

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6530

FORM JC/OH  
COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) <b>00026442</b>	2 PAGE # <b>1 of 4</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Hon. Scott H.	<b>OFFICE USE ONLY</b> Date Received <div style="text-align: center;">                     FILED FOR RECORD                      2007 JUL 12 AM 10:10                      COUNTY CLERK                      TRAVIS COUNTY TEXAS                 </div> Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
NICKNAME LAST SUFFIX ..... Jenkins	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Eanes Circle Austin, TX 78746 <input type="checkbox"/> Change of Address		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	MS / MRS / MR FIRST MI Hon. Scott H.		
5 CAMPAIGN TREASURER NAME	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 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)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 01/01/2007    06/30/2007		
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 53	12 OFFICE SOUGHT (if known) District Judge District 53	
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 <input type="checkbox"/> additional pages		
<b>GO TO PAGE 2</b>			

# 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 file #)  
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

\$ 350.00

CONTRIBUTION BALANCE

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

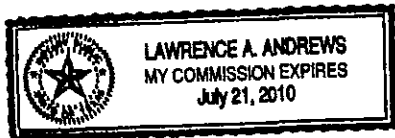
\$ 52,416.90

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

*Lawrence A. Andrews*  
Signature of officer administering oath

LAWRENCE A. ANDREWS  
Print name of officer administering oath

NOTARY PUBLIC  
Title of officer administering oath

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

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/4
2 FILER NAME Jenkins, Scott H. (Hon.)		3 ACCOUNT # (Ethics Commission filers) 00026442
4 Date  05/01/2007	5 Payee name Austin Bar Association  6 Payee address; City; State; Zip Code 816 Congress Avenue Suite 700 Austin, TX 78701	7 Amount (\$)  \$50.00
8 Purpose of payment (See instructions regarding type of information required.) Law Day Luncheon & Annual Meeting  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  01/04/2007	Payee name Austin Bar Foundation  Payee address; City; State; Zip Code 816 Congress Ave., Suite 700 Austin, TX 78701-2665	Amount (\$)  \$100.00
Purpose of payment (See instructions regarding type of information required.) Justice Mack Kidd Fund contribution  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  04/22/2007	Payee name Cinco de Mayo Committee, Commissioner Margaret Gomez, Co-Chair  Payee address; City; State; Zip Code County Commissioner, Precinct 4 P.O. Box 1748 Austin, TX 78767	Amount (\$)  \$25.00
Purpose of payment (See instructions regarding type of information required.) Cinco de Mayo Celebration sponsorship  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  05/15/2007	Payee name Sam Biscoe Special Projects  Payee address; City; State; Zip Code Sam Biscoe, County Judge P.O. Box 1748 Austin, TX 78767	Amount (\$)  \$25.00
Purpose of payment (See instructions regarding type of information required.) Juneteenth Celebration sponsorship  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

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

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

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

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

**4 Date**  
  
05/19/2007

**5 Payee name**  
Texas Center for Legal Ethics & Professionalism

**7 Amount (\$)**  
  
\$100.00

**6 Payee address; City; State; Zip Code**  
P.O. Box 12487  
Austin, TX 78711-2487

**8 Purpose of payment** (See instructions regarding type of information required.)  
annual membership dues

**9 \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held:

**Date**  
  
05/19/2007

**Payee name**  
Travis County Women Lawyers Foundation

**Amount (\$)**  
  
\$50.00

**Payee address; City; State; Zip Code**  
P.O. Box 1386  
Austin, TX 78767

**Purpose of payment** (See instructions regarding type of information required.)  
Annual Awards Luncheon

**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:  
Office held: