
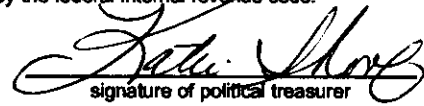

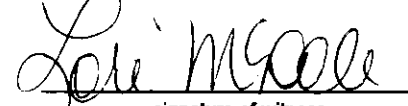


CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

| | | | | | |
|---|--|--|--|--|--------------------------------|
| 1. DATE OF REPORT <u>APRIL 8 2022</u> | | 2.a. NAME OF CANDIDATE OR COMMITTEE <u>MATTHEW L. SHOAF</u> | | | |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE | | | 3. ELECTION DATE <u>MAY 3 2022</u> | | |
| 4.a. CAMPAIGN ADDRESS AND PHONE | | | | | |
| Street or Rural Route <u>100 GOVERNORS POINT BLVD</u> | | City <u>HENDERSONVILLE</u> | State <u>TN</u> | Zip Code <u>37075</u> | Phone <u>(828) 729-4566</u> |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) | | | | | |
| Street or Rural Route <u>SAME AS ABOVE</u> | | City <u>-</u> | State <u>-</u> | Zip Code <u>-</u> | Phone <u>-</u> |
| 5. OFFICE SOUGHT (include district number, if applicable) <u>COUNTY COMMISSIONER, DISTRICT 22, SUMNER</u> | | | 6. NAME OF POLITICAL TREASURER (may be candidate) | | |
| 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 <u>JANUARY 16 2022</u> | | | 8.b. ENDING DATE OF REPORTING PERIOD <u>MARCH 31 2022</u> | | |
| 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. | | | | | |
|  signature of candidate | | <u>4/11/22</u> date | |  signature of political treasurer | |
| | | | | <u>4/11/2022</u> date | |
| 11. WITNESS SIGNATURE | | | | | |
|  signature of witness | | <u>4/11/22</u> date | |  signature of witness | |
| | | | | <u>4/11/22</u> date | |
| 12. SUMMARY | | | | | |
| FILED | | | | | |
| a. BALANCE ON HAND LAST REPORT | | AM | PM | \$ <u>0</u> | |
| b. TOTAL RECEIPTS THIS PERIOD | | <u>APR 08 2022</u> | | \$ <u>3,248.00</u> | |
| c. TOTAL DISBURSEMENTS THIS PERIOD | | <u>SUMNER COUNTY</u> | | \$ <u>1,576.09</u> | |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) | | ELECTION COMMISSION | | \$ <u>1,671.97</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) | 14. REPORT COVERING THE PERIOD | |
| | FROM: | TO: |
| RECEIPTS | | |
| 15. CONTRIBUTIONS (other than loans and interest) | | |
| a. Unitemized Contributions (\$100 or less from each source this period) | \$ | 70.00 |
| b. Itemized Contributions (over \$100 from each source this period) | \$ | 3178.00 |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) | \$ | 3248.00 |
| 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.) | \$ | 3248.00 |
| 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>FEVER - CAMPAIGN LOGO DESIGN</u> | \$ | 70.00 |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| _____ | \$ | _____ |
| Total of Expenditures (\$100 or less each payee) | \$ | 70.00 |
| b. Itemized Expenditures (Over \$100 each payee this period) | | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | | |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | \$ | 1586.03 |
| 22. IN-KIND CONTRIBUTIONS | | |
| 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.) | | |
| 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 be shown in item 12.f.) | | |



