JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:			
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR Chen! NICKNAME LAST	suffix	OFFICE USE ONLY Date Received 8Y:			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #:	CITY: STATE: ZIP CODE	TARRANT COUL 2016 JAN 15 PM FRANK PHILLIP LECTIONS ADMINIST BY: PHILLIP BY: PH			
5 CANDIDATE/ OFFICEHOLDER PHONE	ADEA CORE DUONIE NILIMBED	EXTENSION	Date Hand Divered or Date Postmarked Receipt # Amount \$			
6 CAMPAIGN TREASURER NAME	NICKNAME LAST		Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO ROX PI FASE). APT / S	SHITE #- CITV- STATE-	ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION				
9 REPORT TYPE	January 15 30th day before		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THRO	DUGH Month Day	Year 1 6			
11 ELECTION	ELECTION DATE Month Day Year Primary 2018 General	ELECTION TYPE Runoff Other Description Special				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	GE			
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME			15 Filer ID (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 SPECIFIC		8) EL 20			
		COMMITTEE ADDRESS	FARRAN			
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME	T COUNT			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	1 Y 2 O4 ATOR			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMI				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ _0 -			
EXPENDITURE TOTALS	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 211.95			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 211.95			
CONTRIBUTION BALANCE	5. TOTAL F	FDAY \$ 67.57				
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF AY OF THE REPORTING PERIOD	* 822.10			
18 AFFIDAVIT						
MARY ANN CLIFTON MY COMMISSION EXPIRES October 17, 2016 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 fitte 15, Election Code. Signature of Candidate or Officeholder						
AFFIX NOTARY STAMP/SEALABOVE						
Sworn to and subscribed before me, by the said <u>Cherie S. Hardy</u> , this the <u>13th</u>						
day of faway , 20 6, to certify which, witness my hand and seal of office						
Mary An	e Clefton	MARY ANN CLIFTON	Court reporter			
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath						

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L:			
2 FILER NAME		3 Filer	ID (Ethics Commiss	ion Filers)	
LENDER INFORMATION	4 Name of lender, Hardy (Self)	1,		A STATE OF THE STA	
610,15	5 Lender address; City; State; Zip Code	7610	09		
GUARANTOR INFORMATION	6 Name of guaranter				
not applicable	7 Guarantor address; City; State; Zip Code				
LENDER INFORMATION	Name of lender (Sulf) Lender address; City; State; Zip Code				
J1111	aboul		BY:-	5	
GUARANTOR INFORMATION	Name of guarantor		FRANK	RR A	
not applicable	Guarantor address; City; State; Zip Code		ADMINIST	OM	
LENDER INFORMATION	Name of lender		RATOR	7	
	Lender address; City; State; Zip Code		, i		
GUARANTOR INFORMATION	Name of guarantor				
not applicable	Guarantor address; City; State; Zip Code				
LENDER INFORMATION	Name of lender				
	Lender address; City; State; Zip Code				
GUARANTOR INFORMATION	Name of guarantor				
not applicable	Guarantor address; City; State; Zip Code				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					