

JUL 2 - 2014

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

COUNTY  
ELECTION COMMISSION

ONE 1:30

1. DATE OF REPORT <u>June 30, 2014</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>Pat Fields</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <u>08-07-2014</u>	
4.a. CAMPAIGN ADDRESS AND PHONE			
Street or Rural Route <u>500 Suffolk Ct.</u>		City <u>Old Hickory</u>	State <u>TN</u>
Zip Code <u>37138</u>		Phone <u>615-519-1819</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>District 17 Republican State Exec Committee member</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>Robert C Fields</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER	<input checked="" 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 type="checkbox"/> MID-YEAR SUPPLEMENTAL		<input type="checkbox"/> YEAR-END SUPPLEMENTAL	
8.a. BEGINNING DATE OF REPORTING PERIOD <u>04-01-2014</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>06-30-2014</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>Pat Fields</u> signature of candidate		<u>7-1-2014</u> date	
<u>Robert C Fields</u> signature of political treasurer		<u>7-1-2014</u> date	
11. WITNESS SIGNATURE			
<u>Kath Fields</u> signature of witness		<u>7-1-2014</u> date	
<u>KJ Fields</u> signature of witness		<u>7-1-2014</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT .....		\$ <u>0</u>	
b. TOTAL RECEIPTS THIS PERIOD .....		\$ <u>179.43</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .....		\$ <u>0</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) .....		\$ <u>179.43</u>	
e. TOTAL LOANS OUTSTANDING .....		\$ <u>0</u>	
f. TOTAL OBLIGATIONS OUTSTANDING .....		\$ <u>0</u>	





## ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Pat Fields</b>				2. REPORT COVERING THE PERIOD FROM: <b>4-1-2014</b> TO: <b>6-30-2014</b>			
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>83.48</b>		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)							
First Name <b>Robert</b>		Middle Name <b>C</b>		In-Kind Contribution Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution <b>\$ 399.00</b>	
Last Name/Organization Name <b>Fields</b>				<input type="checkbox"/> Runoff (Local Elections Only)			
Address <b>500 Suffolk Ct</b>				Date of In-Kind Contribution <b>5-15-2014</b>		Aggregate this Election	
City <b>Old Hickory</b>		State <b>TN</b>	Zip Code <b>37138</b>	Description of In-Kind Contribution <b>political signs</b>			
Occupation <b>Retired</b>		Employer					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation		Employer					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation		Employer					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation		Employer					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution	
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)			
Address				Date of In-Kind Contribution		Aggregate this Election	
City		State	Zip Code	Description of In-Kind Contribution			
Occupation		Employer					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (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 22b. of summary.)					<b>482.48</b>		