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | | | |
|--|--------------------|-----------------------------|--|--|--|
| 1. NAME OF CANDIDATE OR COMMITTEE MATTHEW L. SHOAF | | | 2. REPORT COVERING THE PERIOD FROM: 1/16/22 TO: 3/31/22 | | |
| 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 MATTHEW | | Middle Name LADD | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name SHOAF | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$1,550.00 |
| Address 100 GOVERNORS POINT BLVD | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City HENDERSONVILLE | State TN | Zip Code 37075 | Date of Contribution JANUARY 25 2022 | | Aggregate This Election \$1,555.00 |
| Occupation EXECUTIVE | | | Employer FREE MARKET HEALTH | | |
| First Name GINA | | Middle Name HARDY | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name CARPENTER | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$101.00 |
| Address 742 DOUGLAS BEND RD | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City GALLATIN | State TN | Zip Code 37066 | Date of Contribution FEBRUARY 3 2022 | | Aggregate This Election \$101.00 |
| Occupation HOMEMAKER | | | Employer N/A | | |
| First Name DARRELL | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name WOODCOCK | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$101.00 |
| Address 1529 HUNT CLUB BLVD | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City GALLATIN | State TN | Zip Code 37066 | Date of Contribution FEBRUARY 4 2022 | | Aggregate This Election \$101.00 |
| Occupation PRINCIPAL | | | Employer APEX FINANCIAL PLANNING | | |
| First Name PASCAL AND MICHELLE | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name TOUVENCE | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$100.00 |
| Address 1335 LONG HOLLOW PIKE | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City GALLATIN | State TN | Zip Code 37066 | Date of Contribution FEBRUARY 19 2022 | | Aggregate This Election \$100.00 |
| Occupation PILOT | | | Employer SOUTHWEST | | |
| 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.) | | | | | \$1,852.00 |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| | | | | | |
|--|--------------------|---------------------------------|--|--|------------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE MATTHEW L. SHAF | | | 2. REPORT COVERING THE PERIOD FROM: JAN 16 22 TO: MAR 31 22 | | |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | Amount \$1852.00 | |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | | | |
| First Name STEVE AND MARILYN | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name ELBERT | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$250.00 |
| Address 214 BLUEGRASS DRIVE | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City HENDERSONVILLE | State TN | Zip Code 37075 | Date of Contribution FEBRUARY 19 2022 | Aggregate This Election \$250.00 | |
| Occupation RETIRED | | Employer N/A | | | |
| First Name KENT V | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name KEARSEY | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$500.00 |
| Address 102 COMMONS WAY | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City CHAPEL HILL | State NC | Zip Code 27516 | Date of Contribution MARCH 22 2022 | Aggregate This Election \$500.00 | |
| Occupation CO-FOUNDER | | Employer ACRE | | | |
| First Name DANIELA | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name HOPKENS LEE | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$101.00 |
| Address 106 KOLEBERG TRL | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City HENDERSONVILLE | State TN | Zip Code 37075 | Date of Contribution MARCH 25 2022 | Aggregate This Election \$101.00 | |
| Occupation SEAVICE MEMBER | | Employer US AIR FORCE | | | |
| First Name LAYAH | | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name GARTON | | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$250.00 |
| Address 101 GLANCE ST | | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City HENDERSONVILLE | State TN | Zip Code 37075 | Date of Contribution MARCH 23 2022 | Aggregate This Election \$250.00 | |
| Occupation STUDENT | | 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.) | | | | \$2053.00 | |

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

| 1. NAME OF CANDIDATE OR COMMITTEE | | | 2. REPORT COVERING THE PERIOD | |
|--|-------------|--|---------------------------------------|-------------------------------------|
| | | | FROM: | TO: |
| 3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | Amount \$2953.00 |
| 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor) | | | | |
| First Name DRENT | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name DYER | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$100.- |
| Address 252 S. RAY DR | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City PORTLAND | State TN | Zip Code 38148 | Date of Contribution MARCH 10 2022 | Aggregate This Election \$100.- |
| Occupation DEPUTY CHIEF, PARAMEDIC | | Employer SUMNER COUNTY EMS | | |
| First Name KAREN | Middle Name | Contribution Received For: | | Amount of Contribution |
| Last Name/Organization Name DIXON | | <input checked="" type="checkbox"/> Primary Election <input type="checkbox"/> General Election | | \$125.00 |
| Address 100 CLARENDON PLACE | | <input type="checkbox"/> Runoff (Local Elections Only) | | |
| City HENRIKSONVILLE | State TN | Zip Code 37075 | Date of Contribution | Aggregate This Election \$125.00 |
| Occupation RETIRED | | Employer N/A | | |
| 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.) | | | | \$3178.00 |

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

| | | | | |
|--|--------------------|--|-------------------------------|--------------------|
| 1. NAME OF CANDIDATE OR COMMITTEE MATTHEW L. SHARF | | | 2. REPORT COVERING THE PERIOD | |
| | | | FROM: 1/16/22 | TO: 3/31/22 |
| | | | Amount | |
| 3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page) | | | | |
| 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 SQUARE SPACE | | WEB HOSTING AND DESIGN TEMPLATE | \$235.98 | |
| Address 8 CLARKSON ST - FLOOR 12 | | | | |
| City NEW YORK | State NY | | | |
| First Name | Middle Name | Purpose of Expenditure | Amount of Expenditure | |
| Last Name/Business Name VESTA PRINT | | DOOR HANGERS AND PUSH CARDS | \$376.30 | |
| Address 275 WYMAN ST | | | | |
| City WALTHAM | State MA | | | |
| First Name | Middle Name | Purpose of Expenditure | Amount of Expenditure | |
| Last Name/Business Name COLLINS AGE GRAPHICS | | SIGNS | \$903.75 | |
| Address 678 COLLINS RD | | | | |
| City LITTLE HOCKING | State OH | | | |
| 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 | | | |
| First Name | Middle Name | Purpose of Expenditure | Amount of Expenditure | |
| Last Name/Business Name | | | | |
| Address | | | | |
| City | State | | | |
| 5. TOTAL ITEMIZED EXPENDITURES | | | | \$1516.03 |
| (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.) | | | | |