

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)	2 Total pages filed: 3
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MR FIRST MI RALPH D. NICKNAME LAST SUFFIX SWEARINGIN JR.	<div style="border: 1px solid black; padding: 5px;"> OFFICE USE ONLY Date Received Date Hand Delivered or Postmarked Receipt # Amount Date Processed Date Imaged </div> <div style="position: absolute; top: 50px; right: 50px; transform: rotate(90deg); font-size: small;"> FILED TARRANT COUNTY 2016 JAN -5 PM 1:35 FRANK PHILLIPS ELECTIONS ADMINISTRATOR BY: </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS (NO BOX); APT / SUITE #; CITY; STATE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION		
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	<input checked="" 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 type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach COH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/15 12/31/15		
11 ELECTION	ELECTION DATE Month Day Year N/A	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Judge, Justice Court, Pct. 1	13 OFFICE SOUGHT (if known)	
GOTO PAGE 2			

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

(pg 2 of 3)

14 C/OH NAME

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.

N/A

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

BY:

FRANK PHILLIPS
ELECTIONS ADMINISTRATOR

2016 JAN -5 PM 1:35

FILED
TARRANT COUNTY

additional pages

17 CONTRIBUTION TOTALS

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

\$ *0*

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

\$ *0*

EXPENDITURE TOTALS

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

\$ *0*

4. TOTAL POLITICAL EXPENDITURES

\$ *0*

CONTRIBUTION BALANCE

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

\$ *16,924.98*

OUTSTANDING LOAN TOTALS

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

\$ *41,112.17*

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.

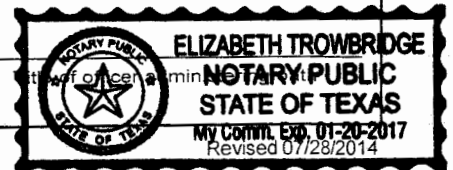
Ralph Swearingin Jr.
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ralph Swearingin Jr., this the 4TH day of January, 20 16, to certify which, witness my hand and seal of office.

Elizabeth Trowbridge
Signature of officer administering oath

ELIZABETH TROWBRIDGE
Print name of officer administering oath



OUTSTANDING LOANS

SCHEDULE L

(Pg 3 of 3)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L: 1

2 FILER NAME

Ralph O. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

Ralph O. Swearingin Jr.

5 Lender address; City; State; Zip Code

6890 Bluebonnet Ct. Northland 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

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 2016 JAN -5 PM 1:35
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR
 BY:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED