

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

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

1. DATE OF REPORT <b>04-10-18</b>	2.a. NAME OF CANDIDATE OR COMMITTEE <b>Joe C. Matthews</b>		
2.b. IF COMMITTEE, NAME OF CANDIDATE		3. ELECTION DATE <b>05-01-18</b>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route      City      State      Zip Code      Phone <b>605 Harris Lane Gallatin Tennessee 37066 615-708-1877</b>			
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) <b>Sumner County Commissioner District 4</b>		6. NAME OF POLITICAL TREASURER (may be candidate) <b>Joe C. Matthews</b>	
7. CATEGORY OR REPORT (Check one) <input checked="" 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 type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <b>01-16-18</b>		8.b. ENDING DATE OF REPORTING PERIOD <b>03-31-18</b>	
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 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>Joe C. Matthews</u> signature of candidate		<u>Joe C. Matthews</u> signature of political treasurer	
<u>04-10-18</u> date		<u>04-10-18</u> date	
11. WITNESS SIGNATURE			
<u>Jane My</u> signature of witness		<u>Jane My</u> signature of witness	
<u>4-10-18</u> date		<u>4-10-18</u> date	
12. SUMMARY			
<b>FILED</b>			
a. BALANCE ON HAND LAST REPORT .....	A.M.      P.M.		\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD .....			\$ <u>1,513<sup>00</sup></u>
c. TOTAL DISBURSEMENTS THIS PERIOD .....	APR 10 2018		\$ <u>1,562<sup>00</sup></u>
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	SUMNER COUNTY ELECTION COMMISSION		\$ <u>11.00</u>
e. TOTAL LOANS OUTSTANDING .....			\$ <u>863<sup>00</sup></u>
f. TOTAL OBLIGATIONS OUTSTANDING .....			\$ <u>863<sup>00</sup></u>



# SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>Joe C. Matthews</u>		14. REPORT COVERING THE PERIOD	
		FROM: <u>6-16-18</u>	TO: <u>3-31-19</u>
<b>RECEIPTS</b>			
15. CONTRIBUTIONS (other than loans and interest)			
a. Unitemized Contributions (\$100 or less from each source this period) .....		\$	<u>400<sup>00</sup></u>
b. Itemized Contributions (over \$100 from each source this period) .....		\$	<u>250<sup>00</sup></u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) .....		\$	<u>650<sup>00</sup></u>
16. LOANS RECEIVED THIS REPORTING PERIOD .....		\$	<u>863<sup>00</sup></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>1,513<sup>00</sup></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>OFFICE Depot (printing of Flyers)</u>		\$	<u>248<sup>00</sup></u>
<u>White Dove Marketing Group (Printing of Handouts)</u>		\$	<u>639<sup>00</sup></u>
<u>A.G.E. Graphics, LLC (Printing of Election Signs)</u>		\$	<u>615<sup>00</sup></u>
_____		\$	_____
_____		\$	_____
_____		\$	_____
_____		\$	_____
_____		\$	_____
_____		\$	_____
_____		\$	_____
Total of Expenditures (\$100 or less each payee) .....		\$	<u>0</u>
b. Itemized Expenditures (Over \$100 each payee this period) .....		\$	<u>1,502<sup>00</sup></u>
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) .....		\$	<u>1,502<sup>00</sup></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>1,502<sup>00</sup></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>863<sup>00</sup></u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) .....		\$	<u>863<sup>00</sup></u>

Listed in Expenditures over 100<sup>00</sup> Discarded for this section



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Joe C. Matthews</b>			2. REPORT COVERING THE PERIOD FROM: <b>01-16-18</b> TO: <b>3-31-18</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>0</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)				
First Name	Middle Name	Contribution Received For:		Amount of Contribution
Last Name/Organization Name <b>S + L Marketing</b>		<input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election		<b>250<sup>00</sup></b>
Address <b>1800 Liberty Lane</b>		<input type="checkbox"/> Runoff (Local Elections Only)		
City <b>Gallatin</b>	State <b>TN</b>	Zip Code <b>37046</b>	Date of Contribution	Aggregate This Election
Occupation <b>Clothing and Accessories</b>				
Employer				
First Name	Middle Name	Contribution Received For:		Amount of 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 Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Name	Contribution Received For:		Amount of 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 Contribution	Aggregate This Election
Occupation				
Employer				
First Name	Middle Name	Contribution Received For:		Amount of 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 Contribution	Aggregate This Election
Occupation				
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.)				<b>\$ 250<sup>00</sup></b>

