

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

319pm
OCT 08 2010

1. DATE OF REPORT <u>10-8-10</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>RICHARD MOSES</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>P/A</u>		3. ELECTION DATE <u>11-2-10</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route <u>1706 CAPE YORK CT.</u>		City <u>MT. JULIET</u>	State <u>TN</u>
		Zip Code <u>37122</u>	Phone <u>(615) 773-2815</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>CITY COMMISSIONER DISTRICT 2</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>TRICIA MOSES</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" 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>7-1-10</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>9-30-10</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>[Signature]</u> signature of candidate		<u>10-8-10</u> date	
<u>Tricia Moses</u> signature of political treasurer		<u>10-8-10</u> date	
11. WITNESS SIGNATURE			
<u>Cynthia Hallenstone</u> signature of witness		<u>10-8-10</u> date	
<u>[Signature]</u> signature of witness		<u>10-8-10</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>0</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>466.03</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>33.97</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>500.00</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>RICHARD MOSKES</u>	14. REPORT COVERING THE PERIOD FROM: <u>7-1-10</u> TO: <u>9-30-10</u>
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RECEIPTS

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 \$ 500.00

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ _____

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 500.00

DISBURSEMENTS

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>DOMAIN NAME PURCHASE</u>	\$	<u>56.05</u>
<u>POSTCARDS</u>	\$	<u>59.98</u>
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____

Total of Expenditures (\$100 or less each payee) \$ 116.03

b. Itemized Expenditures (Over \$100 each payee this period) \$ 350.00

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 466.03

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 0

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 466.03

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.) \$ _____

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.) \$ _____



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE RICHARD MOSES		2. REPORT COVERING THE PERIOD FROM: 7-1-10 TO: 9-30-10	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0
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 895 SIGNS		YARD SIGNS	350.00
Address 1315 W. COLLEGE ST.			
City MURFREESBORO	State TN Zip Code 37130		
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		
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.)			350.00



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="font-size: 1.2em; font-family: cursive;">RICHARD MOSES</div>				2. REPORT COVERING THE PERIOD FROM: <div style="font-size: 1.2em;">7-1-10</div> TO: <div style="font-size: 1.2em;">9-30-10</div>				
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)								
Complete the Following for the Source of the Loan								
First Name <div style="font-size: 1.2em; font-family: cursive;">RICHARD</div>		Middle Name		Outstanding Loan Balance (Beginning of Period) <div style="font-size: 1.2em;">0</div>		Loans Received <div style="font-size: 1.2em;">500.00</div>		
Last Name/Organization Name <div style="font-size: 1.2em; font-family: cursive;">MOSES</div>				Loan Payments <div style="font-size: 1.2em;">0</div>		Outstanding Loan Balance (End of Period) <div style="font-size: 1.2em;">500.00</div>		
Address <div style="font-size: 1.2em; font-family: cursive;">1706 CAPR YORK CT.</div>				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)			Date of Loan <div style="font-size: 1.2em;">8-26-10</div>	
City <div style="font-size: 1.2em; font-family: cursive;">MT. JULIET</div>		State <div style="font-size: 1.2em; font-family: cursive;">TN</div>	Zip Code <div style="font-size: 1.2em; font-family: cursive;">37122</div>					
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)								
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) (Total loans received should also be shown in item 16, on summary page.) (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.)				Outstanding Loan Balance (Beginning of Period) <div style="font-size: 1.2em;">0</div>		Loans Received <div style="font-size: 1.2em;">500.00</div>		
				Loan Payments <div style="font-size: 1.2em;">0</div>		Outstanding Loan Balance (End of Period) <div style="font-size: 1.2em;">500.00</div>		

