

FORM C/OH
COVER SHEET PG 1

Forms provided by Texas Ethics Com

CS.S

Revised 1/1/2024

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME **DEBRA SCAGGS**

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

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)

\$ 2442.62

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 2306.95

CONTRIBUTION
BALANCE

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

\$ 723.59

OUTSTANDING
LOAN TOTALS

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

\$ 0

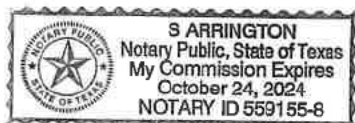
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information
required to be reported by me under Title 15, Election Code.

redacted for web posting

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by **Debra J. Scaggs** this the **26th** day of **April**,
20 **24**, to certify which, witness my hand and seal of office.

redacted for web posting

S. Arrington

Notary

Signature of officer administering oath

Printed name of officer administering oath

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)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

DEBRA SCAGGS

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2442.62
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	SCHEDULE E: LOANS	\$ 0
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 574.31
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 1732.64
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8

2 FILER NAME

DEBRA SCAGGS

3 Filer ID (Ethics Commission Filers)

4 Date

4-19-24

5 Full name of contributor

Jerry Fuller

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

125⁰⁰

6 Contributor address;

redacted for web posting

City; State; Zip Code

FRISCO, TX
75036

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4-20-24

Full name of contributor

Yolanda & Terry Gooch

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$200⁰⁰

Contributor address;

redacted for web posting

City;

State; Zip Code

LITTLE ELM,
TX. 75068

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4-9-24

Full name of contributor

Bridget Nelson

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

479.⁷⁰

Contributor address;

redacted for web posting

City;

State; Zip Code

Bartonville, TX
76286

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME DEBRA SCAGGS		3 Filer ID (Ethics Commission Filers)
4 Date 4/16/24	5 Full name of contributor out-of-state PAC (ID#: JOSEPH FARRIS 6 Contributor address; City; State; Zip Code redacted for web posting LITTLE ELM, TX 75068	7 Amount of contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-17-24	Full name of contributor out-of-state PAC (ID#: ANDREA NICHOLS Contributor address; City; State; Zip Code redacted for web posting DENTON, TX 76208	Amount of contribution (\$) 47.70
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-17-24	Full name of contributor out-of-state PAC (ID#: SPENCER BROLSMA Contributor address; City; State; Zip Code redacted for web posting CORINTH, TX 76210	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-20-24	Full name of contributor out-of-state PAC (ID#: PATRICK WAMHOFF Contributor address; City; State; Zip Code redacted for web posting FRISCO, TX 75034	Amount of contribution (\$) 36.54
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Debra Seaggs		3 Filer ID (Ethics Commission Filers)
4 Date 4/13/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Gravley	7 Amount of contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code redacted for web posting TX 75036		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-12-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Jett	Amount of contribution (\$) 191.70
Contributor address; City; State; Zip Code redacted for web posting Jefferson City TN 37760		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-12-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray Shaden	Amount of contribution (\$) 95.70
Contributor address; City; State; Zip Code redacted for web posting TX 76208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-14-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suzanne Blackstone	Amount of contribution (\$) 18.90
Contributor address; City; State; Zip Code redacted for web posting Colorado Springs CO 80904		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Debra J Scaggs		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/24	5 Full name of contributor out-of-state PAC (ID#: Lewis V. Toland	7 Amount of contribution (\$) 75⁰⁰
6 Contributor address; City; State; Zip Code redacted for web posting Denton TX 76207		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/8	Full name of contributor out-of-state PAC (ID#: Joel Peangman	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code redacted for web posting Denton TX 76206		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/24	Full name of contributor out-of-state PAC (ID#: Erika Van Zyl	Amount of contribution (\$) 47⁷⁰
Contributor address; City; State; Zip Code redacted for web posting Anseo TX 75035		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/9/24	Full name of contributor out-of-state PAC (ID#: Deborah Avellano	Amount of contribution (\$) 100⁰⁰
Contributor address; City; State; Zip Code redacted for web posting Corinth 76208		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME <div style="font-size: 1.2em; font-family: cursive;">Debra Scaggs</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="font-size: 1.2em; font-family: cursive;">4-7-24</div>	5 Full name of contributor out-of-state PAC (ID#: <div style="font-size: 1.2em; font-family: cursive;">Patrick Wamhoff</div>	7 Amount of contribution (\$) <div style="font-size: 1.5em; font-family: cursive;">36¹⁸</div>
	6 Contributor address: City: State: Zip Code redacted for web posting <div style="font-size: 1.2em; font-family: cursive;">Inwood, TX 75034</div>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <div style="font-size: 1.2em; font-family: cursive;">4/7/24</div>	Full name of contributor out-of-state PAC (ID#: <div style="font-size: 1.2em; font-family: cursive;">Teri Wilson</div>	Amount of contribution (\$) <div style="font-size: 1.5em; font-family: cursive;">18⁹⁰</div>
Contributor address: City: State: Zip Code redacted for web posting <div style="font-size: 1.2em; font-family: cursive;">Sanger, TX 76266</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <div style="font-size: 1.2em; font-family: cursive;">4-7-24</div>	Full name of contributor out-of-state PAC (ID#: <div style="font-size: 1.2em; font-family: cursive;">Layne Hayes</div>	Amount of contribution (\$) <div style="font-size: 1.5em; font-family: cursive;">20⁰⁰</div>
Contributor address: City: State: Zip Code redacted for web posting <div style="font-size: 1.2em; font-family: cursive;">Denton, TX 76210</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <div style="font-size: 1.2em; font-family: cursive;">4-7-24</div>	Full name of contributor out-of-state PAC (ID#: <div style="font-size: 1.2em; font-family: cursive;">Sheila Bowles</div>	Amount of contribution (\$) <div style="font-size: 1.5em; font-family: cursive;">40⁰⁰</div>
Contributor address: City: State: Zip Code redacted for web posting <div style="font-size: 1.2em; font-family: cursive;">Denton, TX 76201</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Debra Scaggs		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/24	5 Full name of contributor Joseph Ferris out-of-state PAC (ID#: 6 Contributor address; City; State; Zip Code redacted for web posting Little Elm, TX 75068	7 Amount of contribution (\$) 10⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/7/24	Full name of contributor Charlotte Smith out-of-state PAC (ID#: Contributor address; City; State; Zip Code Ponder, TX	Amount of contribution (\$) 50⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/5/24	Full name of contributor Lenny Van Zyl out-of-state PAC (ID#: Contributor address; City; State; Zip Code redacted for web posting Denton, TX 76201	Amount of contribution (\$) 25⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/12/24	Full name of contributor Ray Shadie out-of-state PAC (ID#: Contributor address; City; State; Zip Code redacted for web posting , Denton, TX 76208	Amount of contribution (\$) 95⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Debra Scagg		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/24	5 Full name of contributor out-of-state PAC (ID#: Vanqu Heffner <hr/> 6 Contributor address; City; State; Zip Code redacted for web posting Bella Vista AR 72715	7 Amount of contribution (\$) 47⁰⁰
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4/6/24	Full name of contributor out-of-state PAC (ID#: April Wilson <hr/> Contributor address; City; State; Zip Code redacted for web posting Denton, TX 76210	Amount of contribution (\$) 10⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/6/24	Full name of contributor out-of-state PAC (ID#: Mary Keshfeldt <hr/> Contributor address; City; State; Zip Code redacted for web posting Denton, TX 76201	Amount of contribution (\$) 66⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4/6/24	Full name of contributor out-of-state PAC (ID#: Debra Watson <hr/> Contributor address; City; State; Zip Code redacted for web posting Denton, TX 76209	Amount of contribution (\$) 100⁰⁰
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Debra Scaggs		3 Filer ID (Ethics Commission Filers)
4 Date 4-4-24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela Thomas	7 Amount of contribution (\$) 50⁰⁰
6 Contributor address; City; State; Zip Code redacted for web posting Alexton TX 76208		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 4-7-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Kershner	Amount of contribution (\$) 10⁰⁰
Contributor address; City; State; Zip Code TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-6-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amand Osborne	Amount of contribution (\$) 10.00
Contributor address; City; State; Zip Code Louisville, KY 40291		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 4-6-24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Carroll	Amount of contribution (\$) 250⁰⁰
Contributor address; City; State; Zip Code redacted for web posting Lantana, TX 76226		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

1 TOTAL PAGES SCHEDULE F4:	2 FILER NAME Debra Scaggs		3 FILER ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$ 574.31
5 CREDIT CARD ISSUER	Name of financial institution Guaranty Bank & Trust		
6 PAYMENT	(a) Amount Charged \$ 27.20	(b) Date Expenditure Charged 4-12-24	(c) Date(s) Credit Card Issuer Paid 4-12-24
7 PAYEE	(a) Payee name USPS	(b) Payee address; City, State, Zip Code 2101 Colorado Blvd. Denton, TX 76205	
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Adv. Expense		(b) Description Stamps
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 Debra Scaggs School Board of Trustees		
PAYMENT	(a) Amount Charged \$ 30.17	(b) Date Expenditure Charged 4-19-24	(c) Date(s) Credit Card Issuer Paid 4-22-24
PAYEE	(a) Payee name Dominos Pizza	(b) Payee address; City, State, Zip Code 709 Sunset Denton TX 76201	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Canvassing People
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 Debra Scaggs School Board of Trustees		
PAYMENT	(a) Amount Charged \$ 13.60	(b) Date Expenditure Charged 4-16-24	(c) Date(s) Credit Card Issuer Paid 4-16-24
PAYEE	(a) Payee name USPS	(b) Payee address; City, State, Zip Code 2101 Colorado Blvd. Denton, TX 76205	
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Adv. Expense		(b) Description Stamps
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 Debra Scaggs School Board Trustee		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F4**EXPENDITURE CATEGORIES FOR BOX 10(a)**

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

USE A NEW PAGE FOR EACH CREDIT CARD ISSUER

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Debra Scaggs	3 Filer ID (Ethics Commission Filers)
4 Date 4-11-24	5 Payee name Vista Print	
6 Amount (\$) 1604.36 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 275 Wyman St Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Adv. Expense	(b) Description post cards
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Debra Scaggs	Office sought Office held School Board Trustee
Date 4-14-24	Payee name Office Depot	
Amount (\$) \$64.14 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2300 San Jacinto Blvd. Denton, TX 76205	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adv. Expense	Description Copies
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Debra Scaggs	Office sought Office held School Board Trustee
Date 4-14-24	Payee name Office Depot	
Amount (\$) \$64.14 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2300 San Jacinto Blvd Denton, TX 76205	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Adv. Expense	Description Copies
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Debra Scaggs	Office sought Office held School Board Trustee

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED