



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

1. Date: 7/15/2026 2.a. Candidate or Committee Name: Scott McCormick
- 2.b. If Committee, Name of Candidate: _____ 3. Election Date: 11/9/2023
4. Campaign Address: 1356 Rainsong Cove S
City: Cordova State: TN Zip Code: 38016 Phone: 9012897490
5. Candidate Home Address: 1356 Rainsong Cove S
City: Cordova State: TN Zip Code: 38016 Phone: 9012897490
Candidate Email Address: scottemccormick@gmail.com
6. Office Sought: (include district number, if applicable) Memphis City Council, Dist. 2
7. Name of Political Treasurer (may be candidate): Nick Scully
Political Treasurer Email Address: votescottemccormick@gmail.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: 1/16/2026 End Date: 6/30/2026
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	\$ <u>\$20,685.13</u>
b. Total Receipts This Period	\$ <u>\$0.00</u>
c. Total Disbursements This Period	\$ <u>\$1,100.00</u>
d. Balance On Hand (12.a. plus 12.b. minus 12.c.)	\$ <u>\$19,585.13</u>
e. Total Loans Outstanding	\$ <u>\$2,794.06</u>
f. Total Obligations Outstanding	\$ <u>\$2,794.06</u>

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Scott McCormick

14. Reporting Period: Start Date: 1/16/2026 End Date: 6/30/2026

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) \$ _____
- 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.) \$ _____

16. Disbursements:

- a. Total Expenditures (other than loan payments)..... \$ \$1,100.00
(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.)..... \$ \$1,100.00

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.) \$ \$2,794.06

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Scott McCormick
2. Reporting Period: Start Date: 1/16/2026 End Date: 6/30/2026
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: Committee to Elect Chaundra Lewis **OR**

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

Address: PO Box 458 City: McDonough State: GA Zip Code: 30253

Purpose of Expenditure: Contribution

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 2/21/2026

Business or Organization Name: Republican Party of Shelby County **OR**

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

Address: 1779 Kirby Parkway #1-63 City: Memphis State: TN Zip Code: 38138

Purpose of Expenditure: Contribution

Amount of Expenditure: \$ \$100.00 Date of Expenditure: \$ 2/21/2026

Business or Organization Name: Friends of Ed Apple **OR**

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

Address: PO Box 38220 City: Germantown State: TN Zip Code: 38183

Purpose of Expenditure: Contribution

Amount of Expenditure: \$ \$250.00 Date of Expenditure: \$ 5/5/2026

Business or Organization Name: John Deberry for Mayor **OR**

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

Address: 725 W Snowden Circle City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Contribution

Amount of Expenditure: \$ \$500.00 Date of Expenditure: \$ 5/28/2026

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: \$ \$1,100.00

(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 McCormick
2. Reporting Period: Start Date: 1/16/2026 End Date: 6/30/2026
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 Middle Name: _____ Last Name: McCormick

Address: 1356 Rainsong Cove S City: Cordova State: TN Zip Code: 38016

Outstanding Loan Balance (Beginning) \$ \$2,794.06

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$2,794.06

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

Date of Loan: 6/30/2026

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

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: \$ _____

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) \$ \$2,794.06

Loans Received \$ \$0.00

Loan Payments \$ \$0.00

Outstanding Loan (End) \$ \$2,794.06

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Scott McCormick

2. Reporting Period: Start Date: 1/16/2026 End Date: 6/30/2026

3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____

First Name: Scott Middle Name: _____

Last Name: McCormick

Address: 1356 Rainsong Cove S

City: Cordova

State: TN Zip Code: 38016

Description of
Obligation:

**Credit Card charges to be
reimbursed**

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$2,794.06

\$0.00

\$0.00

\$2,794.0

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of
Obligation:

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$

\$

\$

\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of
Obligation:

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$

\$

\$

\$

Business Name: _____

First Name: _____ Middle Name: _____

Last Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Description of
Obligation:

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$

\$

\$

\$

TOTALS

(Carry forward to the next page if additional pages of this form are used. If this is the last page of obligations, the Total from "Outstanding Balance - (Period End)" column must also be shown on the summary on first page.)

Outstanding
Balance (Period
Beginning)

Debt
Incurred
This Period

Payments
This Period

Outstanding
Balance
(Period End)

\$2,794.06

\$0.00

\$0.00

\$2,794.06