c. of summary page.)			9,606.00



ITEMIZED STATEMENT OF OTHER EXPENDITURES—CANDIDATE
(EXPENDITURES OTHER THAN CAMPAIGN EXPENDITURES)

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD FROM: 1-30-94 TO: 1-29-95
3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)		Amount 9,606.00
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)		
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
M. L. Smith Publishers 164 4th Avenue North Nashville, TN 37219	Publication	374.00
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Dixie Souvenirs Post Office Box 340 Soddy Daisy, TN 37379	Gifts	778.75
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Morehouse College 830 Westview Drive, S.W. Atlanta, GA 30314	Contribution	300.00
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
Full Name, Address, City, State and Zip Code of Payee	Purpose of Expenditure	Amount
		-
5. TOTAL ITEMIZED OTHER EXPENDITURES (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of other expenditures, this amount must be shown in item 19c. of summary page.)		11,058.75



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE WARD CRUTCHFIELD		2. REPORT COVERING THE PERIOD FROM: 1/30/94 TO: 1/29/95
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount - 0 -
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)		
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
Full Name, Address, City, State and Zip Code of Contributor	Description of In-Kind Contribution	Amount
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Total of items 3. and 4.) (Carry forward to item 3. of next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in item 22.b. of summary page.)		- 0 -



ITEMIZED STATEMENT OF OBLIGATIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING PERIOD		
WARD CRUTCHFIELD		FROM: 1/30-94	TO: 1-29-95	
COMPLETE ITEMS 3—7 FOR EACH ITEMIZED OBLIGATION				
3. Full Name, Address, City, State and Zip Code of Creditor	4. Outstanding Balance at Beginning of Period	5. Amount of Debt Incurred This Period	6. Payment This Period	7. Outstanding Balance at End of Period
				- 0 -
Description of Obligation				
Description of Obligation				
Description of Obligation				
Description of Obligation				
Description of Obligation				
Description of Obligation				
Description of Obligation				
Description of Obligation				
TOTALS (Items 4—7) (Total of Item 7 must be shown in Item 24b. of summary page.)				- 0 -



ITEMIZED STATEMENT OF LOANS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		2. REPORT COVERING PERIOD		
WARD CRUTCHFIELD		FROM: 1/30-94	TO: 1/29-95	
COMPLETE ITEMS 3—7 FOR EACH ITEMIZED LOAN				
3. Full Name, Address, City, State and Zip Code of Creditor	4. Outstanding Balance at Beginning of Period	5. Amount of Debt Incurred This Period	6. Payment This Period	7. Outstan Balance at Of Perio
TOTALS (Items 4—7) (Total of Item 7 must be shown in Item 23. of summary page.)				-0-