



REGISTRY OF ELECTION FINANCE
404 JAMES ROBERTSON PARKWAY, SUITE 1614
NASHVILLE, TN 37243-1360
(615) 741-7959

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>07-22-96</u>	2.A. NAME OF CANDIDATE OR COMMITTEE <u>Debra L. Matthews</u>
2.B. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE <u>August 1, 1996</u>
4.A. CAMPAIGN ADDRESS <small>Street or Rural Route City State Zip Code Phone</small> <u>3814 Chandler Ave Chattanooga, TN 37410 423-266-2751</u>	
4.B. CANDIDATE'S HOME ADDRESS (if different than 4.A.) <small>Street or Rural Route City State Zip Code Phone</small> <u>Same</u>	
5. OFFICE SOUGHT (include district no., if applicable) <u>Hamilton Co School Board 4th Dist</u>	6. NAME OF POLITICAL TREASURER (may be candidate) <u>Debra Matthews</u>
7. CATEGORY OF REPORT PRE-PRIMARY <input type="checkbox"/> POST-PRIMARY <input type="checkbox"/> PRE-GENERAL <input checked="" type="checkbox"/> POST-GENERAL <input type="checkbox"/> SUPPLEMENTAL <input type="checkbox"/> AMENDED <input type="checkbox"/>	
8.A. BEGINNING DATE OF REPORTING PERIOD <u>June 2, 1996</u>	8.B. ENDING DATE OF REPORTING PERIOD <u>July 22, 1996</u>
9. (Check one) A. <input checked="" 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 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 political candidates/campaign 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>Debra L. Matthews</u> <u>7/21/96</u> <u>Debra L. Matthews</u> <u>7/21/96</u> <small>signature of candidate date signature of political treasurer date</small>	
11. SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>22</u> DAY OF <u>July</u> 19 <u>96</u> <u>Beth L. Penny</u> <small>notary public</small> My Commission Expires <u>May 20, 2000</u> <small>date commission expires</small> <div style="text-align: center;">Notary Seal</div>	SWORN TO AND SUBSCRIBED BEFORE ME IN THE COUNTY OF <u>Hamilton</u> AND THE STATE OF <u>Tennessee</u> THIS <u>22</u> DAY OF <u>July</u> 19 <u>96</u> <u>Beth L. Penny</u> <small>notary public</small> My Commission Expires <u>May 20, 2000</u> <small>date commission expires</small> <div style="text-align: center;">Notary Seal</div>
12. SUMMARY	
a. BALANCE ON HAND LAST REPORT.....	\$ <u>0</u>
b. TOTAL RECEIPTS THIS PERIOD.....	\$ <u>950.00</u>
c. TOTAL DISBURSEMENTS THIS PERIOD.....	\$ <u>500.00</u>
d. BALANCE ON HAND (12a. plus 12b. minus 12c.).....	\$ <u>450.00</u>
e. TOTAL LOANS OUTSTANDING.....	\$ <u>0</u>
f. TOTAL OBLIGATIONS OUTSTANDING.....	\$ <u>599.23</u>



SUMMARY PAGE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <div style="font-size: 1.2em; font-family: cursive;">Debra L. Matthews</div>	14. REPORT COVERING THE PERIOD FROM: <u>6-2-96</u> TO: <u>7-22-96</u>
RECEIPTS	
15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period).....	\$ <u>450.⁰⁰</u>
b. Itemized Contributions (over \$100 from each source this period).....	\$ <u>500.⁰⁰</u>
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15a. and 15b.).....	\$ <u>950.⁰⁰</u>
16. LOANS RECEIVED THIS REPORTING PERIOD.....	\$ <u>0</u>
17. INTEREST RECEIVED THIS REPORTING PERIOD.....	\$ <u>0</u>
18. TOTAL RECEIPTS (add 15c., 16., and 17.) (must be shown in item 12b.).....	\$ <u>950.⁰⁰</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)	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Expenditures (\$100 or less each payee).....	\$ <u>0</u>
b. Itemized Campaign Expenditures (Over \$100 each payee this period).....	\$ <u>500.⁰⁰</u>
c. Itemized Other Expenditures (Over \$100 each payee this period).....	\$ <u>0</u>
d. TOTAL EXPENDITURES (other than loan repayments)(add 19a., 19b., and 19c.).....	\$ <u>500.⁰⁰</u>
20. LOAN REPAYMENTS MADE THIS PERIOD.....	\$ <u>0</u>
21. TOTAL DISBURSEMENTS (add 19d. and 20.) (must be shown in item 12c.).....	\$ <u>500.⁰⁰</u>
22. IN-KIND CONTRIBUTIONS	
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 22a. and 22b.).....	\$ <u>0</u>
23. LOANS	
LOANS OUTSTANDING (must be shown in item 12e.).....	\$ <u>0</u>
24. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each).....	\$ <u>0</u>
b. Itemized Obligations Outstanding (Over \$100 each).....	\$ <u>599.²³</u>
c. TOTAL OBLIGATIONS OUTSTANDING (add 24a. and 24b.) (must be shown in item 12f.).....	\$ <u>599.²³</u>

