

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00043610	2 PAGE # 1 of 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Michael	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received <div style="text-align: center; font-size: small;"> BY: ELECTIONS STEV HARRINGTON 2014 JUL 10 AM 10:02 TARRANT COUNTY FILED </div> Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged </div>	
NICKNAME LAST SUFFIX Mike Hrabal	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <input type="checkbox"/> Change of Address		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	MS / MRS / MR FIRST MI Mr. Mark		
5 CAMPAIGN TREASURER NAME	NICKNAME LAST SUFFIX Jones	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE (Residence or business)	
6 CAMPAIGN TREASURER ADDRESS	AREA CODE PHONE NUMBER EXTENSION	Month Day Year Month Day Year 01/01/2014 THROUGH 06/30/2014	
7 CAMPAIGN TREASURER PHONE	8 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 \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
10 ELECTION	OFFICE HELD (if any) Tarrant Co Ct. at Law #3	12 OFFICE SOUGHT (if known)	
11 OFFICE	GO TO PAGE 2		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

13 C/OH NAME Hrabal, Michael (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00043610

15 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	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

FILED
 ARRAVAL COUNTY
 2014 JUL 10 AM 11:02
 CLERK OF COURTS
 STATE OF TEXAS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 390.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 839.68

CONTRIBUTION BALANCE

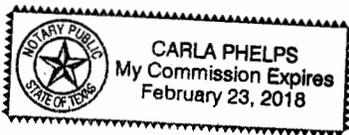
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 43,264.92

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 20,500.00

17 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Mike Hrabal

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Mike Hrabal, this the 9 day of July, 2014, to certify which, witness my hand and seal of office.

Carla Phelps

Signature of officer administering oath

Carla Phelps

Print name of officer administering oath

notary

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/6	
2 FILER NAME Hrabal, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00043610	
4 Date 02/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Patrick (Mr.) 6 Contributor address; City; State; Zip Code 18730 FM 1565 Terrell, TX 75160	7 Amount of contribution (\$) \$190.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation Attorney		10 Contributor's job title	
11 Contributor's employer / law firm Smith, Smith & Smith, LLP		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tatarevich, Ted (Mr.) Contributor address; City; State; Zip Code 1833 Bedford Rd Bedford, TX 76021	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Contributor's principal occupation Attorney		Contributor's job title	
Contributor's employer / law firm Self		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

FILED
 TARRANT COUNTY
 2014 JUL 10 AM 11:00
 STEVE ARROYO
 ELECTIONS ADMINISTRATION

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial 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 PAGE # Schedule: 1/1 Report: 4/6		2 FILER NAME Hrabal, Michael (Mr.)		3 ACCOUNT # (TEC filers) 00043610	
4 Date 04/18/2014		5 Payee name US Postal Service			
6 Amount (\$) \$62.00		7 Payee address City: State; Zip Code 317 E Kennedale Pkwy Kennedale, TX 76060-3267			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PO Box	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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TARRANT COUNTY
2014 JUL 10 AM 11:03
SILVE RABON
ELECTIONS ADMINISTRATOR
BY:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 5/6	2 FILER NAME Hrabal, Michael (Mr.)	3 ACCOUNT # (TEC filers) 00043610
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4 Date 01/03/2014	5 Payee name Cisneros Restaurants, Inc.
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6 Amount (\$) \$262.68 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 2629 N. Main Fort Worth, TX 76164
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Holiday Luncheon for County Clerks
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Date 02/21/2014	Payee name State Bar of Texas
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Amount (\$) \$250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code P.O. Box 12487 Austin, TX 78711
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TBLS Recertification Fee
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Date 05/15/2014	Payee name State Bar of Texas
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Amount (\$) \$265.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code P.O. Box 12487 Austin, TX 78711
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bar Dues
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 TARRANT COUNTY
 2014 JUL 10 AM 11:03
 STEVE NABER
 ELECTIONS ADMINISTRATOR

OUTSTANDING LOANS

SCHEDULE L

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 6/6

2 FILER NAME Hrabal, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00043610

LENDER INFORMATION

4 Name of lender
Hrabal, Mike (Mr.)

5 Lender address; City; State; Zip Code
P.O. Box 601
Kennedale, TX 76060

GUARANTOR INFORMATION

6 Name of guarantor

7 Guarantor address; City; State; Zip Code

not applicable