

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Judicial Single - Candidate Committees

1. DATE OF REPORT <u>7/10/16</u>	2.a. NAME OF CANDIDATE <u>Andrae Crismon</u>
2.b. NAME OF CANDIDATE'S COMMITTEE <u>Elect Andrae Crismon</u>	3. ELECTION DATE <u>8/4/16</u>
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>1303 Grantland Ave. Murfreesboro, TN 37129 6155941522</u>	
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>1709 Muirwood Blvd. Murfreesboro, TN 37128 615-335-3182</u>	
5. JUDICIAL OFFICE SOUGHT (include district number, if applicable) <u>General Sessions Part IV Judge</u>	6. NAME OF POLITICAL TREASURER <u>Tonya Hobbs</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>5/1/16</u>	8.b. ENDING DATE OF REPORTING PERIOD <u>6/30/16</u>
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosures 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. SIGNATURE OF CANDIDATE <u>[Signature]</u> <u>7/11/16</u> Signature of Candidate Date <u>[Signature]</u> <u>7/11/16</u> Signature of Witness Date	11. SIGNATURE OF POLITICAL TREASURER I do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and accurate. Additionally, I 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> <u>7/11/16</u> Signature of Political Treasurer Date <u>[Signature]</u> <u>7/11/16</u> Signature of Witness Date
12. SUMMARY a. BALANCE ON HAND LAST REPORT \$ <u>0</u> b. TOTAL RECEIPTS THIS PERIOD \$ <u>2715.⁰⁰</u> c. TOTAL DISBURSEMENTS THIS PERIOD \$ <u>2602.⁰⁰</u> d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) \$ <u>113.⁰⁰</u> e. TOTAL LOANS OUTSTANDING \$ <u>0</u> f. TOTAL OBLIGATIONS OUTSTANDING \$ <u>0</u>	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Elect Andrae Crismon</u>	14. REPORT COVERING THE PERIOD FROM: <u>5/2/14</u> TO: <u>6/30/14</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ <u>315⁰⁰</u>
b. Itemized Contributions (over \$100 from each source this period)	\$ <u>2400⁰⁰</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>2715⁰⁰</u>
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ <u>2715⁰⁰</u>
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>Printing</u>	\$ <u>186⁰⁰</u>
<u>Office Supplies</u>	\$ <u>61⁰⁰</u>
<u>Postage</u>	\$ <u>28⁰⁰</u>
<u>Marketing</u>	\$ <u>34⁰⁰</u>
<u>Charitable Donations</u>	\$ <u>25⁰⁰</u>
<u>Promotion</u>	\$ <u>9⁰⁰</u>
<u>Facility Rental</u>	\$ <u>33⁰⁰</u>
.....	\$ <u>—</u>
.....	\$ <u>—</u>
Total of Expenditures (\$100 or less each payee)	\$ <u>378⁰⁰</u>
b. Itemized Expenditures (Over \$100 each payee this period)	\$ <u>2224⁰⁰</u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ <u>2602⁰⁰</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>2602⁰⁰</u>
22. IN-KIND CONTRIBUTIONS	
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>
23. OBLIGATIONS	
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 in item 12.f.)	\$ <u>0</u>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Elect Andrae Crismon				2. REPORT COVERING THE PERIOD FROM: 5/2/16 TO: 6/30/16	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 0
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name James		Middle Name —		Contribution Received For:	
Last Name/Organization Name Edwards		Address 2727 Waywood Dr.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City Murfreesboro		State TN	Zip Code 37128	Date of Contribution 5/2/16	
Occupation Retired		Employer n/a		Amount of Contribution \$500.⁰⁰	
City Nashville		State TN	Zip Code 37219	Date of Contribution 5/6/16	
Occupation Attorney		Employer Bone, McAllister, Norton		Aggregate This Election \$500.⁰⁰	
First Name n/a		Middle Name —		Contribution Received For:	
Last Name/Organization Name Iron workers Local 492		Address 2524 Dickerson Rd.		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City Nashville		State TN	Zip Code 37207	Date of Contribution 5/9/16	
Occupation n/a		Employer n/a		Amount of Contribution \$500.⁰⁰	
City Nashville		State TN	Zip Code 37207	Date of Contribution 5/9/16	
Occupation Attorney		Employer Clearing House Review		Aggregate This Election \$100.⁰⁰	
First Name Amanda		Middle Name —		Contribution Received For:	
Last Name/Organization Name Moore		Address Baird Street		<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
City Murfreesboro		State TN	Zip Code 37130	Date of Contribution 5/9/16	
Occupation Attorney		Employer Clearing House Review		Amount of Contribution \$100.⁰⁰	
City Murfreesboro		State TN	Zip Code 37130	Date of Contribution 5/9/16	
Occupation Attorney		Employer Clearing House Review		Aggregate This Election \$100.⁰⁰	
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.)					\$1600.⁰⁰

