

OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TEX

CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

ACCOUNT #  
(Ethics Commission Filers)

2 Total pages filed:

3

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR  FIRST Daniel L. MI  
NICKNAME LAST SUFFIX  
Scarth

OFFICE USE ONLY

Date Received 12:12 PM  
RECEIVED  
JAN 14 2013  
Date Hand-delivered or Postmarked  
Receipt # Amount  
Date Processed  
Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX APT / SUITE # CITY STATE ZIP CODE  
505 HighWoods Trail  
Ft. Worth, TX 76112  
 change of address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(817) 446.7311

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST John D. MI  
NICKNAME LAST SUFFIX  
Burge

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE  
728 Firewheel  
Ft. Worth, TX 76112

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
(817) 457.3338

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 Month Day Year  
7 / 15 / 12 THROUGH 1 / 15 / 13

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  Primary  Runoff  General  Special  
5 / 11 / 13

12 OFFICE

OFFICE HELD (if any)  
Councilmember  
District 4

13 OFFICE SOUGHT (if known)  
Councilmember  
District 4

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION  
TOTALS

1 TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 5823.84

CONTRIBUTION  
BALANCE

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

\$ 70,424

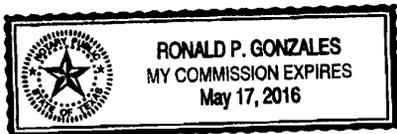
OUTSTANDING  
LOAN TOTALS

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

\$ 0

18 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.



*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Daniel L. Scarth, this the 15th day of January, 2013, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Ronald P. Gonzales  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# 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	2 FILER NAME <b>Danny Scott</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>7-16-11</b>	5 Payee name <b>Painter Communications</b>
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6 Amount (\$) <b>5727.55</b>	7 Payee address. City: State: Zip Code <b>75 Maple St. #203 Conshohocken, PA 19428</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising</b>	(b) Description (If travel outside of Texas complete Schedule T) <b>Telephone SVCS</b>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>1-5-13</b>	Payee name <b>Woodhaven Storage</b>
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Amount (\$) <b>42.00</b>	Payee address: City: State: Zip Code <b>6750 Mandy Lane Fort Worth, TX 76112</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Other</b>	Description (If travel outside of Texas complete Schedule T) <b>Postage</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>1-12-13</b>	Payee name <b>Office Depot</b>
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Amount (\$) <b>54.09</b>	Payee address: City: State: Zip Code <b>1460 Eastchase Parkway Fort Worth, TX 76120</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Other</b>	Description (If travel outside of Texas complete Schedule T) <b>Office Supplies</b>
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address, City, State: Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED