

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 8
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Ronald	MI
	NICKNAME	LAST Wright	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	Date Hand Delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed	Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Ronald	MI
	NICKNAME	LAST Wright	SUFFIX
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
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	Month Day Year 01/01/2016	THROUGH	Month Day Year 06/30/2016
10 ELECTION	ELECTION DATE Month Day Year 11/08/2016		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Place TaxAssessor District County		12 OFFICE SOUGHT (if known) Place TaxAssessor District County

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 2016 JUL 15 AM 11:19
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 CLERK
 PS
 MAIL ROOM

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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13 C / OH NAME Wright, Ronald	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

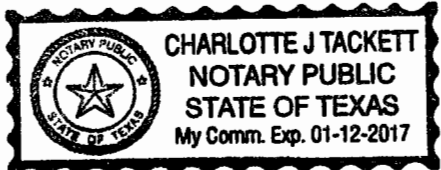
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	BY: _____ ELECTION ADMINISTRATOR 2016 JUL 15 AM 11:19 TARRANT COUNTY FILED
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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)	\$	6,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	1,652.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,421.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,250.00

17 AFFADAVIT

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.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Charlotte J. Tackett, this the 15th day of July, 2016, to certify which, witness my hand and seal of office.

 Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Wright, Ronald	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,600.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,652.00
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

BY: _____
 FRANK PHILLIPS
 ELECTIONS ADMINISTRATOR
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/8
2 FILER NAME Wright, Ronald		3 Filer ID
4 Date 02/02/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aamad, Ishfaq (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 2467 Waterside Dr. Grand Prairie, TX 75054	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UTA
Date 01/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Nadar (Mr.) <hr/> Contributor address; City; State; Zip Code 1308 Carina Dr. Arlington, TX 76013	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Food Distributor		Employer (See Instructions) Buffalo Food Service
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couch, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code 2131 N. Collins Arlington, TX 76011	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Private Investigator		Employer (See Instructions) TX Spartan Group International
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farah, Sam (Mr.) <hr/> Contributor address; City; State; Zip Code 221 Phlox Ln. Burleson, TX 76028	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Delisias (Owner)		Employer (See Instructions) Self
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halaby, Hassan (Mr.) <hr/> Contributor address; City; State; Zip Code 7901 Chartwell Lane Fort Worth, TX 76120	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/8
2 FILER NAME Wright, Ronald		3 Filer ID
4 Date 01/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jallad, Allaeddin (Mr.) <small>ELECTORAL ADMINISTRATOR</small>	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 620 E. Lynn Creek Dr. Arlington, TX 76002		
8 Principal occupation / Job title (See Instructions) Jallad's Enterprises		9 Employer (See Instructions) Self
Date 02/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joulani, Eddie (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2980 Rush Ct. Arlington, TX 76017		
Principal occupation / Job title (See Instructions) Car Dealer		Employer (See Instructions) Auto One
Date 02/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair Sampson LLP	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 100 Throckmorton Suite 300 Fort Worth, TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Fernandez (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 717 W. Division Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Bail Bondsman		Employer (See Instructions) All Nite Bail Bonds
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qaddura, Jamal (Mr.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 622 W. Main St. Arlington, TX 76010		
Principal occupation / Job title (See Instructions) Bail Bond Agent		Employer (See Instructions) Orville Person Bail Bonds

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/8
2 FILER NAME Wright, Ronald		3 Filer ID
4 Date 05/03/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Thomas (The Honorable)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 3708 Edgewater Drive Bedford, TX 76021	
8 Principal occupation / Job title (See Instructions) District Clerk		9 Employer (See Instructions) Tarrant County

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ELECTORAL ADMINISTRATION
BY: _____

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 7/8		2 FILER NAME Wright, Ronald BY: _____		3 Filer ID
4 Date 04/22/2016		5 Payee name Ownby, Craig (Mr.)		
6 Amount (\$) \$970.00		7 Payee address; City; State; Zip Code 7106 Lighthouse Arlington, TX 76002		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fund raising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 04/19/2016		Payee name Rodriguez, Kelly (Ms.)		
Amount (\$) \$150.00		Payee address; City; State; Zip Code Mansfield Sub Courthouse 1100 E. Broad St. Mansfield , TX 76063		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Open house with Mansfield Chamber of Commerce	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 03/19/2016		Payee name TCGOP		
Amount (\$) \$250.00		Payee address; City; State; Zip Code 7524 Mosier View Ct. Suite 230 Fort Worth, TX 76118		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SD-9 Convention Ad	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 8/8	2 FILER NAME Wright, Ronald	3 Filer ID
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4 Date 03/19/2016	5 Payee name TCGOP
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 7524 Mosier View Ct. Suite 230 Fort Worth, TX 76118
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SD-10 Convention Ad
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2016	Payee name U. S. Postmaster
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Amount (\$) \$82.00	Payee address; City; State; Zip Code Tate Springs Postal Store SW Green Oaks Blvd. Arlington, TX 76017-4198
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post Office Box Annual Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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 PHILIP S. PHILLIPS
 COUNTY CLERK