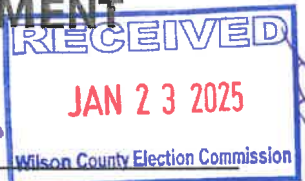




CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees



1. Date: 1/23/25 2.a. Candidate or Committee Name: Scott Hefner
 2.b. If Committee, Name of Candidate: _____ 3. Election Date: _____
 4. Campaign Address: 25 E. Hill St.
 City: MT Juliet State: TN Zip Code: 37122 Phone: 615 7726892
 5. Candidate Home Address: Same
 City: _____ State: _____ Zip Code: _____ Phone: _____
 Candidate Email Address: _____
 6. Office Sought: (include district number, if applicable) Dist 3 Commissioner, MT Juliet
 7. Name of Political Treasurer (may be candidate): Scott Hefner
 Political Treasurer Email Address: Scott@scotthefner.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

9. Reporting Period: Start Date: OCT 27 2024 End Date: JAN 15 2025

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.

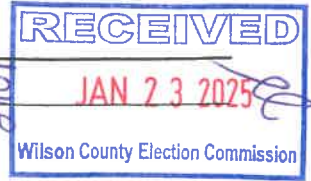
11. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. 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.

	<u>1/23/25</u>		<u>1/23/25</u>
Candidate Signature	Date	Political Treasurer Signature	Date
	<u>1/23/25</u>		<u>1/23/25</u>
Witness Signature	Date	Witness Signature	Date

12. Summary:

a. Balance On Hand Last Report.....	\$ <u>429.10</u>
b. Total Receipts This Period.....	\$ <u>7,100.00</u>
c. Total Disbursements This Period.....	\$ <u>6,579.78</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.).....	\$ <u>949.32</u>
e. Total Loans Outstanding.....	\$ <u>8,264.70</u>
f. Total Obligations Outstanding.....	\$ _____

SUMMARY PAGE - CANDIDATE



13. Name of Candidate or Committee: Scott Hefner

14. Reporting Period: Start Date: 10/27/24 End Date: 1/15/25

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) \$ 5,800
- c. Loans Received This Reporting Period..... \$ 1,300
- 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.) \$ 7,100

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ 6,579.78
(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.)..... \$ 6,579.78

17. In-Kind Contributions:

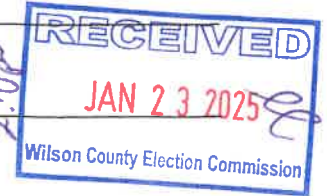
- a. Unitemized In-Kind Contributions Received This Period \$ _____
- b. Itemized In-Kind Contributions Received This Period \$ _____
- c. Total In-Kind Contributions Received This Period \$ _____

18. Obligations:

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

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Scott Hafner
2. Reporting Period: Start Date: 10/27/24 End Date: 1/15/25
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 0



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Darin Cunningham (Christina) OR
First Name: Darin Middle Name: _____ Last Name: Cunningham
Address: 1401 Farrview Dr City: MT Juliet State: TN Zip Code: 37122
Occupation: Real Estate Employer: SELF
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,000 Date of Contribution: 11/1/24 Aggregate This Election: \$ 6,000

Business or Organization Name: _____ OR
First Name: Kenneth Middle Name: _____ Last Name: Powers
Address: 1982 Providence Pkwy City: MT Juliet State: TN Zip Code: 37122
Occupation: Real Estate #256 Employer: SELF
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1,800 Date of Contribution: 11/1/24 Aggregate This Election: \$ 1,800

Business or Organization Name: K2 Development LLC OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 2019 Fishing Creek City: Nolensville State: TN Zip Code: 37135
Occupation: Development Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11/1 Aggregate This Election: \$ 500

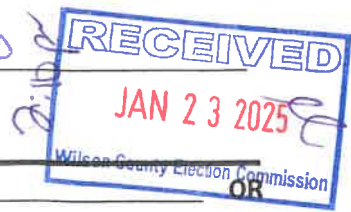
Business or Organization Name: _____ OR
First Name: Helen Middle Name: M Last Name: Kasakovic S
Address: 1516 Candlelit Cove City: MT Juliet State: TN Zip Code: 37122
Occupation: Retired Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11/1/24 Aggregate This Election: \$ 500

Total Contributions: \$ 3,800

(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: Scott Hefner
2. Reporting Period: Start Date: 10/27/24 End Date: 1/15/25
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 3,800



COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: Browning Properties, LLC
First Name: _____ Middle Name: _____ Last Name: _____
Address: PO Box 2725 City: MT Juliet State: TN Zip Code: 37122
Occupation: Developer Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11/1 Aggregate This Election: \$ 500

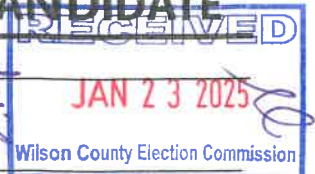
Business or Organization Name: _____ OR
First Name: Bruce & Susan Middle Name: _____ Last Name: Campbell
Address: 2914 War Paint Ct City: Murfreesboro State: TN Zip Code: 37127
Occupation: Retire Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 1000 Date of Contribution: 11/1 Aggregate This Election: \$ 1000

Business or Organization Name: _____ OR
First Name: Mark Middle Name: _____ Last Name: McDonald
Address: 115 Jackson City: Nashville State: TN Zip Code: 37205
Occupation: Development Employer: Self
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 500 Date of Contribution: 11/1 Aggregate This Election: \$ 500

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: \$ ~~2100~~ 5,800
(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: NA
2. Reporting Period: Start Date: _____ End Date: _____
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ _____

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: _____ 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: _____

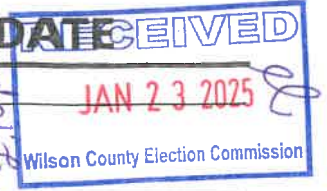
Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Occupation: _____ Employer: _____
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution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

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: _____

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: \$ _____
(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: Scott Hetner
2. Reporting Period: Start Date: 10/27/24 End Date: 1/15/25
3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 0

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: Thrive Holdings OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 819 2nd Ave S. City: Nashville State: TN Zip Code: 37210
Purpose of Expenditure: Fundraising Event
Amount of Expenditure: \$ 1,966.50 Date of Expenditure: \$ 10/30/24

Business or Organization Name: Barrel House Rest. & Bar OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: 3950 N. Mt Juliet Rd City: Mt Juliet State: TN Zip Code: 37122
Purpose of Expenditure: Fundraising Event (Dinner)
Amount of Expenditure: \$ 4,613.28 Date of Expenditure: \$ 10/29/24

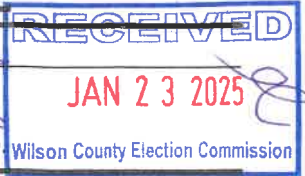
Business or Organization Name: _____ OR
First Name: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Purpose of Expenditure: _____
Amount of Expenditure: \$ _____ Date of Expenditure: \$ _____

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: \$ _____

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: \$ 6,579.78
(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.)

ITEMIZED STATEMENT OF LOANS - CANDIDATE



1. Candidate or Committee Name: Scott Hefner
 2. Reporting Period: Start Date: 10/27/24 End Date: 1/15/25
 3. Complete the appropriate items for each loan totaling more than one hundred dollars (\$100)

Complete the following for the source of each loan received and/or outstanding during the period.

Business or Organization Name: _____ OR
 First Name: Scott Cheri Middle Name: _____ Last Name: Hefner
 Address: 75 East Hill St City: MT Juliet State: TN Zip Code: 37122
 Outstanding Loan Balance (Beginning) \$ 6,964.71
 Loans Received \$ 1,300.00
 Loan Payments \$ _____
 Outstanding Loan (End)..... \$ 8,264.71
 Loan Received For: Primary Election General Election Runoff (Local Elections Only)
 Date of Loan: _____

List all endorsers or guarantors for above loan (If more space is needed, please attach additional pages.)

Business or Organization Name: _____ OR
 First Name: Scott Middle Name: Alan Last Name: Hefner
 Address: 75 E. Hill St City: MT Juliet State: TN Zip Code: 37122
 Amount Guaranteed Outstanding: \$ 4,132.35

Business or Organization Name: _____ OR
 First Name: Cheri Middle Name: Y Last Name: Hefner
 Address: 75 E. Hill St City: MT Juliet State: TN Zip Code: 37122
 Amount Guaranteed Outstanding: \$ 4,132.35

Business or Organization Name: _____ OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Business or Organization Name: _____ OR
 First Name: _____ Middle Name: _____ Last Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Amount Guaranteed Outstanding: \$ _____

Totals for all loans (Complete this page for each outstanding loan during the period. Complete this section only on last page of loans. Total loans received and loan payments should be shown on summary page. Outstanding loan balance should be shown on front page.)

Balance (Beginning) \$ 6,964.71
 Loans Received \$ 1,300.00
 Loan Payments \$ _____
 Outstanding Loan (End)..... \$ 8,264.71