

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 PAGE # 1 of 11
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Scott NICKNAME LAST SUFFIX Johnson		OFFICE USE ONLY Date Received AUG 11 2014 BY: WD-10:11 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6072 Dripping Springs Dr. Frisco, TX 75034 <input type="checkbox"/> Change of Address		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Ted NICKNAME LAST SUFFIX Hart		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6703 Canyon Lakes Dr. Frisco, TX 75034		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 491-9646		
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 Month Day Year 01/01/2014 THROUGH 06/30/2014		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Frisco City Council District 6		12 OFFICE SOUGHT (if known)
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Johnson, Scott (Mr.)

14 ACCOUNT # (Ethics Commission filers)

15 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

16 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)

\$

16,125.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

1,528.26

CONTRIBUTION
BALANCE

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

\$

41,951.36

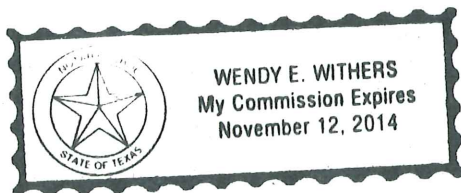
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

0.00

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Scott Johnson, this the 17th day of August, 20 14, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Wendy W. Withers
Print name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 3/11	
2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (Ethics Commission filers)	
4 Date 02/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bilhartz, Brent (Mr.) 6 Contributor address; City; State; Zip Code 1648 Pleasant Valley Ln. Frisco, TX 75034	7 Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Veterinarian		10 Employer (See Instructions) Lazy Paw Animal Hospital	
Date 02/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boyd, Paul (Mr.) Contributor address; City; State; Zip Code 7881 Thistletree Lane Frisco, TX 75033	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Cloud9 Holdings, Inc.	
Date 02/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ewing, Steve (Mr.) Contributor address; City; State; Zip Code 6424 Fallon Court Plano, TX 75093	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Edge Realty	
Date 02/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffin, Ryan (Mr.) Contributor address; City; State; Zip Code 9550 John W. Elliot Dr. Frisco, TX 75033	Amount of contribution (\$) \$1,500.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) GBT Real Estate Services	
Date 02/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hodes, Kevin (Mr.) Contributor address; City; State; Zip Code 4704 Gables Ct. Frisco, TX 75035	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/3 Report: 4/11

2 FILER NAME Johnson, Scott (Mr.)

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lewis, Lavonne (Mrs.)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

04/14/2014

6 Contributor address; City; State; Zip Code
7268 Fernmeadow Dr.
Dallas, TX 75248

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
Retired

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Molubhoy, Perwez & Zeenat (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

01/31/2014

Contributor address; City; State; Zip Code
7 Savannah Ridge Dr.
Frisco, TX 75034

\$2,500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Hospitality

Employer (See Instructions)
Atlantic Hotels Group

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ruggeri, Tony (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

01/10/2014

Contributor address; City; State; Zip Code
6159 Kenwood Ave.
Dallas, TX 75214

\$2,500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Republic Property Group

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Snowden, Jeff (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

02/12/2014

Contributor address; City; State; Zip Code
10243 El Cinco
Frisco, TX 75033

\$200.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self Employed

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Strauss, Richard C. (Mr.)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

01/10/2014

Contributor address; City; State; Zip Code
8401 North Central Expressway
Suite 350
Dallas, TX 75225

\$2,500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Republic Property Group

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/3 Report: 5/11

2 FILER NAME Johnson, Scott (Mr.)**3** ACCOUNT # (Ethics Commission filers)**4** Date

05/02/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Texas Association of Realtors Political Action Committee**6** Contributor address; City; State; Zip Code
P.O. Box 2246
Austin, TX 78768**7** Amount of
contribution (\$)

\$750.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

01/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wagner, Jake (Mr.)Contributor address; City; State; Zip Code
5722 Stonegate Rd.
Dallas, TX 75209Amount of
contribution (\$)

