FINAL

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT		F CANDIDATE OR COMM	ST AMPER				
2.b. IF COMMITTEE, NAME OF	<u> </u>	111-11	3. ELECTION DA	TE			
2.b. IF COMMITTEE, NAME OF	/A			5-1-18			
4.a. CAMPAIGN ADDRESS AND Street or Rural Route	City	Sta	te Zip Code	Phone			
1002 SCARLE		asonville	TN 37075	615-339-0017			
4.b. CANDIDATE'S HOME ADDR Street or Rural Route	ESS (if different than 4.a.) City	Sta	te Zip Code	Phone			
5. OFFICE SOUGHT (include di		1 .	OLITICAL TREASURER (May	_			
7. CATEGORY OR REPORT (Ch FIRST SECOND QUARTER QUARTER	eck one) THIRD FOURTH QUARTER QUARTER	PRE- PRIMARY GE	PRE- MID-YEAR ENERAL SUPPLEMENTA	YEAR-END AL SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORT		8.b. ENDING DATE	OF REPORTING PERIOD				
7-	24-18		7-30-18	·			
9. (Check one) a. 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. 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.							
accurate accounting of camp Financial Disclosure Act. Ac	offirm that the information containing contributions and expend ditionally, I/we swear or affirm or any other nonpolitical purposed to the contribution of the contrib	itures required to be repo that no campaign contrib e as defined by the feder	orted by the candidate commit outions have been expended f	ttee by the Campaign			
							
11./ WITNESS SIGNATURE	_	. 0					
Jan	10-5-1	8 4	$\mathcal{V} \setminus \mathcal{V}$	12-5-18			
signature of witness	date		signature of witness	date			
12. SUMMARY		·····	<i>^</i>				
a. BALANCE ON HAND LAS	ST REPORT	LED	ss	_			
b. TOTAL RECEIPTS THIS P	ERIODA:M:	P.M.	\$ 10,00	<u>0</u>			
c. TOTAL DISBURSEMENTS	OCT	09 2018	s 10,02	<u>_</u>			
d. BALANCE ON HAND (1:	2.a. plus 12.b. mirtus V2M.N.E.	R COUNTY		\$			
e. TOTAL LOANS OUTSTAI	ELECTION			s			
f. TOTAL OBLIGATIONS O	JTSTANDING			\$			
				'			

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD					
MATT STAMPER	FROM: 7-24-18	TO: 9-30-18				
RECEIPTS						
15. CONTRIBUTIONS (other than loans and interest)	· Ø					
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						
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$ 10,000				
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	e.g., printing, postage	, gasoline)				
\$ <u>J</u>	,					
\$						
s		:				
•	<u></u>					
						
\$						
\$						
\$ ————						
Total of Expenditures (\$100 or less each payee)	s Ø,					
b. Itemized Expenditures (Over \$100 each payee this period)	7					
		_ ,				
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)						
		10 - 3				
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	***************************************	10,000				
22.IN-KIND CONTRIBUTIONS	Ø					
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.)	\$ <u> </u>				
23. OBLIGATIONS	≈					
a. Unitemized Obligations Outstanding (\$100 or less each)	\$					
b. Itemized Obligations Outstanding (Over \$100 each)	/ AX	- /				
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i ite	m 12.f.)	s <i>O</i>				

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE MATT	STA	7 MPER		2. REPORT COVER			
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount		
4. COMPLETE THE APPROPRIATE ITEMS FOR E	<u> </u>						
First Name	Middle Nam	Α .	Contribution Received For:		Amount of Contribution		
Last Name/Organization Name STAMPER			Primary Election	\$10,000.00			
Address 1002 SCARLET COURT			Runoff (Local Election	11-7			
HENDERSONVILLE State TN 37075		Date of Contribution	Aggregate This Election				
Occupation CPA		9-31	\$22,97456				
Employer MATT STAMPER, CPA, PC							
First Name	Middle Nam	ne	Contribution Received For	:	Amount of Contribution		
Last Name/Organization Name			Primary Election				
Address			Runoff (Local Election	ns Only)			
City	City State Zip C		Date of Contribution		Aggregate This Election		
Occupation	· <u>*</u> · · · · · · · · · · · · · · · · · · ·	•					
Employer							
First Name	First Name Middle Name			Contribution Received For:			
Last Name/Organization Name			Primary Election [General Election			
Address			Runoff (Local Election	ns Only)			
City	City State Zip Code		Date of Contribution	Aggregate This Election			
Occupation	<u> </u>						
Employer							
First Name Middle Name		Contribution Received For:		Amount of Contribution			
Last Name/Organization Name			Primary Election				
Address			Runoff (Local Election	as Only)			
City State Zip Code		Date of Contribution		Aggregate This Election			
Occupation							
Employer							
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of (If this is the last page of contributions, this amount must	•			10'00			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE					2.	2. REPORT COVERING THE PERIOD			
MATT STAMPER					17	FROM: 7-24-18 TO: 9-30-18			
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 30N Middle Name Coutstanding (Beginning				Loan Balance of Period)		Loans Loan Outstanding Loan Balance eceived Payments (End of Period)			
) Do o	_	_ \$	\$10,000		
Address 1002 SCARLET CT. Loan Receive									
City 11 - A T OC A 31/1/15 State 1 Zip Code				Local Elections		ai Lieceoii		-	15-17
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)									
First Name	Middle Name	I		First Name				Middle	Name
Last Name/Organization Name				Last Name/Or	ganization Na	ım ş		<u> </u>	
Address		-		Address					:
City	City State Zip Code			City State Zip Code					Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name	Middle Name			First Name Middle Name				Name	
Last Name/Organization Name			Last Name/Organization Name						
Address			Address						
City	State	Zip Coo	le	City State Zip Code					Zip Code
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding					
First Name	Middle Name	7		First Name Middle Name				Name	
Last Name/Organization Name	1			Last Name/Organization Name					
Address				Address					
City	State	Zip Cod	ie	City State Zip Coo			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 Cod	e	City				State	Zip Code
Amount Guaranteed Outstanding			Amount Guaranteed Outstanding						
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)			Outstanding Lo (Beginning o		Loans Received	Loan Payme		Outstanding Loan Balance (End of Period)	
(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.)				10,0	35.0	Ø	10,0	ا دو	Ø
SS-1132 (Rev. 4/02)		_		-	P	age <u> </u>	of 4		RDA 1159