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Debra L. Matthews		2. REPORT COVERING THE PERIOD FROM: 6-2-96 TO: 7-22-98	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 500.00
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name Thomas	Middle Name J	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):	Amount of Contribution(s) 500.00
Last Name/Organization Name Brooks III			Aggregate this Election
Address 340 Holtzclaw Ave			
City Chattanooga	State TN	Zip Code 37404	Date of Contribution(s) 07-13-96
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):	Amount of Contribution(s)
Last Name/Organization Name			Aggregate this Election
Address			
City	State	Zip Code	Date of Contribution(s)
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):	Amount of Contribution(s)
Last Name/Organization Name			Aggregate this Election
Address			
City	State	Zip Code	Date of Contribution(s)
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):	Amount of Contribution(s)
Last Name/Organization Name			Aggregate this Election
Address			
City	State	Zip Code	Date of Contribution(s)
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):	Amount of Contribution(s)
Last Name/Organization Name			Aggregate this Election
Address			
City	State	Zip Code	Date of Contribution(s)
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.)			



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTION - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Debra L. Matthews</i>			2. REPORT COVERING THE PERIOD	
			FROM: <i>6-2-96</i>	TO: <i>7-22-96</i>
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)				Amount <i>0</i>
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:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
Description of In-Kind Contribution				
First Name	Middle Name	In-Kind Contribution Received For:		Value of In-Kind Contribution
Last Name/Organization Name		<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		
Address		<input type="checkbox"/> Other Election (Specify):		
City		State	Zip Code	Date of In-Kind Contribution
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.)				<i>0</i>
(If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)				



ITEMIZED STATEMENT OF OTHER EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Debra L. Matthews		2. REPORT COVERING THE PERIOD		
		FROM: 6-2-96	TO: 7-22-96	
3. TOTAL ITEMIZED OTHER EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount 0	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OTHER EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure Advertising	Amount of Expenditure \$ 500.00	
Last Name/Business Name Marketing Concepts Unlimited			Date of Expenditure	
Address P.O. Box 16613				
City Chattanooga	State TN		Zip Code 37416	Date of Expenditure 7-16-96
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name			Date of Expenditure	
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name			Date of Expenditure	
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name			Date of Expenditure	
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name			Date of Expenditure	
Address				
City	State	Zip Code		
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name			Date of Expenditure	
Address				
City	State	Zip Code		
5. TOTAL ITEMIZED OTHER EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of other expenditures, this amount must be shown in item 19c. of summary.)			\$ 500.00	



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE Debra L. Matthews	2. REPORT COVERING THE PERIOD FROM: <u>6-2-96</u> TO: <u>7-22-96</u>
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	Middle Name	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
Last Name/Organization Name		<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Address		Loan Received For:			
City	State	Zip Code	<input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Other Election (Specify):		

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	City	State
Zip Code	Zip Code	Zip Code	Zip Code
Amount Guaranteed Outstanding		Amount Guaranteed Outstanding	

4. Totals for all Loans (complete on last page of itemized loans) (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 23. on summary page.)	Outstanding Loan Balance (Beginning of Period)	Loans Received	Loan Payments	Outstanding Loan Balance (End of Period)
	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD			
<i>Debra L. Matthews</i>				FROM <i>6-2-96</i>		TO: <i>-7-22-96</i>	
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		<i>\$599.23</i>	<i>\$599.23</i>	<i>0</i>	<i>\$599.23</i>
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							
<i>TN, Valley Signs</i>							
<i>301 French Drive</i>							
<i>Scottsboro</i>	<i>AL</i>	<i>35768</i>					
<i>Yard Signs</i>							
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							
First Name		Middle Name					
Last Name/Business Name							
Address							
City	State	Zip Code					
Description of Obligation							

4. TOTALS				<i>\$599.23</i>	<i>\$599.23</i>	<i>0</i>	<i>\$599.23</i>
(Total from "Outstanding Balance - (End of Period)" column must also be shown in item 24 b on summary page.)							

