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(512)463-5800 TDD 1-800-735-2989

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CANDIDATE / CAMPAIGN F	FORM COVER SHE	C/OH et pg 1					
The C/OH INSTRUCTION GODE explains now to complete this form. (E			COUNT # hics Commission filers) 1000001	2 PAGE # 1 of 3			
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRS Hon. Ron	ST	MI	OFFICE US	E,QNLY		
NAME				Date Received			
	NICKNAME LAST Wrigt		SUFFIX	STEVE R	FIL RRANT JAN 15		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #	#; CITY;	STATE; ZIP CODE	Date Hand-delivered or	PMI		
Change of Address				TOR	4 <sup>.</sup> Y		
E CAMPAIGH	NO (1000 (100			Receipt #	Amount		
5 CAMPAIGN TREASURER	MS/MRS/MR FIRS Hon. Ron	51	M	Date Processed			
NAME	NICKNAME LASI		SUFFIX	Date Imaged			
	Wrigt		GOTTA				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE	E); APT / SUITE #;	CITY; STATE;	ZIP CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM	BER	EXTENSION				
8 REPORT TYPE	X January 15 30th	day before election	Runoff	15th day after can appointment (offic			
	July 15 8th d	lay before election	Exceeded \$500 limit	Final report (Attac	th C/OH - FR)		
9 PERIOD COVERED	Month Day Year		Month Day	Year			
	07/01/2013	THROUGH	12/31/20	13			
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	Runoff	General [	Special		
44.055/05			140				
11 OFFICE	OFFICE HELD (if any) Tax Assessor Collector		12 OFFICE SOUGHT (if known	)			
GO TO PAGE 2							

Texas Ethics Commission

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

	ala kada sa kada kada kada kada kada kada				
			14 ACCOUNT # (Ethics Commission filer 00000001	rs)	
15 NOTICE FROM	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				
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		-	
	GENERAL	COMMITTEE ADDRESS	TA 2014 ELECTI		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	RAN IS ANT	I	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	PHI2: NOTRAT		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	ED \$ 0.00	1	
	4. TOTAL	POLITICAL EXPENDITURES	<b>\$</b> 149.85		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		<b>\$</b> 615.77	,	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		E \$ 0.00		
17 AFFIDAVIT	1999 - Carlo Maria Maria Carlo Maria Maria Maria Managira da Santa Maria Maria Maria Managira da Santa Maria Ma				
	CHARLOTTE J TA NOTARY PU STATE OF TI My Comm. Exp. 01-	is true and correct and include me under Title 15, Election Co BLIC EXAS 12-2017		_	
AFFIX NOTARY S	STAMP / SEAL ABOV	/E			

Sworn to and subscribed before me, by the said <u>Charlotte J. Tackett</u>, this the <u>1545</u> day or <u>January</u>, 20<u>14</u>, to certify which, witness my hand and seal of office. <u>Charlotte J. Jackett</u>, this the <u>1545</u> day <u>Signature of officer administering oath</u> <u>Print name of officer administering oath</u> <u>Title of officer administering oath</u>

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

## POLITICAL EXPENDITURES

## SCHEDULE F

EXPENDITURE CATEGORIES								
Advertising Expe Accounting/Bank		ntract Labor Loan Rep sing Expense Transport	ayment/Reimbursement ation Equipment & Related Expense					
Consulting Exper Event Expense	nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Distri	ons/Donations Made By ate/Officeholder/Political Committee						
Fees	Printing Expense Office Overhead/Re	ental Expense OTHER (e	enter a category not listed above)					
	The Instruction Guide explains how	to complete this form.						
1 PAGE # Schedule: 1/1 Re	2 FILER NAME Wright, Ron (Hon.)		3 ACCOUNT # (TEC filers) 00000001					
4 Date	5 Payee name		1 0000001					
10/31/2013	GoDaddy.com							
6 Amount (\$)	7 Payee address City; State; Zip Code							
\$99.85	14455 N. Hayden Rd							
	Ste 226 Scottsdale, AZ 85260							
•		(b) Description (If travel ou	tside of Texas, complete Schedule T)					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Domain Renewal						
			21 ELE					
EXPERIMENT			77					
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:					
to benefit C/OH			ST X R					
Date	Payee name		11 C 23					
08/29/2013	Reagan Legacy Republican Women PAC		Ep - on					
Amount (\$)	Payee address City; State; Zip Code							
\$50.00	P.O. Box 177431 Arlington, TX 76003							
		7	- 24 ×					
	Category (See Categories listed at the top of this schedule)	Description (If travel ou	tside of Texas, complete Schedule T)					
PURPOSE	Advertising Expense	Cookbook Ad						
EXPENDITURE								
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:					
direct expenditure		onice sought.	Childe Hold.					
to benefit C/OH	<u> </u>							
			10					
			· · · · ·					