

sheet of **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**
For State and Local Candidate
For Single-Candidate Committees

1. DATE OF REPORT **1/31/2002** 2a. NAME OF CANDIDATE OR COMMITTEE
COMMITTEE TO ELECT TOMMIE F. BROWN

2b. IF COMMITTEE, NAME OF CANDIDATE **TOMMIE F. BROWN** 3. ELECTION DATE
11/07/2000

4a. CAMPAIGN ADDRESS Phone
Street or Rural Route City State Zip Code area code & number
POST OFFICE BOX 3258 CHATTANOOGA TN 37404 423 622-7474

4b. CANDIDATE'S HOME ADDRESS (if different than 4a.) Phone
Street or Rural Route City State Zip Code area code & number
603 NORTH HIGHLAND PARK AVE CHATTANOOGA TN 37404 423 622-7474

5. OFFICE SOUGHT (include district number, if applicable) 6. NAME OF POLITICAL TREASURER (may be candidate)
HOUSE OF REPRESENTATIVE DISTRICT 28 TOMMIE F. BROWN

7. CATEGORY OR REPORT (check one)
PRE-PRIMARY POST-PRIMARY POST-General SUPPLEMENTAL AMENDED

8a. BEGINNING DATE OF REPORTING PERIOD **1-Jan-01** 8b. ENDING DATE OF REPORTING PERIOD
31-Dec-01

9. (Check one)
a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1000 or less AND expenditures total \$1000 or less for this reporting period. (Complete items 12d and 12f)
b. This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received totals more than \$1000 and/or expenditures total more than \$1000 this 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 purposes as defined by the federal internal revenue code.

signature of candidate below date **31-Jan-02** signature of political treasurer below date **31-Jan-02**
Tommy F. Brown *Tommy F. Brown*

11. SWORN TO SUBSCRIBED BEFORE ME IN THE STATE OF **Tennessee** THIS 31 OF JANUARY 20 02

notary public *Don E Young* notary public *Don E Young*
date commission expires March 23, 2002 date commission expires March 23, 2002
Notary Seal Notary Seal

12. SUMMARY

a. BALANCE ON HAND LAST REPORT.....	\$ 137.59
b. TOTAL RECEIPTS THIS PERIOD.....	\$ 361.37
c. TOTAL DISBURSEMENTS THIS PERIOD....	\$ 375.28
d. BALANCE ON HAND (12a. plus 12b. Minus 12c.).	\$43.68
e. TOTAL LOANS OUTSTANDING.....	
f. TOTAL OBLIGATIONS OUTSTANDING.....	\$ -

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (in Full)
COMMITTEE TO ELECT TOMMIE F. BROWN

14. REPORT COVERING THE PERIOD
 FROM: **1/1/01** **12/31/01**

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)		
a. Unitemized Contributions (\$100 or less from each source this period).....	\$	-
b. Itemized Contributions (over \$100 from each source this period).....	\$	361.37
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15a. And 15b.).....	\$	361.37
16. LOANS RECEIVED THIS REPORTING PERIOD.....		
17. INTEREST RECEIVED THIS REPORTING PERIOD.....		
	\$	-
18 TOTAL RECEIPTS (add 15c., 16. , and 17) (must be shown in item 12b.).....	\$	361.37

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)		
utilities	\$	31.28
constituent Service fund	\$	80.00
Total of Expenditures (\$100 or less each payee).....	\$	111.28
b. Itemized Campaign Expenditures (over \$100 each payee this period).....	\$	344.00
c. Itemized Other Expenditures (over \$100 each payee this period).....	\$	-
d. TOTAL EXPENDITURES (other than loan repayments) (add 19.a. , and 19.c.).....	\$	455.28
20. LOAN REPAYMENTS MADE THIS PERIOD.....	\$	5,225.00
21. TOTAL DISBURSEMENTS (add 19.d. , and 20.) (must be shown in item 12.c.).....	\$	375.28

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period)....	\$	-
b. Itemized in-kind contributions (over \$100 from each source this period).....	\$	917.32
c. TOTAL IN-KIND CONTRIBUTION RECEIVED THIS PERIOD (add 22.a. and 22.b.)	\$	917.32

