# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 2.a. 1	NAME OF CANDIDATE OR	COMMITTEE	· · · · · · · · · · · · · · · · · · ·						
	. 6/1/20///								
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DA	TE					
4.a. CAMPAIGN ADDRESS AND PHONE		State	Zip Code	Phone					
Street or Rural Route  City  605 Hamis Lane Gall	ALIN	To/	37066	615.7081877					
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.			<u> </u>						
Street or Rural Route City		State	Zip Code	Phone					
		OF BOUTION T	REASURER (may	he candidate)					
5. OFFICE SOUGHT (include district number, if applica			neasurer (may						
Sunner County Commissioner Vistnet	4   ]	<u>ve ( 1 )</u>	143 1 11/6						
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD F		PRE-	☐ MID-YEAR	YEAR-END					
QUARTER QUARTER QUARTER Q	OURTH PRE- UARTER PRIMARY	GENERAL	SUPPLEMENT						
8.a. BEGINNING DATE OF REPORTING PERIOD	8.b. ENDIN	IG DATE OF REPO	RTINGPERIOD						
4-22-18	6 3	30-18_	<del> </del>						
9. (Check one)				4 000 410 "					
a. This campaign is exempt from detailed disclotures total \$1,000 or less for this reporting pe	sure because contribution	ns (including in-kil d., 12e. and 12f.)	nd) received total \$	1,000 or less AND expendi-					
				reived total more than \$1,000					
b. This campaign is required to file a detailed fin and/or expenditures total more than \$1,000 f	nancial disclosure becaus for this reporting period.	e contributions (ir Per	iolaanig in-xind) re	Served total more than \$1,000					
		_ <del>-</del>	<u> </u>						
10. I/we do solemnly swear or affirm that the informati	on contained in this cam	paign financial dis	closure report is tr	rue and that this report is an					
accurate accounting of campaign contributions and	expenditures required to or affirm that no campaigr	ne reported by in contributions hav	ve been expended	ILICE DY LITE Campaign					
benefit of the candidate or for any other nonpolitica	I purpose as defined by t	he federal interna.	revenue code.						
0 0 00	10 /18	() 1	M. HI.	07/10/12					
Jus C Motthers 07 signature of candidate	date .	signature of	Matthew of political treasure	date					
signature or carridate									
11. WITNESS SIGNATURE?		1.1	~ A .	1					
140 -1	1,2/10	U/S	Holos	~ 7/15/10					
OUMU MORGE 4	<u> 1118</u>	e gui	ture of witness	- (NID					
signature of witness	cate	signa	iture of witness						
12. SUMMARY									
			s 247	<u>89</u>					
a. BALANCE ON HAND LAST REPORT			w <del></del>	9/-					
b. TOTAL RECEIPTS THIS PERIOD	FHFI	J	\$	<del>09</del> _					
TOTAL PROPERTY OF THE PERIOD		P.M.	, 248	75					
c. TOTAL DISBURSEMENTS THIS PERIOD	1 4 02040		•	n					
d. BALANCE ON HAND (12.a. plus 12.b. minus 1	2.c.) JUL 7 U ZU 10		·····	§ <u>y</u>					
	LIMANIER COUN	TY		. <i>H</i>					
e. TOTAL LOANS OUTSTANDING	CTION COMM!	cci(()N		5 <u> </u>					
<del></del>	CHOM COMMIN	501011							
f. TOTAL OBLIGATIONS OUTSTANDING	CHON COMMIN	50101		, Ø					

#### SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (in Full)	14. REPORT COVERING THE PERIOD
	FROM: 4-22-18 TO: 6-30-18
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 86 from Job Compiler
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	\$ <u>D</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD	
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	s <u>.86</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)
postage s 98	<u>-</u>
Printing \$ 85	<u> </u>
envelopes \$ 22	7.
Fence Post and zip Tieg \$ 42	<del>73</del>
\$	
\$	<del></del>
\$	<del></del>
\$	
\$	
Total of Expenditures (\$100 or less each payee)	s 248.75
Total of Expenditures (\$100 or less each payee)	· P
b. Itemized Expenditures (Over \$100 each payee this period)	- 1/A PI
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	<b>7</b> X
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	······································
22.IN-KIND CONTRIBUTIONS	e M
a. Unitemized in-kind contributions (\$100 or less from each source this period)	, Ø
b. Itemized in-kind contributions (over \$100 from each source this period)	
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 2	22.0.)
23.OBLIGATIONS	, d
a. Unitemized Obligations Outstanding (\$100 or less each)	· //
b. Itemized Obligations Outstanding (Over \$100 each)	\$ <u>~</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i	item 12.f.)\$



### ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		<del></del> -	ING THE PERIOD		
Joe C MAH	FROM: 422-18	TO: 6-30-18			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTI	ane)	Amount			
					1
4. COMPLETE THE APPROPRIATE ITEMS FOR EA	Middle Name		Contribution Received For:	Too harrain considers	Amount of Contribution
First Name	Middle Name	•		_	, , , , , , , , , , , , , , , , , , , ,
Last Name/Organization Name			Primary Election	General Election	
Address			Runoff (Local Election		
City	State	Zip Code	Date of Contribution	Aggregate This Election	
Occupation		·			
Employer					
First Name	Middle Nam	ne	Contribution Received For	:	Amount of Contribution
Last Name/Organization Name	<u> </u>		Primary Election [	General Election	
Address		<u></u>	Runoff (Local Election	ns Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation	<u>,                                     </u>	<u>l</u> .,	1		
Employer			_		
стрюуч					
First Name	First Name Middle Name				Amount of Contribution
Last Name/Organization Name	1		Primary Election	General Election	
Address			Runoff (Local Election	ons Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation	<u> </u>	<u> </u>	7		
Employer					
First Name	Middle Nar	në	Contribution Received For:		Amount of Contribution
Last Name/Organization Name	1	<del></del>	Primary Election	General Election	
Address	-	Runoff (Local Election	ons Only)		
City	City State Zip Code				Aggregate This Election
Occupation	<u></u>				
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS					OS.
(Carry forward to item 3. of next page if additional page: (If this is the last page of contributions, this amount mus	s of this form i				

# ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR	COMMITTEE				2. REPORT COVER	RING THE PERIOD			
Joe C	· MAI	FROM: 4. 22-13	TO: 6-30-18						
3. TOTAL ITEMIZED IN-KIND	CONTRIBUTION	GE (enter \$0 if first itemized page	e)	Ø					
. COMPLETE THE APPROPRIAT	TE ITEMS FOR EA	CH ITEMIZ	ED IN-KIND CONTI	RIBUTION (in-kind contributions totaling	more than \$100 from any co	ntributor during the period)			
First Name	,	Middle Nam	ne	In-Kind Contribution Receive	In-Kind Contribution Received For:    Primary Election				
Last Name/Organization Name				Runoff (Local Election	ns Only)				
Address				Date of In-Kind Contribution	Date of In-Kind Contribution Aggregate this Election				
City	ty State Zip Code			Description of In-Kind Contribution					
Occupation	Employer								
First Name		Middle Nar	ne	In-Kind Contribution Receive	ed For:  General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election	ns Only)	<u> </u>			
Address	<del></del>			Date of In-Kind Contribution		Aggregate this Election			
City	<u></u> . <u></u>	State	Zip Code	Description of In-Kind Contribution	Description of In-Kind Contribution				
Occupation	Employer		<u> </u>						
First Name Middle Name					In-Kind Contribution Received For:  Primary Election General Election  Value of In-Kind Contr				
Last Name/Organization Name			Runoff (Local Election	ons Only)					
Address		_		Date of In-Kind Contribution	Date of In-Kind Contribution Aggregate this Elec				
City		State	Zip Code	Description of In-Kind Contribution	n				
Occupation	Employer								
First Name		Middle Na	ıme	In-Kind Contribution Received	red For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name			<u> </u>	Runoff (Local Election					
Address		<u></u>		Date of In-Kind Contribution					
City		State	Zip Code	Description of In-Kind Contribution	on				
Occupation	Employer	1.,	<u> </u>						
First Name		Middle Na	me	In-Kind Contribution Rece	ived For:	Value of In-Kind Contribution			
Last Name/Organization Name		1		Runoff (Local Election					
Address			Date of In-Kind Contribution	• "	Aggregate this Election				
City		State	Zip Code	Description of In-Kind Contribution	ж				
Occupation	Employer	_l		_ <del>_</del>					
5. TOTAL ITEMIZED IN-KIN (Carry forward to item 3. of next)			are used.)			1 a			
(If this is the last page of in-kind	contributions, this arm	ount must be	shown in item 22b. of s			1 / 1/2			
(all 2 CC 1129 (Day 2006)				F	age _ 4_ of _ 1_	_ RDA 1159			

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				<ol><li>REPORT COVER</li></ol>	ING THE PERIOD		
Joe C M	FROM: 64-22-18	TO: 6-30 - 18 Amount					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	GE lenter \$0 if first itemized pa	age)	Amount				
4. COMPLETE THE APPROPRIATE ITEMS FOR E					iod)		
	Middle Nar		Purpose of Expenditure		Amount of Expenditure		
First Name	Middle Nar	ле	r dipose of Experience		Autout of Exponence		
Last Name/Business Name	•	<u> </u>			·		
Address							
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code			ļ		
	_				4.5		
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u>.</u>						
Address							
City	State	Zip Code	$\dashv$				
				<u> </u>			
First Name	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	_//-	<del></del>					
Address							
City	State	Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name	<u> </u>						
Address					į		
City	State	Zip Code					
First Name	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name							
Address							
City	State	Zip Code					
	<u> </u>	<u> </u>					
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page)	jes of this form	n are used.)			$\mid \varnothing \mid$		
(If this is the last page of expenditures, this amount m	ust be shown	in item 19b. of summary.	}	<del></del>			

#### ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE  Joe C. Mathews						FR	2. REPORT COVERING THE PERIOD FROM: TO: 4-2-18 6-30-18			
JOE C.  3. COMPLETE THE APPR	MAY F	7-12-CH 17	<del>اک ک</del>	ED LOAN #	aana tataling n	nore then \$100 from a				0-30-10
		OR EACH II	CIVIIZ	ED LOAN (I	oans totaling i	IOI & III III & IOO II OIII A	any actuated	during the per	100)	·
Complete the Following for the First Name	Source of the Loan Middle Nan			Outstanding L	oan Balance	Loans	L	oan	Outstandin	ng Loan Balance
( 113) ( 10) 10				(Beginning o		Received	Pay	ments	(End	of Period)
Last Name/Organization Name	<u> </u>			]						
Address	·····		_	Loan Receive	ed For:	· <del></del>		Date of Loa	n	
ity State Zip Code			y Election General Election							
City		<u> </u>			Local Elections					
	List All Endo			or Above Loa		ace is needed plea	se attach	a page)	liesa ki	
First Name		Middle Name			First Name				Middle Nam	e 
Last Name/Organization Name	··	- t ::- · ·			Last Name/Or	ganization Name				
Address	<u> </u>				Address			<u>_</u> _		
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding	<del></del> ,			•	Amount Guar	anteed Outstanding				
First Name		Middle Name	)		First Name				Middle Nam	6
Last Name/Organization Name					Last Name/O	rganization Name				
Address	<del></del>	<del></del>			Address	<u> </u>				
City		State	Zip C	Code	City	.410		-	State	Zip Code
Amount Guaranteed Outstanding	<del></del>		•	**	Amount Guar	anteed Outstanding	_			
First Name		Middle Name	)	** **	First Name				Middle Nar	ne
Last Name/Organization Name		<u>!</u>			Last Name/0	rganization Name				
Address	<u> </u>	-	-		Address					<u> </u>
City		State	Zip (	Code	City				State	Zip Code
Amount Guaranteed Outstanding	·	1.	1		Amount Guar	ranteed Outstanding			1	<u> </u>
First Name		Middle Name	e		First Name				Middle Nar	ne
Last Name/Organization Name					Last Name/C	organization Name				<del></del>
Address				···	Address	<u>.</u>				****
City	<u> </u>	State	Zio (	Code	City				State	Zip Code
Amount Guaranteed Outstanding	<u> </u>		<u> </u>		Amount Gua	ranteed Outstanding			1	
4.7.4.1.7. 91		of Hamilton I I -	2021		Outstandin -	Logo Polones	Loans		an O	utstanding Loan Balance
Totals for all Loans (com     (Total loans received should als     (Total loan payments should als     (Total outstanding loan balance)	so be shown in item 16. o so be shown in item 20. o	n summary page n summary page	ı.) ı.)			Loan Balance g of Period)	Received		ments	(End of Period)
(lotal outstanding loan balance		DIA 12.0. UII II UII	hañer)		<del></del>	Pane	6	1 7		RDA 1159

### ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTE	2. REPORT COVERING THE PERIOD					
Joe C. MAH	Heu	5		FROM: 4 - 22-	18 TO:	630 18
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 Na	ine				
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation		<u> </u>				
First Name	Middle N	ame				
Last Name/Business Name		<del> </del>	_			
Address	<u> </u>					
City	State	Zip Code				
Description of Obligation			<b>!</b>			
First Name	Middle N	ame				
Last Name/Business Name					ļ	
Address						
City	State	Zip Code				
Description of Obligation	<u> </u>				-	
First Name	Middle I	lame				
Last Name/Business Name	1	<del></del>				
Address		<u></u> _				İ
City	State	Zip Code				
Description of Obligation				·	<u> </u>	<u> </u>
First Name	Middle	Name				
Last Name/Business Name	!	<u>.</u>				
Address			$\dashv$			
City	State	Zip Code	-			
Description of Obligation				<u> </u>		
				<del></del>	<del></del>	
TOTALS     (Total from Outstanding Balance - (End of Perini item 23b. on summary page.)	iod) column n	nust also be showr	<b>b</b>	Ø	Ø	
			······································	Page 17	, 7	RDA 1159