

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 15 2009</u>	2.a. NAME OF CANDIDATE OR COMMITTEE <u>Tim Burchett</u>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>5/4/10</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <u>6401 Airtree</u> <u>Knoxville</u> <u>TN.</u> <u>37931</u> <u>693-1902</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route      City      State      Zip Code      Phone			
5. OFFICE SOUGHT (include district number, if applicable) <u>County Mayor</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Tim Burchett</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input checked="" type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>January 1 2009</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>July 15 2009</u>	
9. (Check one)			
a. <input checked="" 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>Tim Burchett</u> signature of candidate		<u>Tim Burchett</u> signature of political treasurer	
<u>7/15/09</u> date		<u>7/15/09</u> date	
11. WITNESS SIGNATURE			
<u>Tim Burchett</u> signature of witness		<u>Tim Burchett</u> signature of witness	
<u>7/15/09</u> date		<u>7/15/09</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$	<u>3250</u>
b. TOTAL RECEIPTS THIS PERIOD .....		\$	<u>1000</u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$	<u>0</u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$	<u>4250</u>
e. TOTAL LOANS OUTSTANDING .....		\$	<u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$	<u>0</u>



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 JUL 15 AM 10:37  
 KNOX COUNTY  
 ELECTION COMM.

## SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-family: cursive; font-size: 1.2em; margin-left: 20px;">Tim Burchett</div>	14. REPORT COVERING THE PERIOD FROM: 1/1/09 TO: 7/15/09
<b>RECEIPTS</b>	
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) .....	\$ _____
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) .....	\$ _____
16. LOANS RECEIVED THIS REPORTING PERIOD .....	\$ _____
17. INTEREST RECEIVED THIS REPORTING PERIOD .....	\$ _____
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) .....	\$ <u>1000.0</u>
<b>DISBURSEMENTS</b>	
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)	
_____	\$ <u>0</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee) .....	\$ <u>0</u>
b. Itemized Expenditures (Over \$100 each payee this period) .....	\$ <u>0</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) .....	\$ <u>0</u>
20. LOAN REPAYMENTS MADE THIS PERIOD .....	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) .....	\$ <u>0</u>
<b>22. IN-KIND CONTRIBUTIONS</b>	
a. Unitemized in-kind contributions (\$100 or less from each source this period) .....	\$ <u>0</u>
b. Itemized in-kind contributions (over \$100 from each source this period) .....	\$ <u>0</u>
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) .....	\$ <u>0</u>
<b>23. OBLIGATIONS</b>	
a. Unitemized Obligations Outstanding (\$100 or less each) .....	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each) .....	\$ <u>0</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.) .....	\$ <u>0</u>



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Tim Barcliff</i>				2. REPORT COVERING THE PERIOD FROM: <i>1/1/04</i> TO: <i>1/30/04</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Marko-Kristie</i>		Middle Name <i>R</i>		Contribution Received For:	
Last Name/Organization Name <i>Smith</i>		Address <i>134 Field Stone Dr</i>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City <i>Andersonville</i>		State <i>TN</i>		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation <i>Physicians Assistant</i>		Zip Code <i>37705</i>		Date of Contribution <i>6/22/09</i>	
Employer <i>self</i>				Amount of Contribution <i>1000.</i>	
				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation		Zip Code		Date of Contribution	
Employer				Amount of Contribution	
				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation		Zip Code		Date of Contribution	
Employer				Amount of Contribution	
				Aggregate This Election	
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		<input type="checkbox"/> Runoff (Local Elections Only)	
Occupation		Zip Code		Date of Contribution	
Employer				Amount of Contribution	
				Aggregate This Election	
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 must be shown in item 15b. of summary.)					<i>1000.</i>