

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM JC/OH COVER SHEET PG 1

5998

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission filers) 00026442	<b>2 PAGE #</b> 1 of 3
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Hon. FIRST Scott H. MI NICKNAME LAST Jenkins SUFFIX	<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Eanes Circle Austin, TX 78746		
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION		
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Hon. FIRST Scott H. MI NICKNAME LAST Jenkins SUFFIX		
<b>7 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3119 Eanes Circle Austin, TX 78746		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE PHONE NUMBER EXTENSION (512) 970-0529		
<b>9 REPORT TYPE</b>	<input 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
<b>10 PERIOD COVERED</b>	Month Day Year    THROUGH    Month Day Year 01/01/2005    06/30/2005		
<b>11 ELECTION</b>	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any) District Judge District 53	<b>13 OFFICE SOUGHT (if known)</b> District Judge District 53	
<b>14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b>  <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		

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

15 C/OH NAME Jenkins, Scott H. (Hon.)

16 ACCOUNT # (Ethics Commission files)  
00026442

17 NOTICE FROM POLITICAL COMMITTEE(S)

... This box is for notice of 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. ...

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	1,150.00
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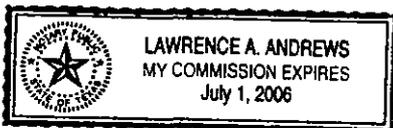
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	56,071.90
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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19 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 5<sup>th</sup> day of JULY, 2005, to certify which, witness my hand and seal of office.

*Lawrence A. Andrews*      LAWRENCE A. ANDREWS      NOTARY PUBLIC  
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** PAGE #  
Schedule: 1/1 Report: 3/3

**2** FILER NAME Jenkins, Scott H. (Hon.)

**3** ACCOUNT # (Ethics Commission filers)  
00026442

<b>4</b> Date	<b>5</b> Payee name Austin Bar Foundation	<b>7</b> Amount (\$)
05/15/2005	<b>6</b> Payee address; City; State; Zip Code 816 Congress Ave., Suite 700 Austin, TX 78767	\$150.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Founding Fellows 2005 payment	<b>9</b> ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
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Date	Payee name Travis County Democratic Party	Amount (\$)
05/08/2005	Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	\$1,000.00

Purpose of payment (See instructions regarding type of information required.) Sponsorship of June 9 fundraiser.	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name:  Office sought: Office held:
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