

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 8

13 C / OH NAME Stevens, Scott English (The Honorable) **14** Filer ID (Ethics Commission Filers)
00081351

15 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.

Additional Pages

| | |
|---|--------------------------------------|
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME |
| | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS |

| | | | |
|-------------------------------|--|----|-----------|
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 1,000.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 52,299.70 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 4,592.50 |

17 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.

The Honorable Scott English Stevens

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

| | | | |
|--|--|--------------------------------|----------------------------|
| 18 FILER NAME Stevens, Scott English (The Honorable) | | 19 Filer ID 00081351 | (Ethics Commission Filers) |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | | SUBTOTAL AMOUNT |
| 1. | <input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ | |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ | |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ | |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 1,000.00 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | |
| 9. | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ | |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ | |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | |
| 12. | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | 250.99 |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

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|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/1 Rpt: 4/8 | 2 FILER NAME Stevens, Scott English (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00081351 |
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|-----------------------------|--|
| 4 Date 10/18/2024 | 5 Payee name Lobo Booster Club |
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|----------------------------------|---|
| 6 Amount (\$) \$750.00 | 7 Payee address; City; State; Zip Code P. O. Box 4035 Longview, TX 75606 |
|----------------------------------|---|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tennis Team Sponsorship |
|---------------------------------|--|---|

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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|--|
| Date 09/03/2024 | Payee name Texas Center for the Judiciary |
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|-------------------------|--|
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 1210 San Antonio St. Austin, TX 78701 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Texas Center for the Judiciary |
|-------------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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

SCHEDULE K

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|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/2 Rpt: 5/8 |
| 2 FILER NAME Stevens, Scott English (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081351 |
| 4 Date 07/31/2024 | 5 Name of person from whom amount is received Origin Bank | 8 Amount (\$) \$7.20 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | 7 Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 08/31/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$7.20 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 09/30/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$6.84 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 10/31/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$7.05 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 11/30/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$6.56 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |

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

SCHEDULE K

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 2/2 Rpt: 6/8 |
| 2 FILER NAME Stevens, Scott English (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00081351 |
| 4 Date 07/09/2024 | 5 Name of person from whom amount is received Origin Bank | 8 Amount (\$) \$104.08 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | 7 Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 10/09/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$105.47 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |
| Date 12/31/2024 | Name of person from whom amount is received Origin Bank | Amount (\$) \$6.59 |
| | Address of person from whom amount is received; City; State; Zip Code Longview, TX 75605 | |
| | Purpose for which amount is received Interest credit <input type="checkbox"/> Check if political contribution returned to filer | |

OUTSTANDING LOANS

SCHEDULE L

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule L: Sch: 1/1 Rpt: 7/8 |
| 2 FILER NAME Stevens, Scott 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 | |
| GUARANTOR INFORMATION | 6 Name of guarantor | |
| | <input checked="" type="checkbox"/> not applicable 7 Guarantor address; City; State; Zip Code | |

Assets Purchased with Political Contributions and On Hand As of The Last Day of The Reporting Period

SCHEDULE M

The Instruction Guide explains how to complete this form.

1 Total pages Schedule M:
Sch: 1/1 Rpt: 8/8

2 FILER NAME
Stevens, Scott English (The Honorable)

3 Filer ID (Ethics Commission Filers)
00081351

4 Description of Asset
Campaign signs