23. LOANS

LOANS OUTSTANDING (must be shown in item 12.e.) \$ -

24. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less).....	\$	-
b. Itemized Obligations Outstanding (Over \$100 each)		
c. TOTAL OBLIGATIONS OUTSTANDING (add 24.a AND 24.b.) (must be shown in item 12.f.).....	\$	-

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Name of Candidate or Committee COMMITTEE TO ELECT TOMMIE F. BROWN	2. Report Covering The Period: From: 1/31/2001 12/31/2002
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3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 first itemized page)	11	\$ -
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4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 any contributor)

First Name	Middle Name		Contribution Received For:	Amt Of contribution
			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/ Organization Name R & J and Associates			<input type="checkbox"/> Other Election (specify)	\$ 100.00
Address 569 Moline Rd			Aggregate this Election	
City Memphis	State TN	Zip Code 38109	Date Of Contribution(s)	\$ -

First Name	Middle Name		Contribution Received For:	Amt Of contribution
			<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/ Organization Name SOUTH CENTRAL BELL			<input type="checkbox"/> Other Election (specify)	\$ 261.37
Address REFUND			Aggregate this Election	
City CHATTANOOGA	State TN	Zip Code 37401	Date Of Contribution(s)	

First Name	Middle Name		Contribution Received For:	Amt Of contribution
			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/ Organization Name			<input type="checkbox"/> Other Election (specify)	
Address			Aggregate this Election	
City	State	Zip Code	Date Of Contribution(s)	

First Name	Middle Name		Contribution Received For:	Amt Of contribution
			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/ Organization Name			<input type="checkbox"/> Other Election (specify)	
Address			Aggregate this Election	
City	State	Zip Code	Date Of Contribution(s)	

First Name	Middle Name		Contribution Received For:	Amt Of contribution
			<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/ Organization Name			<input type="checkbox"/> Other Election (specify)	
Address			Aggregate this Election	
City	State	Zip Code	Date Of Contribution(s)	

5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3 of next page if additional pages of this form are used)	11	\$ 361.37
(If this is the last page of contributions, this amount be shown in item 15b of summary)		

sheet# of ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Name of Candidate or Committee: **COMMITTEE TO ELECT TOMMIE BROWN**
 2. Report Covering The Period: From: **1/1/2001** To: **12/31/2001**

3. TOTAL IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 first itemized page) 11 \$ **-**
 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION (contributions totaling more than \$100 any contributor)

First Name TOMMIE		Middle Name F.		Contribution Received For:			Val In-kind contribution	
Last Name/ Organization Name BROWN				<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	Enter Prior Contribution(s)	\$ 616.20	
Address 603 N. HIGHLAND PARK AVE.				<input checked="" type="checkbox"/> Other Election (specify) 10 MOS		Below:		
City CHATTANOOGA	State TN	Zip Code	Description of In-Kind Contribution Phone Bill for Constituent Svs C	Aggregate this Election \$ 616.20				

First Name TOMMIE		Middle Name F.		Contribution Received For:			Val In-kind Contribution	
Last Name/ Organization Name BROWN				<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	Enter Prior Contribution(s)	\$ 151.12	
Address 603 N. HIGHLAND PARK AVE.				<input checked="" type="checkbox"/> Other Election (specify) 12 mos		Below:		
City CHATTANOOGA	State TN	Zip Code	Description of In-Kind Contribution Electric bill for Constituent Svs Ct	Aggregate this Election \$ 151.12				

First Name TOMMIE		Middle Name F.		Contribution Received For:			Val In-Kind Contribution	
Last Name/ Organization Name BROWN				<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	Enter Prior Contribution(s)	\$ 150.00	
Address 603 N. HIGHLAND PARK AVE.				<input checked="" type="checkbox"/> Other Election (specify) 12 MOs		Below:		
City CHATTANOOGA	State TN	Zip Code	Description of In-Kind Contribution Water bill	Aggregate this Election \$ 150.00				

