

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**5151**
**FORM JC/OH  
COVER SHEET PG 1**

The JC/OH INSTRUCTION GUIDE explains how to complete this form.

 1 ACCOUNT #  
(Ethics Commission filers)

00026442

2 Total pages filed:

3

3 CANDIDATE / OFFICEHOLDER NAME

TITLE

FIRST

MI

Scott

H.

NICKNAME

LAST

SUFFIX

Jenkins

OFFICE USE ONLY

Date Received

HAND DELIVERED  
RECEIVED

JUL 08 2002

Date Held by Texas Ethics Commission

02 JUL - 8 PM 3:51

Receipt Amount

Date Processed

Date Imaged

ZIP CODE

AS

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3119 Eanes Circle, Austin, TX. 78746

 Change of Address

5 CAMPAIGN TREASURER NAME

TITLE

FIRST

MI

Scott

H.

NICKNAME

LAST

SUFFIX

Jenkins

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

3119 Eanes Circle, Austin, TX. 78746

7 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 970-0529

8 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (officeholder only)

July 15

8th day before election

Exceeded \$500 limit

Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month

Day

Year

01 / 01 / 2002

THROUGH

Month

Day

Year

06 / 30 / 2002

10 ELECTION

ELECTION DATE

Month

Day

Year

/ /

ELECTION TYPE

Primary

Runoff

General

Special

11 OFFICE

OFFICE HELD (if any)

Judge, 53rd District Court

12 OFFICE SOUGHT (if known)

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

 additional pages

GO TO PAGE 2

# OUTSTANDING LOANS

# SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule L: **1**

2 FILER NAME

*Scott H. Jenkins*

3 ACCOUNT # (Ethics Commission filers)

**00026442**

LENDER INFORMATION

4 Name of lender

*Scott H. and Sarah F. Jenkins*

5 Lender address; City; State; Zip Code

*3119 Eanes Circle, Austin, TX. 78746*

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address; City; State; Zip Code

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**