CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	TE OF REPORT 2.a. NAME OF CANDIDATE OR COMMITTEE								
04/23/2018	04/23/2018 Scott Langford								
2.b. IF COMMITTEE, NAME OF CANE	DIDATE	3. ELECTION DATE							
				August 2	, 2018				
4.a. CAMPAIGN ADDRESS AND PHO Street or Rural Route	·-		Ctata	Zin Cada	Dhana				
_	. City	•0	State	Zip Code	Phone				
1260 Twelve Stones Cro 4.b. CANDIDATE'S HOME ADDRESS		sville	TN	37072	(615) 957-6109				
Street or Rural Route	City		State	Zip Code	Phone				
5. OFFICE SOUGHT (include district	number, if applicable)	6. NAME (OF POLITICAL	TREASURER (ma	y be candidate)				
District 11 County Com	missioner	Scott	Langford						
7. CATEGORY OR REPORT (Check of the control of the	ne) THIRD FOURTH QUARTER QUARTER	IXI PRE- PRIMARY	PRE- GENERAL	MID-YEAR					
8.a. BEGINNING DATE OF REPORTING F	PERIOD			ORTING PERIOD					
April 1, 2018		April	21, 2018	3					
9. (Check one)				•					
b. X This campaign is required t	r this reporting period. (Con	nplete items 12d. Josure because	, 12e. and 12f.)	,				
I/we do solemnly swear or affirm accurate accounting of campaign Financial Disclosure Act. Addition benefit of the candidate or for any signature of candidate.	contributions and expenditure nally, I/we swear or affirm that	res required to be at no campaign c	e reported by the contributions has federal internal	ne candidate comm ve been expended	ittee by the Campaign for the personal financial				
11. WITNESS SIGNATURE					_				
Sefficial Protesignature of witness	4/24/2 date	218 <u> </u>	effey sight	T. Po	<u>tz 4/24/2018</u>				
12. SUMMARY									
a. BALANCE ON HAND LAST RE	PORT	=D		\$ \$2589,43					
b. TOTAL RECEIPTS THIS PERIOR	· FIL'	PJ	Λ.	\$ \$1500.00					
c. TOTAL DISBURSEMENTS THIS	PERIODA,M	42018	••••••	\$ \$1888.99					
d. BALANCE ON HAND (12.a. p	lus 12.b. minus 12.c.)	COUNTY	t⊙N		\$ _2.200.44				
e. TOTAL LOANS OUTSTANDING	SUN.	COMMISS			\$\$0.00				
f. TOTAL OBLIGATIONS OUTST/	ANDING				\$ \$0.00				

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVE	RING THE PERIOD			
Scott Langford		FROM: 04/01/2018				
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period	l)	\$\$100.00	_			
b. Itemized Contributions (over \$100 from each source this period)		\$1,400.00	_			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a.		.\$_\$1,500.00_				
16. LOANS RECEIVED THIS REPORTING PERIOD		.\$\$0,00				
17. INTEREST RECEIVED THIS REPORTING PERIOD			.\$_\$0.00			
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12	b.)		.\$\$1,500.00			
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, o	asoline)			
		,	•			
Door Knocking \$	\$150.00					
						
		_				
						
		_				
		_				
		_				
\$						
\$						
Total of Expenditures (\$100 or less each payee)		\$_150.00	_			
b. Itemized Expenditures (Over \$100 each payee this period)		\$ <u>\$1.738.99</u>	-			
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and	19.b.)		\$ 1.888.99			
20. LOAN REPAYMENTS MADE THIS PERIOD			\$ 0.00			
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item	12.c.)		\$ <u>1.888.99</u>			
22.IN-KIND CONTRIBUTIONS	-					
a. Unitemized in-kind contributions (\$100 or less from each source this pe	eriod)	\$ 0.00	-			
b. Itemized in-kind contributions (over \$100 from each source this period)\$ 0.00						
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22	.a. and 22.b.)	•••••	\$ _0.00			
23. OBLIGATIONS						
a. Unitemized Obligations Outstanding (\$100 or less each)		\$_0.00_	-			
b. Itemized Obligations Outstanding (Over \$100 each)		\$ _0.00	•			
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be	shown i item 1	2.f.)	.\$0.00			



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	ING THE PERIOD								
Scott Langford	TO: 04/21/2018								
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	Amount \$0								
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)									
First Name	Middle Nan		Contribution Received For:						
Last Name/Organization Name	<u> </u>	.	☐ ☑ Primary Election ☐	General Election					
Tennessee Realtors Political Action Comm	ittee				\$200.00				
Address		Runoff (Local Election	ns Only)						
901 19th Avenue South City	Zip Code	Date of Contribution	Date of Contribution						
Nashville	1								
Occupation Regi Estate			0.440.440010						
Employer			04/06/2018		\$200.00				
Real Estate									
First Name	Middle Na	ne	Contribution Received For		Amount of Contribution				
Jeff	Į.		Type	General Election					
Last Name/Organization Name Cordel			Primary Election	LI General Election	\$200.00				
Address			Runoff (Local Election	ns Only)					
404 Buffalo Run		1			• • The Floring				
City Goodlettsville	State TN	Zip Code 37072	Date of Contribution		Aggregate This Election				
Occupation	<u> </u>				\$200.00				
Administrator			04/07/2018		\$200.00				
Employer									
Goodlettsville Help Center		Contribution Received For		Amount of Contribution					
First Name Charles	ne	Contribution Received For	•	Amount of Considuon					
Last Name/Organization Name	<u> </u>		Primary Election	General Election					
Hagood				\$500.00					
Address 225 S. Thompson Ln			Runoff (Local Electio	ns Only)					
City	State	Zip Code	Date of Contribution		Aggregate This Election				
Goodlettsville	TN	37072							
Occupation					\$500.00				
Self-Employed Employer			04/09/2018	04/09/2018 \$50					
Self-Employed									
First Name	Middle Na	me	Contribution Received For:		Amount of Contribution				
Kara				7.0					
Last Name/Organization Name Garrett			Primary Election L	General Election	\$500.00				
Address			Runoff (Local Election	Runoff (Local Elections Only)					
1100 Willis Branch Rd	<u>,</u>		· ·						
City Goodlettsville	State TN:	Zip Code 37072	Date of Contribution		Aggregate This Election				
Occupation									
Nashville Fertility Center		04/14/2018		\$500.00					
Employer Registered Nurse									
5. TOTAL ITEMIZED CONTRIBUTIONS									
(Carry forward to item 3. of next page if additional pages	of this form	are used \			\$1,400.00				

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COI	MMITTEE		· · · · · · · · · · · · · · · · · · ·		2. REPORT COVER	ING THE PERIOD			
Scott Langford	TO: 04/21/18								
						Amount \$0.00			
3. TOTAL ITEMIZED IN-KIND CON			<u> </u>			<u> </u>			
4. COMPLETE THE APPROPRIATE IT	EMS FOR EA	CH ITEMIZ	ED IN-KIND CONTRIBU	TION (in-kind contributions totaling i	more than \$100 from any con	tributor during the period)			
First Name		Middle Nam	ne	In-Kind Contribution Received	Value of In-Kind Contribution				
Last Name/Organization Name		·	· · · · · · · · · · · · · · · · · · ·	Runoff (Local Election	General Election				
Address				Date of In-Kind Contribution	<u></u> ,	Aggregate this Election			
City	State Zip Code					1			
Occupation	Occupation Employer								
First Name	•	Middle Nam	ne	In-Kind Contribution Receive	d For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name		<u> </u>		Primary Election Runoff (Local Election					
Address				Date of tn-Kind Contribution					
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer								
First Name Middle Name				In-Kind Contribution Received	d For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Elections Only)					
Address				Dale of In-Kind Contribution		Aggregate this Election			
City	Stake Zip Code		Description of In-Kind Contribution						
Occupation	upation Employer								
First Name		Middle Nam	ne	In-Kind Contribution Received	_	Value of In-Kind Contribution			
Last Name/Organization Name		!		Primary Election	General Election	ļ			
			<u> </u>	Runoff (Local Election	ns Only)				
Address				Date of In-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer								
First Name		Middle Nam	9	In-Kind Contribution Receive	ed For: General Election	Value of In-Kind Contribution			
Last Name/Organization Name		•	<u> </u>	Runoff (Local Election	s Only)				
Address	•			Date of in-Kind Contribution		Aggregate this Election			
City		State	Zip Code	Description of In-Kind Contribution					
Occupation	Employer	L	<u> </u>			i			
5. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIO	NS							
(Carry forward to item 3. of next page if an (If this is the last page of in-kind contribut	\$0.00								
SS-1128 (Rev. 2/06)	erio, sua milital	a macus all	Serial Restrictor of Summilary	-/ Pag	e4 of7	RDA 1159			
(Nev. 2100)				rag	<u> </u>	RUM 1105			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	RING THE PERIOD					
Scott Langford	 		<u>.</u>	FROM:04/01/18	TO: 04/21/18	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU				<u> </u>	Amount \$0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	IZED EXPENDITURE (6	expenditures totaling more than \$100	to any payee during the per	riod)	
First Name	Middle Nar	ne	Purpose of Expenditure	rpose of Expenditure		
Last Name/Business Name Courtney Meadows			Door Knocking/Cam	npaign Work	\$135.00	
Address						
City White House	State TN	Zip Code 37188				
First Name	тіе	Purpose of Expenditure	Amount of Expenditure			
Hannah Richards		Door Knocking/Car	mpaign Work	\$135.00		
City Goodlettsville	State TN	Zip Code 37072				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name Nation Builder Address		Website/Campaiç	\$257.00			
City	State CA	Zip Code	 			
Los Angeles First Name						
Last Name/Business Name			- albana at Expositation		Amount of Expenditure	
Fox Printing			ļ	\$940.16		
Address			Mailers/Postage			
City	State	Zip Code				
First Name	Middle Nan	1	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name RoboCent	•					
Address 2129 General Booth Blvd			Robocalls/Voter (\$271.83		
City Virginia Beach	State VA	Zip Code 23454				
First Name	Middle Nan		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 pages)	of this form	are used)			\$1,738.99	
(If this is the last page of expenditures, this amount mus	\$1,730.77					

ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE	OR COMMITTEE								COVER	ING THE PERIOD
C	-1							ROM:		TO:
Scott Langfor 3. COMPLETE THE APPR	POPRIATE ITEMS	FOR EACH I	TEMI7	TED LOAN	Toons totaling	man than \$10	O from any sour	4/01/18	ncinal)	04/21/18
		ONEAGIT	LIVIT	ID LOAN (ioans totaling i	note utar a to	V HOIT arry South	e daning me pi	si louj	•
Complete the Following for th				T 2 ()					1 " A V	
First Name	Middle Na	me			standing Loan Balance Loans Loan Outstanding Loan Bala eginning of Period) Received Payments (End of Period)					
Last Name/Organization Name										
						<u> </u>				
Address				Loan Receive		_		Date of Lo	an-	
City	State	Zip Code		J LLI Primar)	Primary Election General Election					
		<u> </u>		Runoff	lunoff (Local Elections Only)					
	List All Endo	rsers or Guara	intors ƙ	or Above Loa	n (If more spa	ice is neede	d please attac	h a page)	·	
First Name		Middle Name	!		First Name				Middle	Name
Last Name/Organization Name					Last Name/Or	ganization Na	me			
Address	· · · · · · · · · · · · · · · · · · ·				Address					
City	•	State	Zip Ci	ode	City	<u>.</u> ,			State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	inteed Outstan	nding		1.	i
First Name		Middle Name	,		First Name Middle Name				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 Guara	inteed Outstar	ıding			
First Name		Middle Name)		First Name				Middi	e Name
Last Name/Organization Name					Last Name/Organization Name					
Address					Address				•	
City		State	Zip Ci	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding		·	
First Name		Middle Name	:		First Name				Middle	Name
Last Name/Organization Name				•	Last Name/On	ganization Na	me		· · · · · · ·	
Address					Address					
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	ding			
4. Totals for all Loans (com (Total loans received should also	be shown in item 16. on	summary page.)		Outstanding L (Beginning		Loans Received	Loa Payn		Outstanding Loan Bala (End of Period)
(Total loan payments should also (Total outstanding loan balance sl										

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD						
Scott Langford					OROM: 04/01/18 OO: 04/21/18		
COMPLETE THE APPROPRIATE ITEMS ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting person/vendor.)	n \$100 ow		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
First Name	Middle Name						
Last Name/Business Name							
Address							
City	State	Zip Code	-				
Description of Obligation	. L.	<u> </u>				<u></u>	
First Name	Middle Na	me					
Last Name/Business Name	1		1	-			
Address			1				
City	State	Zip Code					
Description of Obligation	1					I	
First Name	Middle Name						
Last Name/Business Name	<u></u>		-				
Address	Address						
City	State	Zip Code					
Description of Obligation	•		·				
First Name	Middle Nar	ne					
Last Name/Business Name	1		-				
Address			1				
City	State	Zip Code					
Description of Obligation		<u> </u>		·		<u>. </u>	
First Name	Middle Nar	ne					
Last Name/Business Name	1		-				
Address							
City	State	Zip Code	-				
Description of Obligation	·	•					
TOTALS (Total from Outstanding Balance - (End of Period) or in item 23b. on summary page.)	olumn musi	also be shown				\$0.00	