FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081351 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Scott English NAME Date Received **ELECTRONICALLY FILED** 07/06/2024 NICKNAME LAST **SUFFIX** Stevens CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Richard A. NAME NICKNAME LAST **SUFFIX** Hurlburt **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (903) 234-8181 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court of Appeals, Chief Justice Place 1 District 6 Bowie

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Stevens, Scott Englis	h (The Honorable)	14 Filer ID 00081351	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	expenditures made by political of the without the candidate's or officinformation only if they receive no	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	DMMITTEE TYPE COMMITTEE NAME					
ш	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER	R ADDRESS				
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTI ES OF LOANS, OR CONTRIBUTIONS N		\$ 0.00			
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 2,200.00			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	\$ 53,048.71			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING L TING PERIOD	OANS AS OF THE LAST DAY	\$ 4,592.50			
17 AFFIDAVIT							
			der penalty of perjury, that the ac includes all information required on Code.				
		The	e Honorable Scott English Ste	evens			
		Si	gnature of Candidate or Officeho	lder			
AFFIX NOT	TARY STAMP / SEAL AB	OVE					
Sworn to and subso	ribed before me, by the s	aid	, this the	day			
		ertify which, witness my hand and seal of					
Signature of office	er administering oath	Printed name of officer administering	ng oath Title of office	r administering oath			

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				3 of 11
l	ER NAMevens, S	ME Scott English (The Honorable)	19 Filer ID 00081351	(Ethics Commission Filers)
I		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 1,425.00
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 775.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$ 588.21

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

nent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 4/11	Stevens, Scott English (The Honorable) 00081351
4	Date	5 Payee name
	02/27/2024	Green Ad Agency (John Green)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$495.00	408 N. 1st St.
L		Longview, TX 75601
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Annual website hosting fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialture to beliefit C/Oi	
	Date	Payee name
L	05/29/2024	Green Ad Agency (John Green)
	Amount (\$)	Payee address; City; State; Zip Code
	\$185.00	408 N. 1st St.
L		Longview, TX 75601
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Annual website domain name
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date 02/09/2024	Payee name
L		Hopkins County Republican Party
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 1124 County Road 1107
	Ψ100.00	1124 County Nodu 1107
		Sulphur Springs, TX 75482-7205
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		President's Day Event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	1
-	Sch: 2/3 Rpt: 5/11	Stevens, Scott English (The Honorable) 00081351
4	Date	5 Payee name
	03/07/2024	Longview Chamber of Commerce
6	Amount (\$) \$40.00	7 Payee address; City; State; Zip Code 410 N. Center St.
		Longview, TX 75601
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		State of the County Event
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	03/13/2024	Longview Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$270.00	410 N. Center St.
		Longview, TX 75601
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Annual membership fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/20/2024	Marshall Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.00	110 South Bolivar Street
		Suite 101
		Marshall, TX 75670
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Annual membership fee
		Allitudi memberampire
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Legal Services	e Printing E Salaries/\	xpense Nages/Contract Labor			trict category not listed above)
Total pages Schedule F1:	2 FILER	NAME			3	Filer ID	(Ethics Commission Filers)
Sch: 3/3 Rpt: 6/11	Steve	ns, Scott English (The Hone	orable)			00081351	
Date	5 Payee	name			•		
02/14/2024			a				
Amount (\$)	7 Payee	address; City;	State; Zip Co	ode			
\$250.00	7101	Jniversity Ave.					
DUDDOGE				In			
OF			f this schedule)		l outei	de of Teyes Com	nlete Schedule T
EXPENDITURE	Event	Expense					
				Event Exper	nse f	or reception	and speaking event
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		te/Officeholder name	Office sou	ught		Office he	eld
	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/11 Date 02/14/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: 2 FILER Sch: 3/3 Rpt: 6/11 Stevel Date 5 Payee Texas Amount (\$) 7 Payee 7101 U Texarl PURPOSE OF EXPENDITURE (a) Categor Event	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/11 Date 02/14/2024 Amount (\$) PURPOSE OF EXPENDITURE Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex Texa NAME Stevens, Scott English (The Hon Texas A&M University Texarkana Texas A&M University Texarkana Texarkana, TX 75503 (a) Category (See Categories listed at the top of Event Expense Candidate/Officeholder name	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to control Guide explai	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/11 Date 02/14/2024 Amount (\$) Purpose OF EXPENDITURE Complete ONLY if direct Committee Candidate/Officeholder name Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Pinting Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Pages Schedule F1: Stevens, Scott English (The Honorable) 5 Payee name Texas A&M University Texarkana 7 Payee address; City; State; Zip Code Texarkana, TX 75503 Purpose OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct Candidate/Officeholder name Office sought	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/11 Date 02/14/2024 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct Candidate/Officeholder Political Committee Giff/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 3 Stevens, Scott English (The Honorable) 7 Payee name Texas A&M University Texarkana 7 Payee address; City; State; Zip Code 7101 University Ave. Texarkana, TX 75503 (a) Category (See Categories listed at the top of this schedule) Complete ONLY if direct Candidate/Officeholder name Coffice sought	Contributions/ Donations Made By- Candidate/Officeholder/Political Committee Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/11 Sch: 3/3 Rpt: 6/11 Stevens, Scott English (The Honorable) 5 Payee name Texas A&M University Texarkana Amount (\$) 7 Payee address; City; State; Zip Code Texarkana, TX 75503 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Office sought Office sought Travel Out of Dis OTHER (enter a Travel Out of Dis Salaries/Wages/Contract Labor OTHER (enter a Travel Out of Dis Salaries Wages/Contract Labor OTHER (enter a Travel Out of Dis Salaries Wages/Contract Labor OTHER (enter a Travel Out of Dis Salaries Wages/Contract Labor OTHER (enter a Travel Out of Dis Salaries Wages/Contract Labor OTHER (enter a Travel Out of Dis

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	, , ,
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 7/11	Stevens, Scott English (The Honorable)	00081351
4	Date	5 Payee name	
	04/17/2024	Greenville Chamber of Commerce	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	2713 Stonewall St.	
	Reimbursement from	P.O. Box 1055	
	political contributions intended	Greenville, TX 75403	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Annual golf tour	nament
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		
	Date	Payee name	
	06/10/2024	Greenville Chamber of Commerce	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	2713 Stonewall St.	
	Reimbursement from	P.O. Box 1055	
	political contributions intended	Greenville, TX 75403	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Hole sponsorsh	ip at annual golf event
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		
	Date	Payee name	
	03/20/2024	Greenville Chamber of Commerce	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$125.00	2713 Stonewall St.	
	Reimbursement from political contributions	P.O. Box 1055	
	intended	Greenville, TX 75403	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
	-	Annual member	rship fee
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name Office sought	Office held
	C/OH		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<u> </u>									
	The Instru	cti	on Guide explains how to complete this form.		1			ages Schedule K: /2 Rpt: 8/11	
2	FILER NAME				3	Fil	er ID	(Ethics Commission F	ilers)
	Stevens, Sco	ott	English (The Honorable)			00	0081	351	
4	Date 01/31/2024	5	Name of person from whom amount is received Origin Bank					8 Amount (\$)	\$8.08
		6	Address of person from whom amount is received; City; State; Zip Cod	e					
			Longview, TX 75605						
		 -	Purpose for which amount is received	Choc	k if politi	ical	contr	Iribution returned to filer	
		Ĺ	Interest	criec	к іі роііц	ICAI	COIII	ibution returned to liler	
	Date	Г	Name of person from whom amount is received					Amount (\$)	
	02/29/2024		Origin Bank						\$7.45
		ļ	Address of person from whom amount is received; City; State; Zip Code	e					
			Longview, TX 75605						
			Purpose for which amount is received	Chec	k if politi	ical	contr	ribution returned to filer	
			Interest						
	Date		Name of person from whom amount is received					Amount (\$)	
	03/31/2024		Origin Bank						\$7.43
		ļ	Address of person from whom amount is received; City; State; Zip Cod	e					
			Longview, TX 75605						
			Purpose for which amount is received	Chec	k if politi	ical	contr	ribution returned to filer	
			Interest						
	Date		Name of person from whom amount is received					Amount (\$)	
	04/30/2024		Origin Bank						\$7.07
		ļ	Address of person from whom amount is received; City; State; Zip Cod	e					
		L	Longview, TX 75605						
			Purpose for which amount is received	Chec	k if politi	ical	contr	ribution returned to filer	
			Interest						
	Date		Name of person from whom amount is received					Amount (\$)	
	05/31/2024		Origin Bank						\$7.30
		ļ	Address of person from whom amount is received; City; State; Zip Code						
		L	Longview, TX 75605						
			Purpose for which amount is received	Chec	k if politi	ical	contr	ribution returned to filer	
			Interest						

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 9/11 2 FILER NAME Filer ID (Ethics Commission Filers) Stevens, Scott English (The Honorable) 00081351 8 Amount (\$) Date 5 Name of person from whom amount is received 06/30/2024 Origin Bank \$6.97 6 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 Purpose for which amount is received ☐ Check if political contribution returned to filer Interest Name of person from whom amount is received Amount (\$) Date 03/09/2024 Origin Bank \$404.70 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 Purpose for which amount is received Check if political contribution returned to filer Interest Date Name of person from whom amount is received Amount (\$) 04/09/2024 Origin Bank \$139.21 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 Purpose for which amount is received Check if political contribution returned to filer Interest

	OUTSTAN	IDING LOANS	SCHEDULE L
	The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 10/11
2	FILER NAME Stevens, Scott E	English (The Honorable)	3 Filer ID (Ethics Commission Filers) 00081351
	LENDER INFORMATION	4 Name of lender Scott, Stevens	·
		5 Lender address; City; State; Zip Code	
		Longview, TX 75606-0807	
	GUARANTOR INFORMATION	6 Name of guarantor	
	X not applicable	7 Guarantor address; City; State; Zip Code	

	The Instruction Guide explains how to complete this form.	1 Total pages Schedule Sch: 1/1 Rpt: 11/1:	
FILE	ER NAME		commission Filers)
	vens, Scott English (The Honorable)	00081351	
Des	scription of Asset		
Car	mpaign signs		