

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>1-31-04</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>CARL E LEUI</u>
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>AUG. 7, 2002</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>651 E 4th St # 200 Chattanooga TN 37412 423-756-0052</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>3628 GLENDON DR CHATTANOOGA TN 37411 423-698-3997</u>	
5. OFFICE SOUGHT (include district number, if applicable) <u>HAMILTON COUNTY TRUSTEE</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>L. DAN JOHNSON</u>
7. CATEGORY OR REPORT (Check one) <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> POST-GENERAL <input checked="" type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> AMENDED	
8.a. BEGINNING DATE OF REPORTING PERIOD <u>SEPT. 16, 2002</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>DEC. 31, 2003</u>
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 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. <u>Carl E. Leui</u> <u>1/30/04</u> <u>L. Dan Johnson</u> <u>1/29/04</u> signature of candidate date signature of political treasurer date	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>TENNESSEE</u> THIS <u>30th</u> DAY OF <u>August</u> , 20 <u>04</u> <u>Jammy Maroon</u> notary public <u>August 9, 2004</u> date commission expires Notary Seal	SWORN TO AND SUBSCRIBED BEFORE ME IN THE STATE OF <u>TENNESSEE</u> THIS <u>29th</u> DAY OF <u>JAN.</u> , 20 <u>04</u> <u>Jeanette</u> notary public <u>JAN 22, 2006</u> date commission expires Notary Seal
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT	\$ <u>8,462</u>
b. TOTAL RECEIPTS THIS PERIOD	\$ <u>2,500</u>
c. TOTAL DISBURSEMENTS THIS PERIOD	\$ <u>< 893 ></u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	\$ <u>11,955</u>
e. TOTAL LOANS OUTSTANDING	\$ <u>2,500</u>
f. TOTAL OBLIGATIONS OUTSTANDING	\$ <u>0</u>



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)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total of Expenditures (\$100 or less each payee) \$ _____

b. Itemized Expenditures (Over \$100 each payee this period) \$ <893>

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ <893>

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ <893>

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) \$ _____

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 0

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ _____

b. Itemized Obligations Outstanding (Over \$100 each) \$ _____

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>CARL E LEVI</i>			2. REPORT COVERING THE PERIOD FROM: <i>9-16-02</i> TO: <i>1-31-04</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount
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 <i>THE MOUNTAIN 96.5 FM</i>		<i>RADIO AIR TIME REFUND</i>		<i>< 893 ></i>
Address <i>PO BOX 1449</i>				
City <i>CHATTANOOGA</i>	State <i>TN</i>			
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				
(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.)				

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			
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 Balance	Loans	Loan	Outstanding Loan Balance
(Total loans received should also be shown in item 16. on summary page.)			(Beginning of Period)	Received	Payments	(End of Period)
(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.)						

