

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6421

FORM JC/OH  
COVER SHEET PG 1

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

<b>1 ACCOUNT #</b> (Ethics Commission filers) 00026442	<b>2 PAGE #</b> 1 of 5
--	---------------------------

<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR: Hon. FIRST: Scott H. MI: NICKNAME: LAST: Jenkins SUFFIX:	<b>OFFICE USE ONLY</b>
--	--	------------------------

<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX: 3119 Eanes Circle APT / SUITE #: Austin, TX 78746 CITY: STATE: ZIP CODE: <input type="checkbox"/> Change of Address	Date Received: JAN 12 AM 11:12 Date Hand-delivered or Date Postmarked: Receipt #: Amount:
---	--	--

<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR: Hon. FIRST: Scott H. MI: NICKNAME: LAST: Jenkins SUFFIX:	Date Processed: Date Imaged:
----------------------------------	--	---------------------------------

<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): 3119 Eanes Circle APT / SUITE #: Austin, TX 78746 CITY: STATE: ZIP CODE:
--	---

<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE: (512) PHONE NUMBER: 970-0529 EXTENSION:
-----------------------------------	--

<b>8 REPORT TYPE</b>	<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"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)
----------------------	---

<b>9 PERIOD COVERED</b>	Month Day Year: 07/01/2006 THROUGH Month Day Year: 12/31/2006
-------------------------	---

<b>10 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>11 OFFICE</b> OFFICE HELD (if any): District Judge District 53	<b>12 OFFICE SOUGHT (if known):</b> District Judge District 53
--	--

<b>13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS</b>	... 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: <input type="checkbox"/> additional pages
--	---

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

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

15 ACCOUNT # (Ethics Commission filers)  
00026442

16 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

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

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 402.50

CONTRIBUTION BALANCE

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

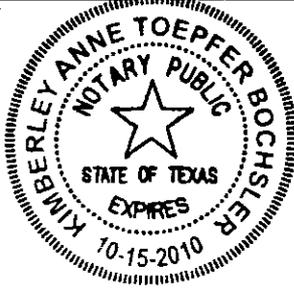
\$ 52,766.90

OUTSTANDING LOAN TOTALS

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 11<sup>th</sup> day of January, 2007, to certify which, witness my hand and seal of office.

*Kimberley Anne Toepfer Bochsler*  
Signature of officer administering oath

Kimberley Anne Toepfer Bochsler  
Print name of officer administering oath

Texas  
Notary Public  
Title of officer administering oath

# POLITICAL EXPENDITURES

# SCHEDULE F

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

**1 PAGE #**  
Schedule: 1/3 Report: 3/5

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

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

<b>4 Date</b>  08/10/2006	<b>5 Payee name</b> Austin AFL-CIO  ..... <b>6 Payee address; City; State; Zip Code</b> P.O. Box 87 Austin, TX 78767	<b>7 Amount (\$)</b>  \$65.00
---------------------------------	--	-------------------------------------

<b>8 Purpose of payment</b> (See instructions regarding type of information required.) Labor Day Program Ad  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9 ** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

**10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**

<b>11 Departure city / location</b>	<b>12 Departure date</b>	<b>13 Destination city / location</b>	<b>14 Arrival date</b>
<b>15 Means of transportation</b>		<b>16 Purpose of travel</b>	

<b>4 Date</b>  08/24/2006	<b>5 Payee name</b> AYLA (Austin Young Lawyers' Assoc.) Foundation  ..... <b>6 Payee address; City; State; Zip Code</b> 816 Congress Avenue Suite 700 Austin, TX 78701-2665	<b>7 Amount (\$)</b>  \$37.50
---------------------------------	--	-------------------------------------

<b>8 Purpose of payment</b> (See instructions regarding type of information required.) Judges' Bar & Grill Show Ad for Volunteer Legal Services  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9 ** Complete if direct expenditure to benefit Candidate/Officeholder **</b> Candidate / Officeholder name:  Office sought: Office held:
---	---

**10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**

<b>11 Departure city / location</b>	<b>12 Departure date</b>	<b>13 Destination city / location</b>	<b>14 Arrival date</b>
<b>15 Means of transportation</b>		<b>16 Purpose of travel</b>	

# POLITICAL EXPENDITURES

# SCHEDULE F

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

**1** PAGE #  
Schedule: 2/3 Report: 4/5

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

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

<b>4</b> Date	<b>5</b> Payee name HBAA (Hispanic Bar Assoc. of Austin) Charitable Foundation	<b>7</b> Amount (\$)
09/07/2006	<b>6</b> Payee address: City: State: Zip Code P.O. Box 12692 Austin, TX 78711-2692	\$100.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Hispanic Heritage Luncheon (benefiting scholarship programs)	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
<input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	

<b>4</b> Date	<b>5</b> Payee name Travis County Women Lawyers Foundation	<b>7</b> Amount (\$)
11/04/2006	<b>6</b> Payee address: City: State: Zip Code P.O. Box 1386 Austin, TX 78767	\$100.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Foundation Fellow contribution	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
<input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	

**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 3/3 Report: 5/5**2** FILER NAME Jenkins, Scott H. (Hon.)**3** ACCOUNT # (Ethics Commission filers)  
00026442

<b>4</b> Date  10/14/2006	<b>5</b> Payee name Volunteer Legal Services  <b>6</b> Payee address; City: State; Zip Code 816 Congress Avenue Suite 701 Austin, TX 78701-2665	<b>7</b> Amount ( <b>\$</b> )  \$100.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) fundraiser donation  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	