### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on	20180	C0493				port		CAND	IDATE	<b>√</b>	СО	MMITTEE		LOBI	BYIST		
Name of Filing C	committee	e, Candida	ate or Lo	obbyist:		WA	GNE	R,SC	OTT R									
Street Address:																		
City:									State:				Zip Code	e: 17	403			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		POST-	3. <b>X</b>		AMENDME REPORT?	NT	Yes	<b>√</b> No	)	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRI	E-	5.	30 DA		POST-	6.		TERMINAT REPORT?	TION	Yes	No	)	<b>√</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2018					NG METH CHECK C				PAPER		⋈	DISKI	TTE	
Name of Office S	L Sought by	Candidat	:e:						DATE (	OF ELE	CTION		District Number	Office Code	Par	ty Code	Cour	
	,								МО	DAY	YEAR	₹	-1	GOV	REP	1	67	
GOVERNOR									1:	ı	6 2	018		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		and	МО	DAY	YEAR	2			мо	DAY	YEAF	₹	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			5 1	2	018	T	0	(	5	4 2	018						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$		(1,5	25,353.	.52)						
B. Total Monet	ary Contri	ibutions A	And Rec	eipts (From	n Sche	dule	e I)	\$			(	0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$		(1,5	25,353.	.52)						
D. Total Expend	ditures (F	rom Sche	edule II	I)				\$			139,870	.20						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$		(1,6	65,223.	72)						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le I	I)	\$			0	.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	/)			\$			C	0.00						
					AFF	·ID	AVI	T SE	CTION									
PART I - If this is		•	•	_														
I swear (or affirm) correct and complete		eport, incli	uding the	attached sc	hedule	s file	ed on	paper	or by elec	tronic m	edium, ar	e to t	he best of	my know	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed befo	ore me this		20							Sign	ature	of Person	Submitt	ing Rep	ort		_
		Signatur	·e					_					Printe	ed Name				
My Commission Ex	opires .							_					Email					
		мо	D/	AY	YR					Ar	ea Code		Daytime	Teleph	one Nu	mber		ᆜ
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate shall	l sign h	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ief this	poli	itical	comm	ittee has	not viola	ted any p	rovisi	ions of the	act of Ju	ne 3,1	937 (P.I	L. 133	3,
Sworn to and subsc	ribed befor day of	re me this		20						-		Si	ignature of	Candida	te			_
								-					Printed	Name				-
		Signature						_					Ema:					_
My Commission Exp	ires												Email					
	_	мо	D	AY	YR	ł		-		Area	Code		Day	time Te	lephor	e Numl	er	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
WAGNER,SCOTT R	From:	<u>5/1/201</u>	<u>8</u> To:	6/4/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Commit	tee or Candidate			Re	porting l	Period			
				Fro	om:		To	1	
			•			DATE			AMOUNT
Full Name of Contributing	g Committee				мо	DAY	YEAR		
Mailing Address								\$	0.00
City	Sta	te	Zip Code (Plus 4)	)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

# ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Commit	tee or Candidate		Reporting	Period			
			From:		To	o:	
		I		DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)			İ	ĺ	

\$ 0.00

### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(	0.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b>	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page,	Section	4.			\$	0.00

### **SCHEDULE II**

### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
WAGNER,SCOTT R	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Ca	Name of Contributor ing Address			Reporting Period					
			From:			To:			
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						<b> </b>	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•					
				_	Г				
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL		
						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
WAGNER,SCOTT R	From	<u>5/1/2018</u>	То:	6/4/2018

					DATE			AMOUNT		
To Wi	hom Paid			МО	DAY	YEAR				
407BI	H, LLC									
Mailin	ng Address			5	1	2018	\$	4,115.62		
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		MD	21224	TRAVEL	: AIR					
To Wi	hom Paid			МО	DAY	YEAR				
407BI	H, LLC			1-10		TEAK				
Mailin	ng Address			5	4	2018	\$	9,960.52		
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		MD	21224	TRAVEL	: AIR					
To W	hom Paid			МО	DAY	YEAR				
407BI	H, LLC			1-10		ILAK				
Mailin	Mailing Address				9	2018	\$	8,539.30		
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp					
		MD	21224	TRAVEL	: AIR					
To Wi	hom Paid			МО	DAY	YEAR				
407BI	H, LLC			1-10		ILAK				
Mailin	ng Address			5	10	2018	\$	9,703.41		
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		MD	21224	TRAVEL	TRAVEL: AIR					
To Wi	hom Paid			МО	DAY	YEAR				
407BI	H, LLC			МО		ILAK				
Mailin	ng Address			5	12	2018	\$	3,898.53		
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		MD	21224	TRAVEL	: AIR					
To Wi	hom Paid			МО	DAY	YEAR				
407BI	H, LLC			110		ILAK				
Mailin	ng Address			5	14	2018	\$	4,428.41		
City BALTIMORE State Zip Code (Plus 4)			Description of Expenditure							
City	MD 21224									

To WI	nom Paid			мо	DAY	YEAR		
407B	H, LLC							
Mailir	ng Address			6	1	2018	\$	4,961.91
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		MD	21224	TRAVEL	: AIR			
To WI	nom Paid			мо	DAY	YEAR		
ALAN	NIXON, PRIVATE CHAUFFEUR			MO	DAI	ILAK		
Mailir	ng Address			5	25	2018	\$	572.00
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
		NY	10027	TRAVEL	: GROUND	TRANSP	ORTATION	
To WI	nom Paid				DAY	VEAD		
DON	NIE LEMON LIMOUSINE SERVIO	CE		МО	DAY	YEAR		
Mailir	ng Address			5	19	2018	\$	540.00
City	MOUNT MORRIS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15349	TRAVEL	: GROUND	TRANSP	ORTATION	
To WI	nom Paid			мо	DAY	YEAR		
GRAN	IDVIEW AVIATION LLC			1.10				
Mailir	ng Address			5	7	2018	\$	6,675.55
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
		MD	21224	TRAVEL	: AIR			
To WI	nom Paid				DAY	VEAD		
GRAN	IDVIEW AVIATION LLC			МО	DAT	YEAR		
Mailir	ng Address			5	9	2018	\$	8,294.50
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l .	
		MD	21224	TRAVEL	: AIR			
To WI	nom Paid			мо	DAY	YEAR		
GRAN	IDVIEW AVIATION LLC			MO	DAT	TEAR		
Mailir	ng Address			5	11	2018	\$	8,990.02
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		MD	21224	TRAVEL	: AIR			
To WI	nom Paid	•	•					
GRAN	IDVIEW AVIATION LLC			МО	DAY	YEAR		
Mailir	ng Address			5	14	2018	\$	15,064.90
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		MD	21224	TRAVEL	: AIR			
To WI	nom Paid	•		MO	DAY	VEAD		
GRAN	IDVIEW AVIATION LLC			МО	DAT	YEAR		
Mailir	ng Address			5	19	2018	\$	8,017.93
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
		MD	21224	TRAVEL				
		•	•	-				

							1710	_ 13
	nom Paid			мо	DAY	YEAR		
	DVIEW AVIATION LLC			_			÷	0 202 10
Mailin	g Address			5	21	2018	\$	8,392.19
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		MD	21224	TRAVEL	: AIR			
To Wh	nom Paid			мо	DAY	YEAR		
	DVIEW AVIATION LLC							
Mailin	g Address			5	23	2018	\$	7,730.08
City	BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		MD	21224	TRAVEL	: AIR			
To W	nom Paid			мо	DAY	YEAR		
INTER	RCONTINENTAL HOTELS & RES	ORTS		1.10		1 Z/IIX		
Mailin	g Address			5	15	2018	\$	449.87
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		NY	10017	TRAVEL	: LODGING	3		
To Wi	nom Paid			мо	DAY	YEAR		
INTER	RCONTINENTAL HOTELS & RES	ORTS		MO	DAI	ILAK		
Mailin	g Address			5	22	2018	\$	961.41
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		NY	10017	TRAVEL	: LODGING	3		
To Wi	nom Paid			мо	DAY	YEAR		
INTER	RCONTINENTAL HOTELS & RES	ORTS		МО		ILAK		
Mailin	g Address			5	23	2018	\$	328.74
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		NY	10017	TRAVEL	: LODGING	3		
To Wi	nom Paid			мо	DAY	YEAR		
INTER	RCONTINENTAL HOTELS & RES	ORTS		МО		ILAK		
Mailin	g Address			5	23	2018	\$	449.87
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		NY	10017	TRAVEL	: LODGING	3		
To W	nom Paid				DAY	VEAD		
THE L	ITTLE NELL			МО	DAY	YEAR		
Mailin	g Address			5	25	2018	\$	2,105.67
City	ASPEN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		со	81611	TRAVEL	: LODGING	3		
To W	nom Paid			MC	DAY	VEAD		
THE L	ITTLE NELL			МО	DAY	YEAR		
Mailin	g Address			5	30	2018	\$	2,105.67
City	ASPEN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		со	81611	TRAVEL	: LODGING	<u> </u>		

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