CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

DATE OF REPORT	2.a. NAME OF CA	ANDIDATE OR (COMMITTEE						
10/07/2022									
2.b. IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DAT	E				
Sam Matthews	11/08/2022								
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Phone				
419 Wilkinson Lane W	hite House		TN	37188	615-581-1104				
4.b. CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)								
5. OFFICE SOUGHT (include district number, i	e candidate)								
City of White House Alderman		Sam	Matthews						
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	CATEGORY OR REPORT (Check one)								
8.a. BEGINNING DATE OF REPORTING PERIOD			DATE OF REPO	RINGPERIOD					
07/01/2022 9. (Check one)		09/3	0/2022						
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.									
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.									
signature of candidate 10/07/2022 Signature of political treasurer 10/07/2022									
11. WITNESS SIGNATURE									
Biogia Matthew signature of witness	2 10/0]/7	2022) (0 0 (0) (o) (o) (o)	Matthe ture of witness	ug 10/07-h	202			
12. SUMMARY									
a. BALANCE ON HAND LAST REPORT				\$	-				
b. TOTAL RECEIPTS THIS PERIOD					_				
c. TOTAL DISBURSEMENTS THIS PERIOD				\$1243.55					
d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.) FILE	D PM	***************************************		\$1756.45				
e. TOTAL LOANS OUTSTANDING	OCT 1	1 2022			. \$3000.00				
f. TOTAL OBLIGATIONS OUTSTANDING	SUMNER	COUNTY			. \$	-			



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) 14. REPORT COVE						RING THE PERIOD				
MATTHEWS FOR ALDERMAN WARD 1	FRO	M: 07/01/2022	TO:	09/30/2022						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)										
a. Unitemized Contributions (\$100 or less from each source this p	_									
b. Itemized Contributions (over \$100 from each source this period	b. Itemized Contributions (over \$100 from each source this period)\$									
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	\$_	0.00								
16. LOANS RECEIVED THIS REPORTING PERIOD	\$_	3000.00								
17. INTEREST RECEIVED THIS REPORTING PERIOD				•••••	\$_	0.00				
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in ite	m 12.b	.)		***************************************	\$_	3000.00				
DISBURSEMENTS										
19. EXPENDITURES (other than loan payments)										
a. Expenditures (\$100 or less each payee this period) (must be liste	d by ca	tegory - e.	g., pri	nting, postage,	gaso	line)				
DIGITAL DESIGN	\$_	7.99								
CAMPAIGN SIGN INSTALL (MATERIALS)	\$_	21.40								
CAMPAIGN SIGN INSTALL (MATERIALS)	\$_	7.66								
CAMPAIGN SIGN INSTALL (MATERIALS)	\$	27.17								
PRINTING	\$	37.50								
CAMPAIGN SIGN INSTALL (MATERIALS)	\$	5.44								
DIGITAL DESIGN	\$	12.99								
CAMPAIGN SIGN INSTALL (MATERIALS)	\$	5.69	W.							
DIGITAL MARKETING	\$_	25.12								
				150.96						
Total of Expenditures (\$100 or less each payee)	-									
b. Itemized Expenditures (Over \$100 each payee this period)	-									
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a.	and 19	.b.)			.\$_	1243.55				
20. LOAN REPAYMENTS MADE THIS PERIOD	\$_	1243.55								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)										
22.IN-KIND CONTRIBUTIONS										
a. Unitemized in-kind contributions (\$100 or less from each source to	_									
b. Itemized in-kind contributions (over \$100 from each source this pe	_									
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (ac	.\$_	131.79								
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	.\$ _	0.00								



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE MATTHEWS FOR ALDERMAN	WARD	1		RING THE PERIOD TO: 09/30/2022				
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount 0.00							
COMPLETE THE APPROPRIATE ITEMS FOR E								
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	***************************************	Custom Shirts		117.28				
Designhill Address			-					
11201 Ed Brown Rd, Unit A	Zip Code	-						
Charlotte	State NC	Zip Code 28273						
First Name	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name	1		- Yard Signs		700.00			
A.G.E. Graphics			-					
678 Collins Rd.	State	Zip Code	-					
Little Hocking	ОН	45742						
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure			
Last Name/Business Name			Yard Signs		275.31			
Mr. Sign Man			-					
129 Commerce Dr.	State	Zip Code	4					
Hendersonville	TN	37075						
First Name	ne	Purpose of Expenditure		Amount of Expenditure				
Last Name/Business Name	<u> </u>							
Address		1						
City	State	Zip Code						
First Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name		1						
Address		1						
City	State	Zip Code						
First Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure				
Last Name/Business Name								
Address								
City	State	Zip Code						
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3, of next page if additional page	s of this form	are used)			1002.50			
(If this is the last page of expenditures, this amount mu					1092.59			

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE								2. REPORT COVERING THE PERIOD					
MATTHEWS FOR ALDERMAN WARD 1								FROM: TO:					
								07/01/2022 09/30/2022					
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 First Name													
SAM	Middle Nam	.e		Outstanding Loan Balance (Beginning of Period)		Loan Receiv			Outstanding Loan Balance (End of Period)				
Last Name/Organization Name					00	2000 00							
MATTHEWS				0.	00	3000.	000.00 0.00 3000.					00	
Address Loan Rec					ry Election ☐ General Election ☐ Date of Loan								
City	State	Zip Code		Li Filliary	Election	al Election							
WHITE HOUSE	TN	37188		Runoff (Local Elections Only)					08/30/2022				
	t All Endon		entors fo	or Above Loa	n (If more spa	re is neede	ed please at	Hach	a nana)				
First Name		Middle Name		of riboro 20.		100 10 11000	eu piedoe u	llau.	a page,	1	-		
		Midule Name	!		First Name Middle Nar						e Name		
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City		State	Zip Co	ode	City State Zip Code						Zip Code		
Amount Guaranteed Outstanding													
Amount Guaranteed Guistanumy					Amount Guaranteed Outstanding								
First Name Middle Name				First Name Middle Name									
Last Name/Organization Name				Last Name/Organization Name									
Address					Address								
City State Zip Coo			de	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				de	City State Zip Code							Zip Code	
Amount Guaranteed Outstanding				Amount Cueron	tood Outston	adia a							
- mount obtained outstanding					Amount Guaran	need Outstar	laing						
First Name Middle Name			200.00	First Name Middle Name									
Last Name/Organization Name				Last Name/Organization Name									
Address				Address									
City	State Zip Code			de	City State Zip Code					Zip Code			
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding								
4. Totals for all Loans (complete on last page of itemized loans)				Outstanding Loa	Outstanding Loan Balance Loans Loan			Outstanding Loan Balance					
(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.)				(Beginning of		Receive	d	Payme	nts		End of Period)		
(Total outstanding loan balance should also be shown in item 12.e. on front page.)					0.0	00	3000.0	00	0.0	0	30	00.00	