Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

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 Total pages filed: 12

OFFICE USE ONLY

Date Received RECEIVED
MAY 02 2008
City Secretary's Office

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr. | FIRST: Scott | MI:
NICKNAME | LAST: Johnson | SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE: 6072 Dripping Springs Dr; Frisco, TX 75034

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (214) | PHONE NUMBER: 929-1189 | EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mrs. | FIRST: Tyne | MI:
NICKNAME | LAST: Berlanga | SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE: 15509 Wyoming Dr; Frisco, TX 75035

8 CAMPAIGN TREASURER PHONE

AREA CODE: (214) | PHONE NUMBER: 437-7721 | EXTENSION:

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☒ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year: 4 / 1 / 8 THROUGH Month Day Year: 4 / 30 / 8

11 ELECTION

ELECTION DATE — Month Day Year: 5 / 10 / 8

ELECTION TYPE: ☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE

OFFICE HELD (if any):

13 OFFICE SOUGHT (if known): Frisco City Council, Place 6

14 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

☐ additional pages

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: Scott Johnson

16 ACCOUNT # (Ethics Commission Filers):

17 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
☐ GENERAL
☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ Ø
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 4,015.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ Ø
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 5,535.20
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 3,140.08
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ Ø

19 AFFIDAVIT

M ESTELA BARRERA
Notary Public, State of Texas
My Commission Expires
December 14, 2010

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.

J. Scott Johnson
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said J. Scott Johnson, this the 02nd day of May, 20 08, to certify which, witness my hand and seal of office.

M. Estela Barrera — Signature of officer administering oath
M. Estela Barrera — Printed name of officer administering oath
Admin. Assit to the City Sec. — Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 5

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/1/8	Raney, Chris Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/1/8	Elmore, Tracie Dallas, TX 75287	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/8	Mecce, David Lake Dallas, TX 75065	$500.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Dental Mngmt. Strategies	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/8	Anderson, Kevin Frisco, TX 75034	$200.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/4/8	Takala, Brad Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/4/8	Lund, Clark + Brigid Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4/4/8	Brach, Carl + Renee Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/4/8	Brown, Kurt + Jennifer Frisco, TX 75034	$75.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/4/8	Rockvam, Dave + Katherine Frisco, TX 75034	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
4/4/8	King, Betty Jo Contributor address; City; State; Zip Code	$40.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
4/6/8	Lang, Jim & Barbara Dallas, TX 75287	$200.00	(If travel outside of Texas, complete Schedule T)		
4/6/8	Lehman, Ned & Pam Parker, CO 80134	$100.00	(If travel outside of Texas, complete Schedule T)		
4/6/8	Rogers, Richard & Janice Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)		
4/8/8	Ewing, Lora & Steve Frisco, TX 75034	$50.00	(If travel outside of Texas, complete Schedule T)		
4/10/8	Deiteneyer, Mike Southlake, TX 76092	$100.00	(If travel outside of Texas, complete Schedule T)	President	Omni Hotels

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4/10/8	Kristynik, Kris & Stacy Southlake, TX 76092	$500.00	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions): President		10 Employer (See Instructions): Longhorn Capital Partners	
4/11/8	Williams, Kelly Sandy Springs, GA 30328	$300.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): President		Employer (See Instructions): Atlanta Capital	
4/15/8	Williams, Roger Fort Worth, TX 76101	$500.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Chairman		Employer (See Instructions): Roger Williams Auto Mall	
4/15/8	Albinson, Tim San Francisco, CA 94110	$50.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): President		Employer (See Instructions): Aravo	
4/17/8	May, Marc & Karen Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Attorney		Employer (See Instructions): Woods, May, Matlock	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
4/18	Woods, Linda + Michael Frisco, TX 75034	$100.00	(If travel outside of Texas, complete Schedule T)		
21	TrePAL - Texas Association of Realtors PAL Austin, TX 78768	$500.00	(If travel outside of Texas, complete Schedule T)		
22	Faulkner, Michael + Audrey Grapevine, TX 76051	$50.00	(If travel outside of Texas, complete Schedule T)		
			(If travel outside of Texas, complete Schedule T)		
			(If travel outside of Texas, complete Schedule T)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 5

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/1/8	FedEx KinKo's 8290 Hwy 121 Frisco, TX 75034	~~$10.83~~ $10.83

8 Purpose of payment (See instructions regarding type of information required.): Printing
(If travel outside of Texas, complete Schedule T)

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/3/8	Eagle Press 733 Fort Worth Dr, Denton, TX 76202	$814.62

Purpose of payment (See instructions regarding type of information required.): Printing
(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/3/8	First Graphic Services 229 Garvon St. Garland, TX 75040	$138.41

Purpose of payment (See instructions regarding type of information required.): Signage
(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/3/8	Target Frisco, TX 75034	$90.42

Purpose of payment (See instructions regarding type of information required.): Party Supplies
(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/4/8	The Hamburger Man 4000 Cedar Springs Rd. Dallas, TX 75219.	$1,900.00

8 Purpose of payment (See instructions regarding type of information required.): Party - Food

(If travel outside of Texas, complete Schedule T)

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/4/8	Party City 1701 Preston PL. Plano, TX 75093	$29.20

Purpose of payment (See instructions regarding type of information required.): Party Supplies

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/4/8	The Home Depot 5995 El Dorado Pkwy. Frisco, TX 75034	$50.26

Purpose of payment (See instructions regarding type of information required.): Stakes, Ties, Sledge

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/4/8	Jump For Joy Frisco, TX 75034	$279.00

Purpose of payment (See instructions regarding type of information required.): Party Supplies - Bounce House

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/4/18	7-Eleven 5403 N. Dallas Pkwy Frisco, TX 75034	43.08

8 Purpose of payment (See instructions regarding type of information required.): ICE

(If travel outside of Texas, complete Schedule T)

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/4/18	Frisco Sports Center 8715 Lebanon Rd, Ste 100 Frisco, TX 75034	# 1,250.83

Purpose of payment (See instructions regarding type of information required.): T-shirts

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/8/18	FedEx Kinko's 8290 Hwy 121 Frisco, TX 75034	# 3.12

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

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/11/18	Lowe's 3360 Preston Rd, Frisco, TX 75034	# 51.80

Purpose of payment (See instructions regarding type of information required.): T-Posts

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: Scott Johnson

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/13/8	Loew's 3360 Preston Rd Frisco, TX 75034	$162.18

8 Purpose of payment (See instructions regarding type of information required.): T-Posts

(If travel outside of Texas, complete Schedule T)

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/13/8	Loew's 3360 Preston Rd. Frisco, TX 75034	$83.67

Purpose of payment (See instructions regarding type of information required.): Ties, Stedge

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/15/8	Curtsinger PTA 12450 Jerome Trail Frisco, TX 75035	$100.00

Purpose of payment (See instructions regarding type of information required.): Sponsorship - Golf

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/20/8	Loew's 3360 Preston Rd. Frisco, TX 75034	$180.04

Purpose of payment (See instructions regarding type of information required.): T-Posts

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/24/8	Lochram's Irish Pub. 6195 W. Main St, Frisco, TX 75034	$16.00

8 Purpose of payment (See instructions regarding type of information required.) Police Association Lunch

(If travel outside of Texas, complete Schedule T)

9 •• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/24/8	Loew's 3760 Preston Frisco, TX 75034	$16.22

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

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/26/8	Loew's 3760 Preston Rd. Frisco, TX 75034	$10.52

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

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

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

(If travel outside of Texas, complete Schedule T)

•• Complete if direct expenditure to benefit C/OH ••
Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED