

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

5234³

The JC/OH Instruction Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed. 7
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3 CANDIDATE / OFFICEHOLDER NAME	TITLE: Judge FIRST: Richard MI: E NICKNAME: Scott LAST: SUFFIX:	OFFICE USE ONLY Date Received
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4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: P.O. Box 15052 APT / SUITE #: Austin CITY: Texas STATE: 78761 ZIP CODE:	RECEIVED 02 OCT -9 PM 4:15 TRAVIS COUNTY CLERK TRAVIS COUNTY CLERK
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5 CAMPAIGN TREASURER NAME	TITLE: Mr. FIRST: Jason MI: Justice NICKNAME: LAST: SUFFIX:	Receipt # HD / PM) Amount Date Processed Date Imaged
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6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 809 Purple Martin Court APT / SUITE #: Pflugerville CITY: Texas STATE: 78660 ZIP CODE:
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7 CAMPAIGN TREASURER PHONE	AREA CODE: (512) PHONE NUMBER: 989-8379 EXTENSION:
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8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach JC/OH - FR)
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9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 7 / 16 / 02 10 / 07 / 02
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10 ELECTION	ELECTION DATE Month Day Year 11 / 05 / 02	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
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11 OFFICE OFFICE HELD (# any) Justice of the Peace	12 OFFICE SOUGHT (# known) Justice of the Peace
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13 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: NA Address / PO Box: Apt. / Suite #: City: State: Zip Code:
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additional pages

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)** **SCHEDULE A (J)**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule A(J):

2 FILER NAME
Richard E. Scott 3 ACCOUNT # (Ethics Commission filers)

4 Date 8-7-02	5 Full name of contributor <input type="checkbox"/> out of state PAC Ruth McRoy	7 Amount of contribution (\$) 200.00	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code 6105 Twin Ledge Austin, Texas 78731			

9 Contributor's principal occupation University Instructor	10 Contributor's job title Professor
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11 Contributor's employer/law firm N/A	12 Law firm of contributor's spouse (if any) N/A
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13 If contributor is a child, law firm of parent(s) (if any)
N/A

Date 8-6-02	Full name of contributor <input type="checkbox"/> out of state PAC Jeff Ratliff	Amount of contribution (\$) 1,000.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 6630 Desco Dallas, Texas 75225			

Contributor's principal occupation Realtor	Contributor's job title Broker
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Contributor's employer/law firm N/A	Law firm of contributor's spouse (if any) N/A
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If contributor is a child, law firm of parent(s) (if any)
N/A

Date 8-6-02	Full name of contributor <input type="checkbox"/> out of state PAC Ruel Hamilton	Amount of contribution (\$) 5,000.00	In-kind contribution description(if applicable)
Contributor address; City; State; Zip Code 5949 Sherry Lane Suite 525 Dallas, Texas 75225			

Contributor's principal occupation Realtor	Contributor's job title President
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Contributor's employer/law firm N/A	Law firm of contributor's spouse (if any) N/A
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If contributor is a child, law firm of parent(s) (if any)
N/A

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A(J):

2 FILER NAME

Richard E. Scott

3 ACCOUNT # (Ethics Commission filers)

4 Date 8-6-02	5 Full name of contributor Anthony D. Hunt <input type="checkbox"/> out of state PAC	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7009 Cliffwood Dallas, Texas 75223			

9 Contributor's principal occupation Realtor	10 Contributor's job title Executive Security Consultant
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11 Contributor's employer/law firm N/A	12 Law firm of contributor's spouse (if any) N/A
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13 If contributor is a child, law firm of parent(s) (if any)
N/A

Date 8-27-02	Full name of contributor Hospital Pharmacy / O.C. Houston <input type="checkbox"/> out of state PAC	Amount of contribution (\$) 300.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2115 E. MLK Blvd Austin, Texas 78702			

Contributor's principal occupation Pharmacist	Contributor's job title Pharmacist
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Contributor's employer/law firm N/A	Law firm of contributor's spouse (if any) N/A
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If contributor is a child, law firm of parent(s) (if any)
N/A

Date	Full name of contributor Doctors Sidney White, Jr, Norman Mason and Wayne McElveen <input type="checkbox"/> out of state PAC	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2113 E. MLK Blvd Suite 705 Austin, Texas 78702			

