

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7043

FORM JC/OH COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00061232	2 PAGE # 1 of 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Scott A.	MI MI
	NICKNAME	LAST Ozman	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY; STATE; ZIP CODE
	PO Box 1748 Austin, TX 78767		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Beverly G.	MI MI
	NICKNAME	LAST Reeves	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	221 W. 6th St., Ste. 1000 Austin, TX 78701		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 334-4500			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit
9 PERIOD COVERED	Month	Day	Year
	07/01/2008		12/31/2008
10 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year 11/04/2008	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			District Judge District 353
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		

OFFICE USE ONLY

Date Received

Date Hand Delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

RECORDED
JAN 15 PM 3:00
CLERK
TEXAS ETHICS COMMISSION

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Ozmun, Scott A. (The Honorable)

15 ACCOUNT # (Ethics Commission filers)
00061232

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political contributions accepted or political expenditures made 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

\$ 1,472.78

CONTRIBUTION BALANCE

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

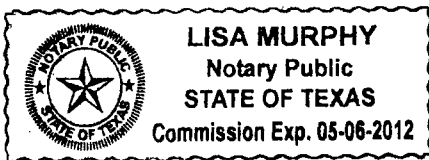
\$ 3,363.70

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Scott Ozmun, this the 13th day of January, 2009, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Lisa Murphy
Print name of officer administering oath

Court Operations Officer
Title of officer administering oath

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
3 of 5

2 FILER NAME Ozmun, Scott A. (The Honorable)

3 ACCOUNT # (Ethics Commission filers)
00061232

4 Date
08/10/2008

5 Payee name
Austin AFL-CIO Council

6 Payee address; City; State; Zip Code
1106 Lavaca St.
Austin, TX 78701

7 Amount (\$)
\$145.00

8 Purpose of payment (See instructions regarding type of information required.)
Advertisement in event program

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
07/17/2008

Payee name
Austin Tejano Democrats

Payee address; City; State; Zip Code
c/o TCDP
PO Box 684263
Austin, TX 78768

Amount (\$)
\$20.00

Purpose of payment (See instructions regarding type of information required.)
Dues

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date
10/20/2008

Payee name
Central Texas Democratic Forum

Payee address; City; State; Zip Code
1105 W. 12th St.
Austin, TX 78703

Amount (\$)
\$15.00

Purpose of payment (See instructions regarding type of information required.)
lunch fee

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date
07/12/2008

Payee name
Ozmun, Scott

Payee address; City; State; Zip Code
15 Pascal Lane
Austin, TX 78746

Amount (\$)
\$204.58

Purpose of payment (See instructions regarding type of information required.)
reimbursement of political expenditures from personal funds

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
4 of 5

2 FILER NAME Ozmun, Scott A. (The Honorable)

3 ACCOUNT # (Ethics Commission filers)
00061232

4 Date

08/10/2008

5 Payee name
Pat Crow Trust

6 Payee address; City; State; Zip Code
1801 Palmwood Cove
Austin, TX 78757

7 Amount (\$)

\$1,000.00

8 Purpose of payment (See instructions regarding type of information required.)
Political Consulting Fees

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

11/03/2008

Payee name
PayPal Inc.

Payee address; City; State; Zip Code
2211 North First Street
San Jose, CA 95131

Amount (\$)

\$3.20

Purpose of payment (See instructions regarding type of information required.)
Fees

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

08/27/2008

Payee name
South Austin Democrats

Payee address; City; State; Zip Code
PO Box 152592
Austin, TX 78704

Amount (\$)

\$75.00

Purpose of payment (See instructions regarding type of information required.)
Event Sponsorship

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

09/09/2008

Payee name
West Austin Democrats

Payee address; City; State; Zip Code
PO Box 50064
Austin, TX 78763

Amount (\$)

\$10.00

Purpose of payment (See instructions regarding type of information required.)
Dues

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

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

CANDIDATE/OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
** Complete only if 'Report Type' on page 1 is marked 'Final Report' **

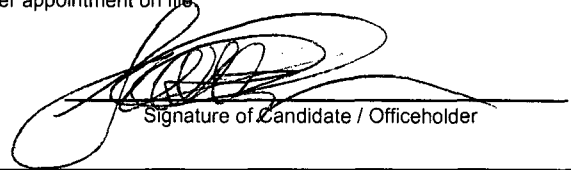
Page 5 of 5

1 C/OH NAME Ozmun, Scott A. (The Honorable)

2 ACCOUNT # (Ethics Commission filers)
00061232

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

** Complete A & B below only if you are not an officeholder **

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, Â§ 254.204.

B. ASSETS

Check only one:

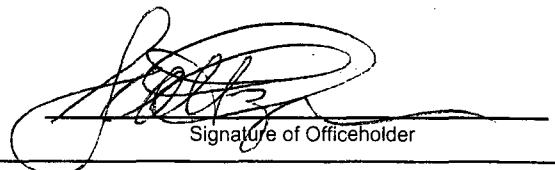
- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, Â§ 254.204.

Signature of Candidate

5 OFFICEHOLDER

** Complete this section only if you are an officeholder **

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.



Signature of Officeholder



353RD DISTRICT COURT

TRAVIS COUNTY COURTHOUSE
P. O. BOX 1748
AUSTIN, TEXAS 78767
FAX (512) 854-9332

SCOTT OZMUN
Judge
(512) 854-9380

MARGIE CORBETT
Staff Attorney
(512) 854-4281

LISA MURPHY
Court Operations Officer
(512) 854-9179

RIGO OLIVA
Court Clerk
(512) 854-9457

RHONDA WATSON
Official Court Reporter
(512) 854-9356

January 13, 2009

Travis County Clerk
Elections Division
P.O. Box 149325
Austin, Texas 78714

RECORDED
JAN 15 PM 3:16
CLERK
TRAVIS COUNTY TEXAS

To Whom It May Concern:

Enclosed is my January 15, 2009 Semi-Annual Report. Please file-stamp the enclosed additional cover sheet with the time and date of filing and return to me in the enclosed self-addressed, stamped envelope.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott Ozmun", written over a large, stylized flourish.

Scott Ozmun

FOR RECORD

JAN 15 PM 3:16

TRAVIS COUNTY
ELECTIONS DIVISION
AUSTIN, TEXAS

Travis County Clerk
Elections Division
P.O. Box 149325
Austin, Texas 78714