

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5880

**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 this report: -1/4
3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI Hon. Scott H. NICKNAME LAST SUFFIX Jenkins	OFFICE USE ONLY Date Received: <i>NOV 10 10 44 AM '04</i> Date Hand-delivered or Date Postmarked: Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Eanes Circle Austin TX 78746		
5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Hon. 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	<input checked="" type="checkbox"/> January 15 <input 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"/> 6th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month / Day / Year THROUGH Month / Day / Year 07/01/2004 12/31/2004		
10 ELECTION	ELECTION DATE Month / Day / Year 11/02/2004	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge 53	12 OFFICE SOUGHT (if known) District Judge 53	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	.. 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		

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME
Hon. Scott H. Jenkins

15 ACCOUNT # (Ethics Commission filers)
00026442

16 NOTICE FROM 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. ..

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

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) \$ 0.00

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 0.00

EXPENDITURE TOTALS

4. TOTAL POLITICAL EXPENDITURES \$ 2940.00

OUTSTANDING LOAN TOTALS

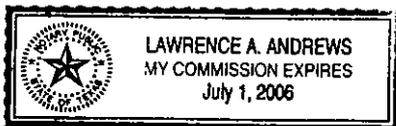
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 57221.90

CONTRIBUTION BALANCE

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

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.



Scott H. Jenkins
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said SCOTT H. JENKINS, this the 3RD day of JANUARY, 2005, to certify which, witness my hand and seal of office.

Lawrence A. Andrews LAWRENCE A. ANDREWS NOTARY
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

**POLITICAL
EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 3/4
2 FILER NAME Hon. Scott H. Jenkins		3 ACCOUNT # (Ethics Commission files) 00026442
4 Date 08/27/2004	5 Payee name AYLA Foundation 6 Payee address: City, State, Zip Code 816 Congress Ave. Suite 700 Austin TX 78701	7 Amount (\$) 35.00
8 Purpose of expenditure (See instructions regarding type of information required.) District Judges' Bar & Grill ad for Volunteer Legal Services		9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 08/08/2004	Payee name Austin AFL-CIO Payee address: City, State, Zip Code P.O. Box 684644 Austin TX 78768-4644	Amount (\$) 65.00
Purpose of expenditure (See instructions regarding type of information required.) Labor Day Program ad		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 07/25/2004	Payee name Austin Tejano Democrats PAC Payee address: City, State, Zip Code 373 Tobin Drive Buda TX 78610	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Event Sponsor (August 5 event for GOTV)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
Date 08/21/2004	Payee name Capital Area Progressive Democrats Payee address: City, State, Zip Code P.O. Box 142175 Austin TX 78714-2175	Amount (\$) 40.00
Purpose of expenditure (See instructions regarding type of information required.) Sponsorship of September 7 event (annual membership party)		.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

1 Total pages report:
4/4

2 FILER NAME
Hon. Scott H. Jenkins

3 ACCOUNT # (Ethics Commission filers)
00026442

4 Date	5 Payee name	7 Amount (\$)
08/29/2004	Texas Center for Legal Ethics and Professionalism 6 Payee address; City; State; Zip Code 1414 Colorado Austin TX 78701	100.00

8 Purpose of expenditure (See instructions regarding type of information required.) 2004/05 Membership Dues	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
07/12/2004	Travis County Democratic Party Payee address; City; State; Zip Code 706 W. Martin Luther King Jr. Blvd. Suite 8 Austin TX 78701	2500.00

Purpose of expenditure (See instructions regarding type of information required.) GOTV & Pro Rata Share of TCDP's overhead and administrative or operating costs	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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Date	Payee name	Amount (\$)
12/12/2004	Volunteer Legal Services of Central Texas Payee address; City; State; Zip Code 816 Congress Ave. Suite 701 Austin TX 78701	100.00

Purpose of expenditure (See instructions regarding type of information required.) annual fundraising campaign donation	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held
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