



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 <u>7-27-94</u>	2.A. NAME OF CANDIDATE OR COMMITTEE <u>COMMITTEE TO ELECT GWEN TIDWELL</u>
2.B. IF COMMITTEE, NAME OF CANDIDATE <u>GWEN TIDWELL</u>	3. ELECTION DATE <u>AUG 4 - 94</u>
4.A. CAMPAIGN ADDRESS <small>Street or Rural Route</small> <u>PO BOX 16037</u> <small>City</small> <u>CHATTANOOGA, TN</u> <small>State</small> <u>TN</u> <small>Zip Code</small> <u>37416</u> <small>Phone</small> <u>267-4213</u>	
4.B. CANDIDATE'S HOME ADDRESS (if different than 4.A.) <small>Street or Rural Route</small> <u>13 OAK PLACE</u> <small>City</small> <u>CHATTANOOGA, TN</u> <small>State</small> <u>TN</u> <small>Zip Code</small> <u>37415</u> <small>Phone</small> <u>267-4213</u>	
5. OFFICE SOUGHT (include district no., if applicable) <u>CRIMINAL COURT CLERK</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>CAROL UNDERWOOD</u>
7. CATEGORY OF REPORT PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input type="checkbox"/> PRE-GENERAL <input checked="" type="checkbox"/> POST-GENERAL <input type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> AMENDED <input type="checkbox"/>	
8.A. BEGINNING DATE OF REPORTING PERIOD <u>6-14-94</u>	8.B. ENDING DATE OF REPORTING PERIOD <u>7-25-94</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 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. <u>Gwen Tidwell</u> <u>7/27/94</u> <u>Carol Underwood</u> <u>7/27/94</u> <small>signature of candidate</small> <small>date</small> <small>signature of political treasurer</small> <small>date</small>	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>27th</u> DAY OF <u>July</u> 19 <u>94</u> <u>Susan Keith</u> <small>notary public</small> <u>July 12, 1998</u> <small>date commission expires</small> <p style="text-align: center;">Notary Seal</p>	SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>27th</u> DAY OF <u>July</u> 19 <u>94</u> <u>Susan Keith</u> <small>notary public</small> <u>July 12, 1998</u> <small>date commission expires</small> <p style="text-align: center;">Notary Seal</p>
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT.....	\$ <u>3625.31</u>
b. TOTAL RECEIPTS THIS PERIOD.....	\$ <u>3800.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD.....	\$ <u>5727.51</u>
d. BALANCE ON HAND (12a. plus 12b. minus 12c.).....	\$ <u>1697.80</u>
e. TOTAL LOANS OUTSTANDING.....	\$ <u>- 0 -</u>
f. TOTAL OBLIGATIONS OUTSTANDING.....	\$ <u>- 0 -</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Gwen Tidwell</i>		2. REPORT COVERING THE PERIOD FROM: <i>6-14-94</i> TO: <i>7-25-94</i>	
3. TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>- 0 -</i>
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION			
Full Name, Address, City, State and Zip Code of Payee <i>CHATTANOOGA AREA Labor Council 3922 VOLUNTEER DRIVE CHATTANOOGA, TN. 37416</i>			Amount <i>200⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>IBEW EDUCATIONAL COMMITTEE 1125 15th St. N.W. WASHINGTON, DC 20005</i>			Amount <i>250⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>TERRY McGhehey 720 McALLIE AVE. CHATTANOOGA, TN. 37403</i>			Amount <i>250⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>SUSAN CARD 1515 Edgewood Circle CHATTANOOGA, TN 37405</i>			Amount <i>500⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>William R. Heck 204 JAMES Blvd CHATTA, TN 37402</i>			Amount <i>250⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>Richard Pollard 2904 South Hickory St CHATTANOOGA TN 37407</i>			Amount <i>500⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee <i>JON KINSEY 7712 Night Hawk Rd CHATTANOOGA, TN 37421</i>			Amount <i>200⁰⁰</i>
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			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 in-kind contributions, this amount must be shown in item 15b. of summary page.)			<i>2150⁰⁰</i>



