



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

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

14 C/OH NAME CHERYL SURBER 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	COMMITTEE NAME
<input type="checkbox"/> GENERAL	<u>N/A</u>
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	<u>N/A</u>
	COMMITTEE CAMPAIGN TREASURER NAME
	<u>N/A</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	<u>N/A</u>

FILED  
 TARRANT COUNTY  
 JAN 17 PM 2:41  
 STEVEN ADAM  
 ELECTIONS ADMIN STRATOR

additional pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>160.<sup>00</sup></u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>250.<sup>00</sup></u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>49.<sup>00</sup></u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>1,049.<sup>00</sup></u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>779.11</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>1,000.<sup>00</sup></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.



Cheryl Surber  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CHERYL SURBER, this the 15<sup>TH</sup> day of JANUARY, 20 14, to certify which, witness my hand and seal of office.

Jason Jones JASON JONES 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)**

FILED  
 CLERK OF COURTS  
 TRARRANT COUNTY  
 2013 JAN 7 PM 2:47  
 STEVEN R. HARRIS  
 CLERK OF COURTS  
 TRARRANT COUNTY

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

2 FILER NAME CHERYL SURBER 3 ACCOUNT # (Ethics Commission Filer)

4 Date <u>12/11/13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>MIKE VOLIN/ROTH REEDER</u>	7 Amount of contribution (\$) <u>100.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>P.O. BOX 104 WASHINGTONVILLE, PA 17884</u>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation TRUCK DRIVER 10 Contributor's job title TRUCK DRIVER

11 Contributor's employer/law firm NEW CENTURY 12 Law firm of contributor's spouse (if any) N/A

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

Date <u>11/7/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>SULLIVAN SALES/TOM SMITH</u>	Amount of contribution (\$)	In-kind contribution description (if applicable) <u>150.00 POLITICAL HATS</u>
Contributor address; City; State; Zip Code <u>1065 W. MAGNOLIA AVE FORTWORTH TX 76104</u>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation SALES-RETAIL Contributor's job title SALES-RETAIL

Contributor's employer/law firm SULLIVAN SALES Law firm of contributor's spouse (if any) N/A

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

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation 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.

# LOANS (JUDICIAL)

# SCHEDULE E (J)

FILED  
 TARRANT COUNTY  
 2014 JAN 17 PM 2:10  
 STATE JUDICIAL  
 ELECTIONS  
 ADMINISTRATOR

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E (J)
2 FILER NAME <b>CHERYL SURBER</b>		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨   \$		
5 Date of loan <b>12/11/13</b>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>CHERYL SURBER</b>	9 Loan Amount (\$) <b>1,000.</b>
6 Is lender a financial institution? <b>Y (N)</b>	8 Lender address; City; State; Zip Code <b>P.O. BOX 11511    Fort Worth TX    76110</b>	10 Interest rate <b>N/A</b>
		11 Maturity date <b>N/A</b>
12 Lender's Principal Occupation <b>SMALL BUSINESS OWNER</b> <b>CANDIDATE - SELF</b>		13 Lender's Job Title <b>SMALL BUSINESS OWNER</b> <b>CANDIDATE - SELF</b>
14 Lender's Employer/Law Firm <b>SELF</b>		15 Law Firm of lender's spouse (if any) <b>N/A</b>
16 If lender is child, law firm of parent(s) (if any) <b>N/A</b>		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
19 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	20 Name of guarantor <b>N/A</b>	22 Amount Guaranteed (\$)
		21 Guarantor address; City; State; Zip Code
23 Guarantor's Principal Occupation		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)		

**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

### 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.

RY: ELECTIONS ADMINISTRATOR  
 2014 JAN 7 10 54 AM  
 TARRANT COUNTY  
 FILED

1 Total pages Schedule F: <b>2</b>	2 FILER NAME <b>CHERYL SURBER</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>12/9/13</b>	5 Payee name <b>TARRANT COUNTY REPUBLICAN PARTY</b>
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6 Amount (\$) <b>1,000.00</b>	7 Payee address; City; State; Zip Code <b>2405 GRAVEL FORT WORTH, TX 76118</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>FEE</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>FILING FEES</b>
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
-------------------------------------------------------	-------------------------------	---------------	-------------

Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--------------------------------------------------------------	---------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
-----------------------------------------------------	-------------------------------	---------------	-------------

Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--------------------------------------------------------------	---------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
-----------------------------------------------------	-------------------------------	---------------	-------------

Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--------------------------------------------------------------	---------------------------------------------------------------

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

**OUTSTANDING LOANS**

**SCHEDULE L**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:

1

2 FILER NAME

CHERYL SURBER

3 ACCOUNT # (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

CHERYL SURBER

5 Lender address; City; State; Zip Code

P.O. Box 11511 FORT WORTH, TX 76110

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

FILED  
TARRANT COUNTY  
2014 JAN 17 PM 2:47  
STEVE BARON  
ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

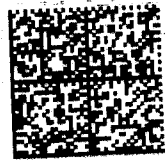
CHERYL SWIBER

FORT WORTH, TX 76114

USPS CERTIFIED MAIL



420 76111 9514 8000 4931 4015 0001 80



U.S. POSTAGE  
\$5.01  
FCM LETTER  
76110  
Date of sale  
01/15/14  
06 2S00  
08335957

TARRANT COUNTY  
ELECTIONS

2700 PREMIER ST.  
FORT WORTH, TX 76114

JCAH

7611133011

