



CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates

For Single-Candidate Committees

ORIGINAL DOCUMENT
PHOTOCOPY CANNOT BE
ACCEPTED FOR 25-102

1. Date: 04/28/2026 2.a. Candidate or Committee Name: Lagina Mitchell Scott

2.b. If Committee, Name of Candidate: _____ 3. Election Date: 05/05/2026

4. Campaign Address: 4455 Boyce Road

City: Memphis State: TN Zip Code: 38117 Phone: 9014820836

5. Candidate Home Address: 4455 Boyce Road

City: Memphis State: TN Zip Code: 38117 Phone: 9014820836

Candidate Email Address: lagina4cc13@gmail.com

6. Office Sought: (include district number, if applicable) Shelby County Commisioner. Dist. 13

7. Name of Political Treasurer (may be candidate): Antonio Futch

Political Treasurer Email Address: afutch@kherronassociates.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: 04/01/2026 End Date: 04/25/2026

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.

<u>[Signature]</u> Candidate Signature	<u>4/28/26</u> Date	<u>[Signature]</u> Political Treasurer Signature	<u>4/28/2026</u> Date
<u>[Signature]</u> Witness Signature	<u>4/28/26</u> Date	<u>[Signature]</u> Witness Signature	<u>4/28/2026</u> Date

12. Summary:

- | | |
|---|-------------|
| a. Balance On Hand Last Report | \$ 999.55 |
| b. Total Receipts This Period | \$ 1,494.20 |
| c. Total Disbursements This Period | \$ 2,078.41 |
| d. Balance On Hand (12.a. plus 12.b. minus 12.c.) | \$ 415.34 |
| e. Total Loans Outstanding | \$ 0 |
| f. Total Obligations Outstanding | \$ 0 |

SUMMARY PAGE - CANDIDATE

13. Name of Candidate or Committee: Lagina Mitchell Scott

14. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026

15. Receipts:

- a. Unitemized Contributions (\$100 or less from each source this period) \$ 344.20
(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) \$ 1,150
- c. Loans Received This Reporting Period..... \$ 0
- d. Interest Received This Reporting Period \$ 0
- e. Total Receipts (add 15.a., 15.b., 15.c., and 15.d.) (must be shown in item 12.b.) \$ 1,494.20

16. Disbursements:

- a. Total Expenditures (other than loan payments) \$ 2,078.41
(Note: Effective January 16, 2023, all expenditures must be itemized.)
- b. Loan Repayments Made This Period \$ 0
- c. Total Obligation Payments Made This Period..... \$ 0
- d. Total Disbursements (add 16.a. and 16.b.) (must be shown in item 12.c.)..... \$ 2,078.41

17. In-Kind Contributions:

- a. Unitemized In-Kind Contributions Received This Period \$ 0
- b. Itemized In-Kind Contributions Received This Period \$ 2,850
- c. Total In-Kind Contributions Received This Period \$ 2,850

18. Obligations:

- a. Total Obligations Outstanding (must be shown in item 12.f.) \$ 0

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lagina Mitchell Scott
2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026
3. Total in-kind contributions from preceding page (enter \$0 if first page) \$ 0

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: Cesar Middle Name: _____ Last Name: Duben
Address: _____ City: Memphis State: TN Zip Code: _____
Occupation: Not Provided Employer: Not Provided
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 2,400.00 In-Kind Contribution Date: 04/01/2026 Aggregate This Election: \$ 2,400
Description of In-Kind Contribution: Campaign Service, Materials, and Repairs for Lagina Mithcell Scott

Business or Organization Name: _____ **OR**
First Name: Kasandra Middle Name: _____ Last Name: Smith
Address: 4533 Long Creek Road City: Memphis State: TN Zip Code: 38125
Occupation: Law Enforcement Employer: MPD
In-Kind Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
In-Kind Contribution Value: \$ 450.00 In-Kind Contribution Date: 04/03/2026 Aggregate This Election: \$ 450.00
Description of In-Kind Contribution: Campaign Poles for Lagina Mithcell Scott

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: \$ 2,850.00

(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: Lagina Mitchell-Scott

2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026

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: Canva OR

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

Address: 3212 East Cesar Chavez Street City: Austin State: TX Zip Code: 78702

Purpose of Expenditure: Digital Services

Amount of Expenditure: \$ 43.90 Date of Expenditure: 04/24/2026

Business or Organization Name: Apple Com OR

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

Address: One Apple Parkway City: Cupertino State: CA Zip Code: 95014

Purpose of Expenditure: Digital Services

Amount of Expenditure: \$ 43.96 Date of Expenditure: 04/22/2026

Business or Organization Name: Mississippi Blvd Church OR

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

Address: 70 N Bellevue Blvd City: Memphis State: TN Zip Code: 38104

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 25.00 Date of Expenditure: 04/20/2026

Business or Organization Name: Campaign Services OR

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

Address: 4455 Boyce Road City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Campaign Services for Lagina Mitchell Scott

Amount of Expenditure: \$ 1,500.00 Date of Expenditure: 04/08/2026

Business or Organization Name: Fed Ex Office and Print OR

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

Address: 3295 Poplar Ave Suite 109 City: Memphis State: TN Zip Code: 38111

Purpose of Expenditure: Digital Services

Amount of Expenditure: \$ 300.00 Date of Expenditure: 04/15/2026

Total Expenditures: \$ 1,912.86

(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 EXPENDITURES - CANDIDATE

1. Candidate or Committee Name: Lagina Mitchell-Scott

2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026

3. Total campaign expenditures from preceding page (enter \$0 if first page) \$ 1,912.86

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: Amazon OR

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

Address: 410 Terry Ave N City: Seattle State: WA Zip Code: 98109

Purpose of Expenditure: Digital Services

Amount of Expenditure: \$ 7.65 Date of Expenditure: 04/17/2026

Business or Organization Name: USPS OR

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

Address: 555 S BB King Blvd City: Memphis State: TN Zip Code: 38101

Purpose of Expenditure: Shipping and Packaging Services

Amount of Expenditure: \$ 107.00 Date of Expenditure: 04/10/2026

Business or Organization Name: Brown Missionary Baptist Church OR

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

Address: 980 Stateline Rd E City: Southaven State: MS Zip Code: 38671

Purpose of Expenditure: Donation

Amount of Expenditure: \$ 50.90 Date of Expenditure: 04/07/2026

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: _____

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: \$ 2,078.41

(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.)

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. Candidate or Committee Name: Lagina Mitchell Scott
2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026
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: _____ **OR**
First Name: Monica Middle Name: _____ Last Name: Smith
Address: 4387 Whispering Lane Drive City: Collierville State: TN Zip Code: 38017
Occupation: Retired Educator Employer: _____
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 04/01/2026 Aggregate This Election: \$ 100.00

Business or Organization Name: _____ **OR**
First Name: Beverly Middle Name: _____ Last Name: Robertson
Address: 970 Tranquil Lane City: Memphis State: TN Zip Code: 38116
Occupation: Chief Operating Officer Employer: Trust Marketing
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 04/01/2026 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ **OR**
First Name: Ursula Middle Name: _____ Last Name: Woods
Address: 6439 Cody Cove City: Olive Branch State: MS Zip Code: 38654
Occupation: Attorney Employer: Self-Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 04/06/2026 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ **OR**
First Name: Ruby Middle Name: _____ Last Name: Powell-Dennis
Address: 643 Rocky Field Drive City: Cordova State: TN Zip Code: 38018
Occupation: Executive Director Employer: Elect Black Women PAC
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 04/09/2026 Aggregate This Election: \$ 100.00

Total Contributions: \$ 700.00

(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: Lagina Mitchell Scott
2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026
3. Total campaign contributions from preceding page (enter \$0 if first page) \$ 700.00

COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION.

Business or Organization Name: _____ **OR**
First Name: Kasandra Middle Name: _____ Last Name: Smith
Address: 4553 Long Creek Road City: Memphis State: TN Zip Code: 38125
Occupation: Law Enforcement Employer: MPD
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 04/11/2026 Aggregate This Election: \$ 550.00

Business or Organization Name: _____ **OR**
First Name: Shirley Middle Name: _____ Last Name: Hillard
Address: PO Box 261 City: Eads State: TN Zip Code: 38028
Occupation: Not Employed Employer: Not Employed
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 100.00 Date of Contribution: 04/20/2026 Aggregate This Election: \$ 250.00

Business or Organization Name: _____ **OR**
First Name: Jeremy Middle Name: _____ Last Name: Simpson
Address: 8112 White Wing Cv W City: Arlington State: TN Zip Code: 38002
Occupation: IT Consultant Employer: Systems Technologies, Inc.
Contribution Received For: Primary Election General Election Runoff (Local Elections Only)
Amount of Contribution: \$ 250.00 Date of Contribution: 04/20/2026 Aggregate This Election: \$ 250.00

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

Total Contributions: \$ 1,150.00

(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 LOANS - CANDIDATE

1. Candidate or Committee Name: Lagina Mitchell Scott
2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026
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: _____ Middle Name: _____ Last Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Outstanding Loan Balance (Beginning) \$ _____
Loans Received \$ _____
Loan Payments \$ _____
Outstanding Loan (End)..... \$ _____
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: _____ 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) \$ 0
Loans Received \$ 0
Loan Payments \$ 0
Outstanding Loan (End)..... \$ 0

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. Candidate or Committee Name: Lagina Mitchell Scott
2. Reporting Period: Start Date: 04/01/2026 End Date: 04/25/2026
3. Complete the appropriate items for each obligation owed to a person/vendor at the end of the reporting period.

Business Name: _____ First Name: _____ Middle Name: _____ Last Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Description of Obligation:</td> <td colspan="3"></td> </tr> <tr> <td>Outstanding Balance (Period Beginning)</td> <td>Debt Incurred This Period</td> <td>Payments This Period</td> <td>Outstanding Balance (Period End)</td> </tr> <tr> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> </table>	Description of Obligation:				Outstanding Balance (Period Beginning)	Debt Incurred This Period	Payments This Period	Outstanding Balance (Period End)	\$	\$	\$	\$
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	Payments This Period	Outstanding Balance (Period End)
\$0	\$0	\$0	\$0