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
4-23-90	Clarence E. Shattuck, Jr.

2. A. SHORT NAME OF COMMITTEE (if applicable)

3. ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone
4619 Forest Lane	Hixson,	TN	37343	(615) 875-2921

4. A. BEGINNING DATE OF REPORTING PERIOD	4. B. ENDING DATE OF REPORTING PERIOD
January 12, 1990	April 21, 1990

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

5. OFFICE SOUGHT	6. ELECTION DATE
General Sessions Court Judge - Division III	May 1, 1990

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.

Clarence E. Shattuck Jr. — signature of candidate or appointing authority — 4-23-90 date

Clarence E. Shattuck Jr. — signature of political treasurer — 4-23-90 date

9.

Notary Seal

SWORN TO AND SUBSCRIBED BEFORE ME IN THE

COUNTY OF Hamilton

AND THE STATE OF Tennessee

THIS 23 DAY OF April 19 90

Barbara Hilton — notary public

7-8-92 — date commission expires

Notary Seal

SWORN TO AND SUBSCRIBED BEFORE ME IN THE

COUNTY OF Hamilton

AND THE STATE OF Tennessee

THIS 23 DAY OF April 19 90

Barbara Hilton — notary public

7-8-92 — 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.

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

* TOTAL NUMBER OF PAGES IN COMPLETED REPORT

Page 1 of 1 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)*

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)*

CONTRIBUTIONS

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

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

15. TOTAL OF CONTRIBUTIONS, OVER $100 EACH, RECEIVED THIS PERIOD ..... _____
(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.)* ..... _____

17. TOTAL OF CONTRIBUTIONS TO DATE *(sum of items 13. and 16.)* ..... $ _____
(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)* ..... $ _____

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

_____ _____

_____ _____

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_____ _____

TOTAL OF EXPENDITURES, $100 OR LESS EACH, MADE THIS PERIOD ..... _____

20. TOTAL OF EXPENDITURES, OVER $100 EACH, MADE THIS PERIOD ..... _____
(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.)* ..... $ _____

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

23. BALANCE ON HAND *(difference between items 17. and 22.)* ..... $ _____

★ TOTAL NUMBER OF PAGES IN COMPLETED REPORT
Page _____ *of* _____ *Pages* *(Include all forms used)*