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Joe C. Matthews</b>				2. REPORT COVERING THE PERIOD FROM: <b>01-16-18</b> TO: <b>03-31-18</b>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <b>0</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		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of In-Kind Contribution	
Occupation		Employer		Value of In-Kind Contribution	
City		State		Zip Code	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of In-Kind Contribution	
Occupation		Employer		Value of In-Kind Contribution	
City		State		Zip Code	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of In-Kind Contribution	
Occupation		Employer		Value of In-Kind Contribution	
City		State		Zip Code	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of In-Kind Contribution	
Occupation		Employer		Value of In-Kind Contribution	
City		State		Zip Code	
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For:	
Last Name/Organization Name		Address		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
City		State		Date of In-Kind Contribution	
Occupation		Employer		Value of In-Kind Contribution	
City		State		Zip Code	
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.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					<b>0</b>

# ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>Joe C. Matthews</b>			2. REPORT COVERING THE PERIOD FROM: <b>01-16-18</b> TO: <b>03-31-18</b>		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <b>0</b>	
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		Address		Printing of Flyers	\$248 <sup>00</sup>
OFFICE Depot		252 East Main Street			
City	State	Zip Code			
Hendersonville		TN	37075		
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Address		Printing of Handouts	\$639 <sup>00</sup>
White Dove Marketing Group		394 West Main Street Suite B 11			
City	State	Zip Code			
Hendersonville		TN	37075		
First Name		Middle Name	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name		Address		Printing of Electron Signs	\$615 <sup>00</sup>
A.G.E. Graphics, LLC		52231 State Route 248			
City	State	Zip Code			
Long Bottom		OH	45743		
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.)				\$1,502 <sup>00</sup>	

# ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <div style="text-align: center; font-size: 1.2em;">Joe C. Matthews</div>					2. REPORT COVERING THE PERIOD FROM: 01-16-18 TO: 03-31-18							
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;">Joe</div>		Middle Name <div style="font-size: 1.2em;">C.</div>		Outstanding Loan Balance (Beginning of Period) <div style="font-size: 1.2em;">Ø</div>		Loans Received <div style="font-size: 1.2em;">\$ 863<sup>00</sup></div>		Loan Payments <div style="font-size: 1.2em;">Ø</div>		Outstanding Loan Balance (End of Period) <div style="font-size: 1.2em;">\$ 863<sup>00</sup></div>		
Last Name/Organization Name <div style="font-size: 1.2em;">Matthews</div>				Address <div style="font-size: 1.2em;">605 Harris Lane</div>				Loan Received For: <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)		Date of Loan <div style="font-size: 1.2em;">03 29-18</div>		
City <div style="font-size: 1.2em;">Gallatin</div>		State <div style="font-size: 1.2em;">TN</div>	Zip Code <div style="font-size: 1.2em;">37066</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) <small>(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.)</small>					Outstanding Loan Balance (Beginning of Period) <div style="font-size: 1.2em;">Ø</div>		Loans Received <div style="font-size: 1.2em;">\$ 863<sup>00</sup></div>		Loan Payments <div style="font-size: 1.2em;">Ø</div>		Outstanding Loan Balance (End of Period) <div style="font-size: 1.2em;">\$ 863<sup>00</sup></div>	



## ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
Joe C. Matthews				FROM: 01-16-18		TO: 3-31-18	
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		Ø	# 863 <sup>00</sup>	Ø	# 863 <sup>00</sup>	
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
Joe C Matthews 605 Harris Lane Gallatin TN 37066 Loan listed on page 6							
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						# 863 <sup>00</sup>	
(Total from Outstanding Balance - (End of Period) column must also be shown in item 23b. on summary page.)							