ITEMIZED STATEMENT OF CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Gwen Tidwell</i>		2. REPORT COVERING THE PERIOD FROM: <i>6-14-94</i> TO: <i>7-25-94</i>	
3. TOTAL ITEMIZED CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>2150.00</i>
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CONTRIBUTION			
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			Amount
Full Name, Address, City, State and Zip Code of Payee			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 in-kind contributions, this amount must be shown in item 15b. of summary page.)			<i>2150.00</i>



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Gwen Tidwell</i>		2. REPORT COVERING THE PERIOD FROM: <i>6/14/94</i> TO: <i>7/25/94</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <i>-0-</i>
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED IN-KIND CONTRIBUTION			
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	Description of In-Kind Contribution	Amount	
Full Name, Address, City, State and Zip Code of Payee	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.)			<i>-0-</i>



ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Gwen Tidwell</i>		2. REPORT COVERING THE PERIOD FROM: <i>6/14/94</i> TO: <i>7/25/94</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			Amount <i>- 0 -</i>
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAMPAIGN EXPENDITURE			
Full Name, Address, City, State and Zip Code of Payee <i>MARKET STREET PERFORMANCE HALL MARKET STREET CHATTANOOGA, TN 37402</i>	Purpose of Expenditure <i>Reception</i>	Amount <i>150.00</i>	
Full Name, Address, City, State and Zip Code of Payee <i>IRAN DZIK 723 McCallie Ave CHATTANOOGA, TN 37404</i>	Purpose of Expenditure <i>Reimbursement for Advertising Exp.</i>	Amount <i>1058.97</i>	
Full Name, Address, City, State and Zip Code of Payee <i>CRF BRainerd Road Suite G-30 CHATTANOOGA, TN 37411</i>	Purpose of Expenditure <i>Advertising</i>	Amount <i>1022.80</i>	
Full Name, Address, City, State and Zip Code of Payee <i>CHATTANOOGA AREA Reg. TRANS 1617 Wilcox Blvd. CHATTANOOGA, TN 37404</i>	Purpose of Expenditure <i>Advertising</i>	Amount <i>812.00</i>	
Full Name, Address, City, State and Zip Code of Payee <i>THE INK Spot PO Box 23682 CHATTANOOGA, TN 37422</i>	Purpose of Expenditure <i>Printing</i>	Amount <i>986.40</i>	
Full Name, Address, City, State and Zip Code of Payee <i>CRF BRainerd Road Suite G-30 CHATTANOOGA, TN 37411</i>	Purpose of Expenditure <i>Advertising</i>	Amount <i>1085.00</i>	
Full Name, Address, City, State and Zip Code of Payee <i>Spectra National 1401 Dodson Ave CHATTANOOGA, TN 37404</i>	Purpose of Expenditure <i>Advertising</i>	Amount <i>484.84</i>	
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 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.)			<i>5600.01</i>



ITEMIZED STATEMENT OF CAMPAIGN EXPENDITURES—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Owen Tidwell</i>		2. REPORT COVERING THE PERIOD	
		FROM: <i>6-14-94</i>	TO: <i>7-25-94</i>
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first page)			Amount <i>- 0 -</i>
4. COMPLETE THE FOLLOWING FOR EACH ITEMIZED CAMPAIGN EXPENDITURE			
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	
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 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.)			<i>- 0 -</i>

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.)		- 0 -



ITEMIZED STATEMENT OF LOANS—CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Committee to Elect Gwen Tidwell</i>		2. REPORT COVERING PERIOD		
		FROM: <i>6-14-94</i>	TO: <i>7-25-94</i>	
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. Outstanding Balance at End Of Period
TOTALS (Items 4—7) (Total of Item 7 must be shown in item 23. of summary page.)	<i>— 0 —</i>			