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Elect Andrae Crismon				2. REPORT COVERING THE PERIOD	
				FROM: 5/2/16	TO: 6/30/16
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$1,600.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Barbara		Middle Name -		Contribution Received For:	
Last Name/Organization Name Penland - Lafeyers		<input type="checkbox"/> Primary Election		<input checked="" type="checkbox"/> General Election	
Address 186 Lexington Circle		<input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution \$200.00	
City Manchester		State TN		Zip Code 37355	
Occupation Attorney		Date of Contribution 5/4/16		Aggregate This Election \$250.00	
Employer Legal Aid of Mid-TN					
First Name Maria		Middle Name Vania		Contribution Received For:	
Last Name/Organization Name Fider		<input type="checkbox"/> Primary Election		<input checked="" type="checkbox"/> General Election	
Address 1010 Kings Hwy S		<input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution \$100.00	
City Cherry Hill		State NJ		Zip Code 08034	
Occupation Attorney		Date of Contribution 5/18/16		Aggregate This Election 100.00	
Employer Florio, Perrucci, Steinhardt					
First Name John		Middle Name -		Contribution Received For:	
Last Name/Organization Name Little		<input type="checkbox"/> Primary Election		<input checked="" type="checkbox"/> General Election	
Address not provided		<input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution \$100.00	
City Nashville		State TN		Zip Code	
Occupation Managing Partner		Date of Contribution 5/18/16		Aggregate This Election \$100.00	
Employer Strategy Redefined, LLC					
First Name V.		Middle Name Caye		Contribution Received For:	
Last Name/Organization Name Perry		<input type="checkbox"/> Primary Election		<input checked="" type="checkbox"/> General Election	
Address 1419 Broadlands Dr.		<input type="checkbox"/> Runoff (Local Elections Only)		Amount of Contribution \$100.00	
City Murfreesboro		State TN		Zip Code 37130	
Occupation n/a		Date of Contribution 5/23/16		Aggregate This Election \$100.00	
Employer n/a					
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.)				\$2,100.00	

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Elect Andrae Crisman				2. REPORT COVERING THE PERIOD	
				FROM: 5/2/16	TO: 6/30/16
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount \$2,100⁰⁰	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name Mary		Middle Name B.		Contribution Received For:	
Last Name/Organization Name M^{rs} Elroy				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 2002 Red mile Rd.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Murfreesboro		State TN	Zip Code 37217	Date of Contribution 5/23/16	
Occupation Retired Attorney				Aggregate This Election \$100.00	
Employer n/a					
First Name Elijah		Middle Name -		Contribution Received For:	
Last Name/Organization Name Wilhoite				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address PO Box 1757				<input type="checkbox"/> Runoff (Local Elections Only)	
City Antioch		State TN	Zip Code 37011	Date of Contribution 6/7/16	
Occupation Attorney				Aggregate This Election \$100.00	
Employer Self-employed					
First Name Stacy		Middle Name Garrett		Contribution Received For:	
Last Name/Organization Name Koju				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 420 Carters Glen Dr.				<input type="checkbox"/> Runoff (Local Elections Only)	
City Nashville		State TN	Zip Code 37221	Date of Contribution 6/7/16	
Occupation Attorney				Aggregate This Election \$100⁰⁰	
Employer Bone, McAlister, Norton					
First Name		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address				<input type="checkbox"/> Runoff (Local Elections Only)	
City		State	Zip Code	Date of Contribution	
Occupation				Aggregate This Election	
Employer					
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.)				\$2,400⁰⁰	

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Elect Andrae Crismon</i>				2. REPORT COVERING THE PERIOD		
				FROM: <i>5/2/16</i>	TO: <i>6/30/16</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>0</i>	
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		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
First Name		Middle Name		In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address				<input type="checkbox"/> Runoff (Local Elections Only)		
City		State	Zip Code	Date of In-Kind Contribution		Aggregate this Election
Occupation		Employer		Description of In-Kind Contribution		
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS						
(Carry forward to item 3. of next page if additional pages of this form are used.)					<i>0</i>	
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)						

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Elect Andrae Crismon			2. REPORT COVERING THE PERIOD FROM: 5/2/16 TO: 6/30/16	
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 n/a	Middle Name —	Purpose of Expenditure Golf Event Sponsorship	Amount of Expenditure \$100⁰⁰	
Last Name/Business Name Murfreesboro Noon Links Club				
Address 407 Hickerson Dr.				
City Murfreesboro	State TN	Zip Code 37130		
First Name n/a	Middle Name —	Purpose of Expenditure Facility Rental	Amount of Expenditure \$107.94	
Last Name/Business Name Patterson Park Comm. Cntr.				
Address 521 Mercury Blvd				
City Murfreesboro	State TN	Zip Code 37130		
First Name n/a	Middle Name —	Purpose of Expenditure Office/Mailing Supplies	Amount of Expenditure \$104.78	
Last Name/Business Name Fed Ex Office				
Address stones River mall				
City Murfreesboro	State TN	Zip Code		
First Name n/a	Middle Name —	Purpose of Expenditure Signage	Amount of Expenditure \$157.99	
Last Name/Business Name Elaborate Images				
Address n/a - online				
City Unionville	State TN	Zip Code 37140		
First Name n/a	Middle Name —	Purpose of Expenditure Signage	Amount of Expenditure \$1,067.32	
Last Name/Business Name Elaborate Images				
Address n/a - online				
City Unionville	State TN	Zip Code		
First Name n/a	Middle Name —	Purpose of Expenditure Advertising	Amount of Expenditure \$100⁰⁰	
Last Name/Business Name AAHSRC - African Am. Hist. Soc.				
Address 415 S. Academy St.				
City Murfreesboro	State TN	Zip Code 37130		
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.)			\$1638.03	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Elect Andrae Crisman		2. REPORT COVERING THE PERIOD FROM: 5/2/16 TO: 6/30/16	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$1638.03
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name n/a	Middle Name -	Purpose of Expenditure website/ promo	Amount of Expenditure \$200.00
Last Name/Business Name Netsurf			
Address n/a - online			
City Atlanta	State Ga		
First Name n/a	Middle Name -	Purpose of Expenditure website / promo	Amount of Expenditure 186.11
Last Name/Business Name Netbrands Media			
Address n/a - online			
City n/a	State n/a		
First Name n/a	Middle Name -	Purpose of Expenditure Donation	Amount of Expenditure \$100.00
Last Name/Business Name Kymari House			
Address 308 N. Spring St.			
City Murfreesboro	State TN		
First Name Jadawn	Middle Name -	Purpose of Expenditure Campaign Video	Amount of Expenditure \$100.00
Last Name/Business Name Sweet			
Address -			
City Murfreesboro	State TN		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name		/	/
Address			
City	State		
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.)			\$2224.14

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE

Elect Andrae Crismon

2. REPORT COVERING THE PERIOD

FROM:

TO:

5/2/16

6/30/16

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	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name					
Address		Loan Received For:		Date of Loan	
City	State	Zip Code	<input type="checkbox"/> Primary Election	<input type="checkbox"/> General Election	
			<input type="checkbox"/> Runoff (Local Elections Only)		

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	City	State
	Zip Code		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)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Elect Andrae Crisman				FROM: 5/2/16		TO: 6/30/16	
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any person/vendor at the end of the reporting period)				Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
First Name		Middle Name					
Last Name/Business Name							
Address							
City		State	Zip Code				
Description of Obligation							
4. TOTALS							
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)				0	0	0	0