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: 4

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: MR. FIRST: KENDALL MI: W NICKNAME: N/A LAST: SCUDDER SUFFIX: N/A	**OFFICE USE ONLY** Date Received: 10/27/14 Date Hand-delivered or Postmarked: 10/27/14 Receipt # Amount Date Processed: 10/27/14 Date Imaged: 10/27/14
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 555 Bowers Blvd #805 Huntsville Texas 77340	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (903) PHONE NUMBER 243-2555 EXTENSION N/A	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: MRS. FIRST: CAROL MI: N/A NICKNAME: N/A LAST: HILTON SUFFIX: N/A	

7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2007 Wickersham Dr N/A Huntsville Texas 77340
8 CAMPAIGN TREASURER PHONE	AREA CODE (936) PHONE NUMBER 730-1784 EXTENSION N/A

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 09 / Day 26 / Year 2014   THROUGH   Month 10 / Day 25 / Year 2014

11 ELECTION

ELECTION DATE: Month 11 / Day 04 / Year 2014

ELECTION TYPE: ☐ Primary   ☐ Runoff   ☒ General   ☐ Special

12 OFFICE

OFFICE HELD (if any): N/A

13 OFFICE SOUGHT (if known): Huntsville City Council At-Large, Pos. 4

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

| 14 C/OH NAME Kendall Scudder	15 ACCOUNT # (Ethics Commission Filers)

16 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.	

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	N/A
☐ SPECIFIC	COMMITTEE ADDRESS N/A
	COMMITTEE CAMPAIGN TREASURER NAME N/A
	COMMITTEE CAMPAIGN TREASURER ADDRESS N/A

☐ additional pages

17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 110.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 485.10
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 40.51
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 1826.42
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 449.21
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

18 AFFIDAVIT

LEE WOODWARD
Notary Public
STATE OF TEXAS
My Comm. Exp. Feb. 19, 2017
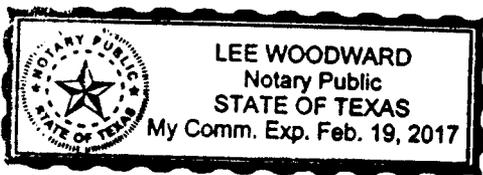
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kendall Scudder _____, this the 27th day of October, 20 14 , to certify which, witness my hand and seal of office.

_____	Lee Woodward	City Secretary
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A: *1*

2 FILER NAME Kendall Scudder	**3** ACCOUNT # (Ethics Commission Filers)

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of contribution ($)	**8** In-kind contribution description (if applicable)
10/03/2014	Dr. Frank and Janet Fair **6** Contributor address; City; State; Zip Code 3648 Youpon Huntsville, Texas 77340	100.00	(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) Professor	**10** Employer (See Instructions) Sam Houston State University

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/16/2014	Danielle Castello Contributor address; City; State; Zip Code 500 Inman St. #21 Denton, TX 76205	50.05	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Property Manager	Employer (See Instructions) Scion Group

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2014	Courtney Campbell Contributor address; City; State; Zip Code 555 Bowers Blvd #1618 Huntsville, Texas 77340	50.05	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Leasing Consultant	Employer (See Instructions) Arbors of Sam Houston

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/20/2014	Dr. Jeff Pruski Contributor address; City; State; Zip Code 2530 Robinson Way Huntsville, TX 77340	100.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Medical Doctor	Employer (See Instructions) Self

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of contribution ($)	In-kind contribution description (if applicable)
10/19/2014	Jim Allen Contributor address; City; State; Zip Code 210 FM 247 Rd Huntsville, Texas, 77340	75.00	(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) Self	Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1	2 FILER NAME KENDALL SCUDDER	3 ACCOUNT # (Ethics Commission Filers)

4 Date 10/22/2014	5 Payee name KSAM	
6 Amount ($) 501 00	**7 Payee address; City; State; Zip Code** P.O. Box 330 Huntsville, TX 77342	
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) RADIO ADS ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name N/A	Office sought N/A Office held N/A

Date 10/23/14	Payee name UNITED STATES POSTAL SERVICE	
Amount ($) 602 70	Payee address; City; State; Zip Code 3190 TX 30 Huntsville, Texas 77340	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) OTHER (MAILING)	Description (If travel outside of Texas, complete Schedule T) POSTAGE ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name N/A	Office sought N/A Office held N/A

Date 10/22/2014	Payee name WAGAMON PRINTING INC.	
Amount ($) 542 13	Payee address; City; State; Zip Code 1410 Sycamore Ave Huntsville, Texas 77340	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) PRINTING ~~ADVERTISING~~ EXPENSE	Description (If travel outside of Texas, complete Schedule T) MAIL-OUTS ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name N/A	Office sought N/A Office held N/A

Date 10/20/2014	Payee name FACEBOOK	
Amount ($) 140 00	Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) FACEBOOK ADS. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name N/A	Office sought N/A Office held N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED