



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 4/7/2026 2.a. Candidate or Committee Name: LESLIE SHAFFER
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 5/5/2026
4. Campaign Address: 157 CIRCLEVIEW DR
City: JOHNSON CITY State: TN Zip Code: 37615 Phone: _____
5. Candidate Home Address: 157 Circleview Dr
City: johnson City State: TN Zip Code: 37615 Phone: _____
Candidate Email Address: ljshaffer12@gmail.com
6. Office Sought: (include district number, if applicable) Circuit Court Clerk
7. Name of Political Treasurer (may be candidate): Melissa Steagall-Jones
Political Treasurer Email Address: melissa@bcascpa.com
8. Category or Report: (check one)
☒ First Quarter ☐ Second Quarter ☐ Third Quarter ☐ Fourth Quarter ☐ Pre-Primary ☐ Pre-General
☐ Mid-Year Supplemental ☐ Year-End Supplemental ☐ Runoff Election
9. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
10. Detailed Disclosure: (Check one)
☐ This campaign is exempt from detailed disclosures because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12.d., 12.e., and 12.f.)
☒ 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.
11. 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.

Candidate Signature _____ Date _____ Political Treasurer Signature _____ Date _____
Witness Signature _____ Date _____ Witness Signature _____ Date _____

12. Summary:

a. Balance On Hand Last Report	\$ \$0.00
b. Total Receipts This Period	\$ \$3,820.00
c. Total Disbursements This Period	\$ \$1,023.41
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ \$2,796.59
e. Total Loans Outstanding	\$ \$0.00
f. Total Obligations Outstanding	\$ \$0.00

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: LESLIE SHAFFER

14. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ _____
(Note: Effective January 16, 2023, Unitemized Contributions are capped at \$2,000. See *Instructions* for more information.)
- b. Itemized Contributions (over \$100 from each source this period) \$ \$3,820.00
- c. Loans Received This Reporting Period..... \$ _____
- d. Interest Received This Reporting Period \$ _____
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ \$3,820.00

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,023.41
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ _____
- c. Total Obligation Payments Made This Period..... \$ _____
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ \$1,023.41

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ \$250.64
- c. Total In-Kind Contributions Received This Period \$ \$250.64

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ _____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Tony Middle Name: _____ Last Name: Seaton
Address: 118 E Watauga Ave City: Johnson City State: TN Zip Code: 37601
Occupation: Attorney Employer: Self
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,000.00 Date of Contribution: 1/29/2026 Aggregate This Election: \$ \$1,000.00

Business or Organization Name: _____ **OR**
First Name: Robert Middle Name: Dale Last Name: Ford
Address: 106 Rhudy Lane City: Jonesborough State: TN Zip Code: 37659
Occupation: Retired Employer: N/A
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 1/29/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**
First Name: Auline Middle Name: Joyce Last Name: Ford
Address: 106 Rhudy Lane City: Jonesborough State: TN Zip Code: 37659
Occupation: Retired Employer: N/A
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 1/29/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: Garza Law Firm **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 550 W Main Street Suite 340 City: Knoxville State: TN Zip Code: 37902
Occupation: Law Firm Employer: Garza Law Firm
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$1,900.00 Date of Contribution: 2/9/2026 Aggregate This Election: \$ \$1,900.00

Total Contributions: \$ \$3,000.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,000.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Kimball M Sterling Inc. **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: 125 West Market Street City: Johnson City State: TN Zip Code: 37604

Occupation: Auctions Employer: Kimball M Sterling Inc.

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$200.00 Date of Contribution: 2/9/2026 Aggregate This Election: \$ \$200.00

Business or Organization Name: _____ **OR**

First Name: Cecilia Middle Name: J Last Name: Bogart

Address: 406 Unaka Way City: Erwin State: TN Zip Code: 37650

Occupation: Retired Employer: N/A

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$100.00 Date of Contribution: 2/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Dan Middle Name: _____ Last Name: Brant/Brant Farms

Address: 425 Saylor Hill Rd City: Limestone State: TN Zip Code: 37681

Occupation: Farmer Employer: Self Employed

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 2/25/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Julia Middle Name: _____ Last Name: Hamilton/Hamilton IV

Address: 1780 Old Gray Station Rd City: Gray State: TN Zip Code: 37615

Occupation: Butcher Shop Employer: Hamilton Meats

Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 2/25/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$3,400.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,400.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**

First Name: Danny Middle Name: Mack Last Name: Keys

Address: 416 E Jackson Blvd City: Jonesborough State: TN Zip Code: 37659

Occupation: Retired Employer: N/A

Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ \$100.00 Date of Contribution: 3/13/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**

First Name: Sandra Middle Name: _____ Last Name: Hilton

Address: 451 Telford New Victory Rd City: Telford State: TN Zip Code: 37690

Occupation: Clerical Employer: Gastrointestinal Associates

Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/15/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: Chelsey Middle Name: _____ Last Name: Barnes

Address: 454 Old Embreeville Rd City: Jonesborough State: TN Zip Code: 37659

Occupation: Office Manager Employer: ETSU Physicians

Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/15/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: _____ **OR**

First Name: David Middle Name: _____ Last Name: Campbell

Address: 118 W Market St City: Johnson City State: TN Zip Code: 37604

Occupation: Business Owner Employer: Campbell's Morrell Music

Contribution Received For: ☒ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)

Amount of Contribution: \$ \$50.00 Date of Contribution: 3/17/2026 Aggregate This Election: \$ \$50.00

Total Contributions: \$ \$3,650.00

(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ \$3,650.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Jason Middle Name: _____ Last Name: Shaffer
Address: 157 Circleview Dr City: Johnson City State: TN Zip Code: 37615
Occupation: Sales/Tech Employer: Campbell's Morrell Music
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$50.00 Date of Contribution: 3/17/2026 Aggregate This Election: \$ \$50.00

Business or Organization Name: Herrin McPeak Shepard & Ketchie **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: 515 E Unaka Ave City: Johnson City State: TN Zip Code: 37601
Occupation: Law Firm Employer: Herrin McPeak Shepard & Ketchie
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$100.00 Date of Contribution: 3/26/2026 Aggregate This Election: \$ \$100.00

Business or Organization Name: _____ **OR**
First Name: Anjie Middle Name: _____ Last Name: Meredith
Address: 265 Clarks Creek Rd City: Jonesborough State: TN Zip Code: 37659
Occupation: Payroll Specialist Employer: Nordson Corporation
Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ \$20.00 Date of Contribution: 3/31/2026 Aggregate This Election: \$ \$20.00

Business or Organization Name: _____ **OR**
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ _____ Date of Contribution: _____ Aggregate This Election: \$ _____

Total Contributions: \$ \$3,820.00
(Carry forward to the next page if additional pages of this form are used. If this is the last page of contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH IN-KIND CONTRIBUTION. In-kind contributions totaling more than one hundred dollars (\$100) from any contributor during the period must be reported.

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Shaffer

Address: 157 Circleview Dr City: Johnson City State: TN Zip Code: 37615

Occupation: Deputy Clerk Employer: Washington County Circuit Court

In-Kind Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ \$68.96 In-Kind Contribution Date: 2/8/2026 Aggregate This Election: \$ \$68.96

Description of In-Kind Contribution: business cards

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Shaffer

Address: 157 Circleview Dr City: Johnson City State: TN Zip Code: 37615

Occupation: Deputy Clerk Employer: Washington County Circuit Court

In-Kind Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ \$65.68 In-Kind Contribution Date: 2/22/2026 Aggregate This Election: \$ \$65.68

Description of In-Kind Contribution: business cards & stickers

Business or Organization Name: _____ **OR**

First Name: Leslie Middle Name: _____ Last Name: Shaffer

Address: 157 Circleview Dr City: Johnson City State: TN Zip Code: 37615

Occupation: Deputy Clerk Employer: Washington County Circuit Court

In-Kind Contribution Received For: ☒ Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ \$116.00 In-Kind Contribution Date: 3/4/2026 Aggregate This Election: \$ \$116.00

Description of In-Kind Contribution: t-shirts

Business or Organization Name: _____ **OR**

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Occupation: _____ Employer: _____

In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)

In-Kind Contribution Value: \$ _____ In-Kind Contribution Date: _____ Aggregate This Election: \$ _____

Description of In-Kind Contribution: _____

Total In-Kind Contributions: \$ \$250.64

(Carry forward to the next page if additional pages of this form are used. If this is the last page of in-kind contributions, this amount must be shown in the summary on first page.)

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: LESLIE SHAFFER
2. Reporting Period: Start Date: 1/29/2026 End Date: 3/31/2026
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ \$0.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH EXPENDITURE. **All expenditures must be itemized.** If the expenditure is an in-kind contribution to a candidate, please remember to include the purpose of the expenditure (e.g., postage, printing, etc.) along with the candidate's name in the purpose of the expenditure section.

Business or Organization Name: Foster Signs OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 146 N Lincoln Ave City: Jonesborough State: TN Zip Code: 37615

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: \$ \$388.73 Date of Expenditure: \$ 3/18/2026

Business or Organization Name: Foster Signs OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 146 N Lincoln Ave City: Jonesborough State: TN Zip Code: 37659

Purpose of Expenditure: Campaign Signs

Amount of Expenditure: \$ \$618.68 Date of Expenditure: \$ 3/18/2026

Business or Organization Name: Bank of Tennessee OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 501 E Jackson Blvd City: Jonesborough State: TN Zip Code: 37659

Purpose of Expenditure: Bank Maintenance Fees February 2026

Amount of Expenditure: \$ \$8.00 Date of Expenditure: \$ 2/27/2026

Business or Organization Name: Bank of Tennessee OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: 501 E Jackson Blvd City: Jonesborough State: TN Zip Code: 37659

Purpose of Expenditure: Bank Maintenance Fees March 2026

Amount of Expenditure: \$ \$8.00 Date of Expenditure: \$ 3/31/2026

Business or Organization Name: _____ OR

First Name: _____ Middle Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Purpose of Expenditure: _____

Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

Total Expenditures: \$ \$1,023.41

(Carry forward to the next page if additional pages of this form are used. If this is the last page of expenditures, this amount must be shown in the summary on first page.)