First Name		Middle Name		Contribution Received For:			Val In-kind Contribution	
Last Name/ Organization Name				<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	Enter Prior Contribution(s)	\$ -	
Address				<input type="checkbox"/> Other Election (specify)		Below:		
City	State	Zip Code	Description of In-Kind Contribution	Aggregate this Election				

First Name		Middle Name		Contribution Received For:			Val In-kind Contribution	
Last Name/ Organization Name				<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	Enter Prior Contribution(s)	\$ -	
Address				<input type="checkbox"/> Other Election (specify)		Below:		
City	State	Zip Code	Description of In-Kind Contribution	Aggregate this Election				

5. TOTAL IN-KIND CONTRIBUTION
 (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 be shown in item 15b of summary) 11 \$ **917.32**

sheet# of **ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES - CANDIDATE**

1. Name of Candidate or Committee TOMMIE F. BROWN	2. Report Covering The Period: From: 1/31/2001 12/31/2002
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3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 first itemized page)	11	\$ -
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 any contributor)		

First Name INEZ	Middle Name		Purpose of Expenditure WORKED PHONE BANK FOR 11/00 GENERAL ELECTION	Amount of Expenditure
Last Name/ Organization Name LOWERY				\$ 200.00
Address 4217 CAIN AVENUE				
City CHATTANOOGA	State TN	Zip Code 37410		

First Name	Middle Name		Purpose of Expenditure BANK SERVICE CHARGE 12.50 PER MONTH	Amount of Expenditure
Last Name/ Organization Name FIRST TENNESSEE BANK				\$ 144.00
Address MARKET STREET 37401				
City CHATTANOOGA	State TN	Zip Code 37401		

First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/ Organization Name				
Address				
City	State	Zip Code		

First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/ Organization Name				
Address				
City	State	Zip Code		

First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/ Organization 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 contributions, this amount be shown in item 15b of summary)	11	\$ 344.00

\$ 344.00

sheet# ___ of ___ ITEMIZED STATEMENT OF OTHER EXPENDITURES - CANDIDATE

1. Name of Candidate or Committee: **Committee to Elect Tommie F Brown**
 2. Report Covering The Period: From: **1/1/2001** To: **12/31/2001**

3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 first itemized page) 1 \$ -

4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OTHER EXPENDITURE

First Name	Middle Name	Last Name/ Organization Name	Address	City	State	Zip Code	Purpose of Expenditure	Amount of Expenditure

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 be shown in item 15b OF summary) 1 \$ -

sheet# of

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. Name of Candidate or Committee: **Committee to Elect Tommie F. Brown**

2. Report Covering The Period: From: **1/01/2001** TO: **12/31/2001**

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 Tommie F. Brown	Middle Name F.	Outstanding Loan Bal. (Beginning Period)	Loans Received	Loan Payments	Outstanding Loan Bal. (End of Period)
Last Name/ Organization Name		\$ 5,225.00	0	\$ 5,225.00	\$ -
Address 603 N. Highland Park Avenue		Loans Received For:	(Indicate which election with an " X ")		
Chattanooga	TN	X	<< Primary Election		
Zip Code 37404			<< General Election		
			<< Other Election (specify)		
Date of Loan					

List All Endorsers or Guarantors for the Above Loan (If more space 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	

4 Totals for all LOANS (complete on last page of itemized loans)	Outstanding Loan Bal. (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Bal. (End of Period)
(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 23 on summary pg)	\$ 5,225.00	\$ -	\$ 5,225.00	\$ -

sheet# ___ of ___

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Name of Candidate or Committee Committee to Elect Tommie F Brown			2. Report Covering The Period:			
			From: 1/01/2001		TO	12/31/2002
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)			Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name				
Last Name/ Organization Name						
Address						\$ -
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/ Organization Name						
Address						\$ -
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/ Organization Name						
Address						\$ -
City	State	Zip Code				
Description of Obligation						
First Name		Middle Name				
Last Name/ Organization Name						
Address						\$ -
City	State	Zip Code				
Description of Obligation						
4. Totals (Total from Outstanding Balance - (End of Period) column must also be shown in item 24b on summary page.)						\$ -