

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: <b>2</b>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI <p style="text-align: center; font-size: 1.2em;">Scott Ferguson</p> <hr style="border-top: 1px dotted black;"/> NICKNAME                      LAST                      SUFFIX	<b>OFFICE USE ONLY</b>  Date Received  <div style="font-size: 2em; color: blue; font-weight: bold; letter-spacing: 0.2em;">RECEIVED</div>  <div style="color: red; font-weight: bold;">JUL 08 2024</div>  Date Hand-delivered or Date Postmarked <div style="color: blue; font-weight: bold;">Bosque Co. Elections</div>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	<div style="background-color: purple; width: 100%; height: 40px; margin-bottom: 5px;"></div> CITY;                      STATE;                      ZIP CODE <p style="text-align: right; font-weight: bold;">665</p>	Receipt #                      Amount \$  Date Processed  Date Imaged	
<input type="checkbox"/> Change of Address	<div style="background-color: purple; width: 100%; height: 40px; margin-bottom: 5px;"></div> EXTENSION		
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	<div style="background-color: purple; width: 100%; height: 40px;"></div>	Date Hand-delivered or Date Postmarked <div style="color: blue; font-weight: bold;">Bosque Co. Elections</div>	
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI <p style="text-align: center; font-size: 1.2em;">SCOTT FERGUSON</p> <hr style="border-top: 1px dotted black;"/> NICKNAME                      LAST                      SUFFIX		
<b>7</b> CAMPAIGN TREASURER ADDRESS	<div style="background-color: purple; width: 100%; height: 40px; margin-bottom: 5px;"></div> PT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <p style="text-align: right; font-weight: bold;">5</p>	Date Hand-delivered or Date Postmarked <div style="color: blue; font-weight: bold;">Bosque Co. Elections</div>	
(Residence or Business)	<div style="background-color: purple; width: 100%; height: 40px;"></div> EXTENSION		
<b>8</b> CAMPAIGN TREASURER PHONE	<div style="background-color: purple; width: 100%; height: 40px;"></div>	Receipt #                      Amount \$  Date Processed  Date Imaged	
<b>9</b> 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 Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10</b> PERIOD COVERED	Month                      Day                      Year                      THROUGH                      Month                      Day                      Year <p style="text-align: center; font-size: 1.2em;">01 / 01 / 2024                      THROUGH                      06 / 30 / 2024</p>	Receipt #                      Amount \$  Date Processed  Date Imaged	
<b>11</b> ELECTION	ELECTION DATE                      ELECTION TYPE Month                      Day                      Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
<b>12</b> OFFICE	OFFICE HELD (if any) <p style="text-align: center; font-size: 1.2em;">Constable Pct #1</p>	<b>13</b> OFFICE SOUGHT (if known)	
<b>14</b> 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.		
<input type="checkbox"/> Additional Pages	<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b> Scott Ferguson		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

**18 SIGNATURE** 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.



*Scott Ferguson*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Scott Ferguson this the 8<sup>th</sup> day of July, 202024, to certify which, witness my hand and seal of office.

*Brad Hancock*  
Signature of officer administering oath

Brad Hancock  
Printed name of officer administering oath

Deputy EA  
Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)