

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

(Pg 1 of 11)

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

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

11

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR MR FIRST MI
Ralph O.
NICKNAME LAST SUFFIX
Swearingin Jr.

OFFICE USE ONLY

Date Received

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

change of address

5 CANDIDATE / OFFICEHOLDER PHONE

6 CAMPAIGN TREASURER NAME

MS / MRS / MR MR FIRST MI
TOBIN R.
NICKNAME LAST SUFFIX
Copeland

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

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 THROUGH Month Day Year
09 / 26 / 14 THROUGH 10 / 25 / 14

11 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE
11 / 04 / 14
 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)
Judge, Justice of the Peace, Pct. 1

13 OFFICE SOUGHT (if known)

GOTO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: FORM JC/OH
SUPPORT & TOTALS COVER SHEET PG 2

(pg 2 of 11)

14 C/OH NAME Ralph D. Swearingin Jr. 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: GENERAL SPECIFIC

COMMITTEE NAME: _____

COMMITTEE ADDRESS: _____

COMMITTEE CAMPAIGN TREASURER NAME: _____

COMMITTEE CAMPAIGN TREASURER ADDRESS: _____

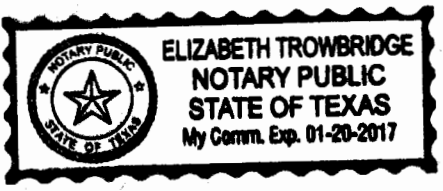
additional pages

FILED
 TARRANT COUNTY
 2014 OCT 27 AM 11:02
 CLERK OF COUNTY CLERK
 ELECTIONS ADMINISTRATION
 BY:

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>3,800.⁰⁰</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>21,761.⁸⁴</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>14,642.⁰⁵</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>40,673.³⁰</u>

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.



Ralph Swearingin Jr.
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ralph Swearingin Jr., this the 27th day of October, 20 14, to certify which, witness my hand and seal of office.

Elizabeth Trowbridge ELIZABETH TROWBRIDGE NOTARY
 Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

(pg 3 of 11)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

(pg 1 of 3)

2 FILER NAME

Ralph D. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

-

4 Date

9/29/14

5 Full name of contributor out-of-state PAC (ID# _____)

Arlington Republican Club PWR-PAC

6 Contributor address; City; State; Zip Code

P.O. Box 14095
Arlington, TX 76094

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

-

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

10 Contributor's job title

Arlington Republican Club PAC

11 Contributor's employer/law firm

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date

09/29/14

Full name of contributor out-of-state PAC (ID# _____)

Republican Women of Arlington PAC

Contributor address; City; State; Zip Code

P.O. Box 14317
Arlington, TX 76094

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

-

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Republican Women of Arlington PAC

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

9/30/14

Full name of contributor out-of-state PAC (ID# _____)

Republican Party of Texas
Candidate Resource Committee

Contributor address; City; State; Zip Code

1108 Lavaca St., Suite 500
Austin, TX 78701

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

-

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Contributor's job title

Republican Party of Texas C.R.C.

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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TARRANT COUNTY
2014 OCT 27 11:11:02
ELECTIONS ADMINISTRATION

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

SCHEDULE A (J)

(pg 4 of 11)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): (pg 2 of 3)

2 FILER NAME
Ralph D. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date
10/04/14

5 Full name of contributor out-of-state PAC (ID#: _____)
Tom Quinones III

7 Amount of contribution (\$)
\$200.00

8 In-kind contribution description (if applicable)
—

6 Contributor address; City; State; Zip Code
*4524 Newman Dr.
Halton City, TX 76117*

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Attorney at Law

10 Contributor's job title
Attorney

11 Contributor's employer/law firm
Self employed

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date
10/04/14

Full name of contributor out-of-state PAC (ID#: _____)
Martin B. Leewright

Amount of contribution (\$)
\$700.00

In-kind contribution description (if applicable)
—

Contributor address; City; State; Zip Code
*3700 Fenton
Ft. Worth, TX 76133*

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Attorney at Law

Contributor's job title
Attorney

Contributor's employer/law firm
Self employed

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date
10/10/14

Full name of contributor out-of-state PAC (ID#: _____)
David Hunt

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)
—

Contributor address; City; State; Zip Code
*6804 Pine Valley Pl.
Ft. Worth, TX 76132*

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Retail Sales

Contributor's job title
owner

Contributor's employer/law firm
Self employed

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

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TARRANT COUNTY
2014 OCT 27 AM 11:02
CLERK OF COUNTY CLERK
ELECTIONS ADMINISTRATION

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

(pg 5 of 11)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

15 3
of 3

2 FILER NAME

Ralph O. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/20/14

5 Full name of contributor out-of-state PAC (ID# _____)

Vandolyn Russell

6 Contributor address; City; State; Zip Code

340 Blue Mound Rd
Saginaw, TX 76131

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Accountant

10 Contributor's job title

Certified Public Accountant

11 Contributor's employer/law firm

self employed

12 Law firm of contributor's spouse (if any)

—

13 If contributor is a child, law firm of parent(s) (if any)

—

Date

10/22/14

Full name of contributor out-of-state PAC (ID# _____)

Thanh T. HA

Contributor address; City; State; Zip Code

4045 E. BELKNAP ST. # 11
FR. WORTH, TX 76111

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Insurance Sales

Contributor's job title

owner

Contributor's employer/law firm

self employed

Law firm of contributor's spouse (if any)

—

If contributor is a child, law firm of parent(s) (if any)

—

Date

10/22/14

Full name of contributor out-of-state PAC (ID# _____)

Apartment Association of Tenant County PAC

Contributor address; City; State; Zip Code

6350 BAKER BLVD.
RICHLAND HILLS, TX 76118

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

PAC

Contributor's job title

—

Contributor's employer/law firm

—

Law firm of contributor's spouse (if any)

—

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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TARRANT COUNTY
2014 OCT 27 11:02
STEVENS
ELECTIONS ADMINISTRATOR

Note: The loan shown on this report is the total of political expenditures made from personal funds and reported on Schedule G.

LOANS (JUDICIAL) SCHEDULE E (J)

(Pg 6 of 11)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule E(J): 1

2 FILER NAME: Ralph D. Swearingin Jr. 3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: $\Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow \Rightarrow$ \$ 0

5 Date of loan: 09/29/14 7 Name of lender: Ralph D. Swearingin Jr out-of-state PAC (ID#: _____) 9 Loan Amount (\$): 21,766.84

6 Is lender a financial institution? N 8 Lender address; City; State; Zip Code: 6890 Bluebonnet Ct. N. Richland Hills, TX 76187 10 Interest rate: 0

11 Maturity date: 0

12 Lender's Principal Occupation: Judge 13 Lender's Job Title: Judge

14 Lender's Employer/Law Firm: — 15 Law Firm of lender's spouse (if any): —

16 If lender is child, law firm of parent(s) (if any): —

17 Description of Collateral: none 18 Check if personal funds were deposited into political account:

19 GUARANTOR INFORMATION: not applicable 20 Name of guarantor: N/A 22 Amount Guaranteed (\$):

21 Guarantor address; City; State; Zip Code: _____

23 Guarantor's Principal Occupation: N/A 24 Guarantor's Job Title:

25 Guarantor's Employer/Law Firm: — 26 Law Firm of guarantor's spouse (if any): —

27 If guarantor is child, law firm of parent(s) (if any): —

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 TARRANT COUNTY
 2014 OCT 27 AM 11:02
 STATE CAPITAL
 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F
(pg 7 of 11)

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 Candidate/Officeholder/Political Committee |
| Event Expense | Printing Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | | Office Overhead/Rental Expense | |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 (pg 1 of 2)	2 FILER NAME Ralph O. Swearingin, Jr.	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9/29/14	5 Payee name Home Depot
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6 Amount (\$) \$ 19.45	7 Payee address; City; State; Zip Code 2013 Hwy 377 Keller, TX 76248
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other - Signage Supply	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/04/14	Payee name Enchiladas Ole
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Amount (\$) \$ 64.89	Payee address; City; State; Zip Code 901 N. Sylvania Ft. Worth, TX 76111
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food, beverage for workers	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/06/14	Payee name Pressman Printing
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Amount (\$) \$ 432.51	Payee address; City; State; Zip Code P.O. Box 151408 Ft. Worth, TX 76108
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing & Mailing	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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 10/10/14	Payee name Pressman Printing
-------------------------	--

Amount (\$) \$ 12,863.72	Payee address; City; State; Zip Code P.O. Box 151408 Ft. Worth, TX 76108
------------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Postage	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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

POLITICAL EXPENDITURES

SCHEDULE F

(pg 8 of 11)

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials
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 Total pages Schedule F: 2 (pg 2 of 2)	2 FILER NAME Ralph O. Swearingin, Jr	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10/13/14	5 Payee name Home Depot
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6 Amount (\$) \$ 366.69	7 Payee address; City; State; Zip Code 2013 Hwy 377 Keller, TX 76248
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other - Signage supply	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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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 10/18/14	Payee name Home Depot
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Amount (\$) \$ 14.58	Payee address; City; State; Zip Code 2013 Hwy 377 Keller, TX 76248
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other - Signage Supply	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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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
------	------------

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) <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
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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
------	------------

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) <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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G
(199 of 11)

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 Candidate/Officeholder/Political Committee |
| Event Expense | Polling Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | Printing Expense | Office Overhead/Rental Expense | |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: **2** (1 of 2) **2** FILER NAME: *Ralph O. Swearingin, Jr* **3** ACCOUNT # (Ethics Commission Filers)

4 Date: *9/29/14* **5** Payee name: *Home Depot*

6 Amount (\$): *19.45* **7** Payee address; City; State; Zip Code: *2013 Hwy 377 Keller, TX 76248*
 Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE: (a) Category (See categories listed at the top of this schedule): *other signage supply* (b) Description (if travel outside of Texas, complete Schedule T): *signage materials*
 Check if Austin, TX, officeholder living expense

Date: *10/04/14* Payee name: *enchiladas ole*

Amount (\$): *9.00* Payee address; City; State; Zip Code: *901 N. Sylvania Ft. Worth, TX 76111*
 Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE: Category (See categories listed at the top of this schedule): *Food beverage for workers* Description (if travel outside of Texas, complete Schedule T):
 Check if Austin, TX, officeholder living expense

Date: *10/06/14* Payee name: *Pressman Printing*

Amount (\$): *8,432.51* Payee address; City; State; Zip Code: *P.O. Box 151408 Ft. Worth, TX 76108*
 Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE: Category (See categories listed at the top of this schedule): *Printing & Mailing* Description (if travel outside of Texas, complete Schedule T):
 Check if Austin, TX, officeholder living expense

Date: *10/10/14* Payee name: *Pressman Printing*

Amount (\$): *12,863.72* Payee address; City; State; Zip Code: *P.O. Box 151408 Ft. Worth, TX 76108*
 Reimbursement from political contributions intended

PURPOSE OF EXPENDITURE: Category (See categories listed at the top of this schedule): *other - postage* Description (if travel outside of Texas, complete Schedule T):
 Check if Austin, TX, officeholder living expense

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G
(pg 10 of 11)

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 Candidate/Officeholder/Political Committee |
| Event Expense | Polling Expense | Travel Out Of District | OTHER (enter a category not listed above) |
| Fees | Printing Expense | Office Overhead/Rental Expense | |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>2 (2 of 2)</i>	2 FILER NAME <i>Ralph O. Swearingin Jr</i>	3 ACCOUNT # (Ethics Commission Filers)
---	--	---

4 Date <i>10/13/14</i>	5 Payee name <i>Home Depot</i>
----------------------------------	--

6 Amount (\$) <i>\$ 366.69</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>2013 Hwy 377 Keller TX 76248</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other signage supply</i>	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	--

Date <i>10/18/14</i>	Payee name <i>Home Depot</i>
-------------------------	---------------------------------

Amount (\$) <i>\$ 14.58</i> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <i>2013 Hwy 377 Keller TX 76248</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other signage supply</i>	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	--

Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	--

Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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) <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	--

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

FILED
 TARRANT COUNTY
 2014 OCT 21 AM 11:02
 SEVEN SEVEN SEVEN
 ELECTIONS ADMINISTRATOR
 R.V.

OUTSTANDING LOANS

Note: outstanding loans are the total of political expenditures made from personal funds

SCHEDULE L

(pg 1 of 11)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

1

2 FILER NAME

Ralph D. Swearingin, Jr.

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

Ralph D. Swearingin, Jr.

5 Lender address; City; State; Zip Code

6890 Bluebonnet Ct. N. Richland Hills, TX 76182

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 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

LENDER INFORMATION

Name of lender

Lender address; City; State; Zip Code

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

FILED
TARRANT COUNTY
2011 OCT 27 AM 11:02
STATE ELECTIONS ADMINISTRATOR
RY