Contributor's principal occupation Dentistry	Contributor's job title Dentist
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Contributor's employer/law firm N/A	Law firm of contributor's spouse (if any) N/A
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If contributor is a child, law firm of parent(s) (if any)
N/A

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Richard E. Scott

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

7-25-02

Austin AFL-CIO Council

6 Payee address; City: State; Zip Code

P.O. Box 684644 Austin, Texas 78768-4644

65.00

8 Purpose of expenditure

Labor Day Program Advertisement

9 .. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

8-23-02

Affordable Delivery Printing

Payee address; City: State; Zip Code

P.O. Box 18075 Austin, Texas 78760-9998

160.00

Purpose of expenditure

Re-elect Judge Scott campaign stationary and envelopes

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

8-29-02

Worley Printing Co.

Payee address; City: State; Zip Code

3127 North IH 35 Austin, Texas 78722

601.82

Purpose of expenditure

Campaign pole signs-scoring layout & artwork & shipping

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

9-14-02

The Home Depot 0502

Payee address; City: State; Zip Code

7211 N-IH35 Service Road northbound
Austin, Texas 78752

92.92

Purpose of expenditure

Staples guns and staples 1x2x36 stakes

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Richard E. Scott

3 ACCOUNT # (Ethics Commission files)

4 Date

10-1-02

5 Payee name

DBR Publishing Co., LLC

7 Amount (\$)

75.00

6 Payee address; City; State; Zip Code

11375 E. 61st Suite 102
Tulsa, Oklahoma 74147-0303

8 Purpose of expenditure

Johnston High School
Ad Girls' Track Calendar

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

9-12-02

Payee name

Metropolitan AME Church

Amount (\$)

60.00

Payee address; City; State; Zip Code

1105 East Tenth Street
Austin, Texas 78721

Purpose of expenditure

Golf Tournament entrance fee

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

10-3-02

Payee name

Rev. Calvin McBride-GoodShephard Church

Amount (\$)

75.00

Payee address; City; State; Zip Code

1044 Camino La Costa #1074 Austin, Texas 78753

Purpose of expenditure

Donation

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

10-7-02

Payee name

The Home Depot 0502

Amount (\$)

113.00

Payee address; City; State; Zip Code

7211 N-IH 35 Service Road Northbound
Austin, Texas 78752

Purpose of expenditure

6' Foldtable Foldchair

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

Richard E. Scott

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

9-11-02

Affordable Delivery Printing

6 Payee address; City; State; Zip Code

P.O. Box 18075 Austin, Texas 78760-9998

80.00

8 Purpose of expenditure

Reprint-campaign stationary & letterheads & envelopes

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

9-14-02

Office Depot

Payee address; City; State; Zip Code

816 Triado St. Austin, Texas 78752

32.24

Purpose of expenditure

Staples standard & stapler swingline

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

8-31-02

The Home Depot 0502

Payee address; City; State; Zip Code

7211 N-IH35 Service Road Northbound
Austin, Texas 78752

124.65

Purpose of expenditure

Campaign sign material 1x2x36 stakes

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

Date

Payee name

Amount (\$)

9-16-02

Villager Newspaper

Payee address; City; State; Zip Code

1223-A Rosewood Ave.
Austin, Texas 78702

300.00

Purpose of expenditure

Campaign Ads

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name

Office sought / held

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Richard E. Scott	15 ACCOUNT # (Ethics Commission files)
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16 SUPPORTING POLITICAL COMMITTEE(S)
 -- This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --

N/A

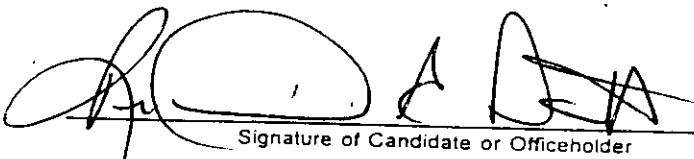
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,100.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,779.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,320.37
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 800.00

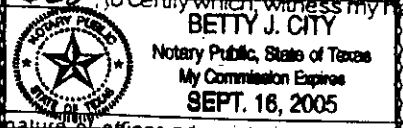
18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard Scott this the 9th day of October



Signature of officer administering oath _____
 Print name of officer administering oath _____
 Title of officer administering oath _____