\$2,500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Real EstateEmployer (See Instructions)
Republic Property Group

Date

01/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wagner, John & Christine (Mr.)Contributor address; City; State; Zip Code
7005 Hill Forest Dr.
Dallas, TX 75230Amount of
contribution (\$)

\$2,500.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Real EstateEmployer (See Instructions)
Republic Property Group

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/6 Report: 6/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers)	
4 Date 06/05/2014	5 Payee name Clint Bedsole Campaign				
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 8951 West Main Frisco, TX 75034				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to Clint Bedsole Campaign		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 01/17/2014	Payee name Constant Contact				
Amount (\$) \$15.99	Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/18/2014	Payee name Constant Contact				
Amount (\$) \$15.99	Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/17/2014	Payee name Constant Contact				
Amount (\$) \$15.99	Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/6 Report: 7/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers) ()	
4 Date 04/17/2014	5 Payee name Constant Contact				
6 Amount (\$) \$15.99	7 Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/19/2014	Payee name Constant Contact				
Amount (\$) \$15.99	Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/17/2014	Payee name Constant Contact				
Amount (\$) \$15.99	Payee address City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/13/2014	Payee name Frisco Conservative Coalition				
Amount (\$) \$50.00	Payee address City; State; Zip Code 6703 Canyon Lakes Dr. Frisco, TX 75034				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Candidate Forum		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/6 Report: 8/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers)	
4 Date 03/03/2014	5 Payee name Frisco Family Services				
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code 8780 3rd. Street Frisco, TX 75034				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Contribution		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/30/2014	Payee name Frisco Lakes Mens Golf Association				
Amount (\$) \$250.00	Payee address City; State; Zip Code 7170 Anthem Drive Frisco, TX 75034				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 02/13/2014	Payee name Frisco Police Officers Association				
Amount (\$) \$250.00	Payee address City; State; Zip Code P.O. Box 2263 Frisco, TX 75034				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office of the Year Award Contribution		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 03/31/2014	Payee name Frisco Sunrise Rotary				
Amount (\$) \$40.00	Payee address City; State; Zip Code 7026 West Main Street Frisco, TX 75033				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ticket		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/6 Report: 9/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers)
4 Date 03/04/2014	5 Payee name Johnsen, Tressie (Mrs.)			
6 Amount (\$) \$20.00	7 Payee address City; State; Zip Code 1725 North McDonald Street McKinney, TX 75071			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards/Memorials Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Constituent Gift	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 01/21/2014	Payee name Pantheon Systems			
Amount (\$) \$25.00	Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 02/19/2014	Payee name Pantheon Systems			
Amount (\$) \$25.00	Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 03/19/2014	Payee name Pantheon Systems			
Amount (\$) \$25.00	Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/6 Report: 10/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers)
4 Date 04/21/2014	5 Payee name Pantheon Systems			
6 Amount (\$) \$25.00	7 Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 05/19/2014	Payee name Pantheon Systems			
Amount (\$) \$25.00	Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 06/19/2014	Payee name Pantheon Systems			
Amount (\$) \$25.00	Payee address City; State; Zip Code 717 California Steet 3rd Floor San Francisco, CA 94108			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web Hosting	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 06/30/2014	Payee name Pirya			
Amount (\$) \$165.32	Payee address City; State; Zip Code 144 2nd Street 1st Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising Processing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/6 Report: 11/11		2 FILER NAME Johnson, Scott (Mr.)		3 ACCOUNT # (TEC filers)
4 Date 01/24/2014	5 Payee name Texas Ethics Commission			
6 Amount (\$) \$97.10	7 Payee address City; State; Zip Code P.O. Box 12070 Austin, TX 78711			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Finance Reports Printing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 01/30/2014	Payee name Texas Ethics Commission			
Amount (\$) \$59.90	Payee address City; State; Zip Code P.O. Box 12070 Austin, TX 78711			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Finance Reports Printing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			