

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:

3 CANDIDATE / OFFICEHOLDER NAME
 MS / MRS / MR FIRST MI
 Ralph D.
 NICKNAME LAST SUFFIX
 Swearingin Jr.

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
 Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE
 AREA CODE PHONE NUMBER EXTENSION

6 CAMPAIGN TREASURER NAME
 MS / MRS / MR FIRST MI
 TOBIN R.
 NICKNAME LAST SUFFIX
 Co peland

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
 07 / 01 / 13 THROUGH 12 / 31 / 13

11 ELECTION
 ELECTION DATE (Month Day Year) ELECTION TYPE
 Primary Runoff General Special

12 OFFICE OFFICE HELD (if any) 13 OFFICE SOUGHT (if known)
 Justice of the Peace, Prec 1

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS
 .. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..
 Name
 Address / PO Box; Apt. / Suite #; City; State; Zip Code
 N/A
 additional pages

OFFICE USE ONLY

Date Received: 2014 JAN - 8 AM 11: 39
 STEVE HOGAN
 ELECTIONS ADMINISTRATOR
 TARRANT COUNTY
 FILED

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

GO TO PAGE 2

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

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

(pg 2 of 11)

15 C/OH NAME Ralph D. Swearingin Jr. **16 ACCOUNT # (Ethics Commission Filers)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

N/A

 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.

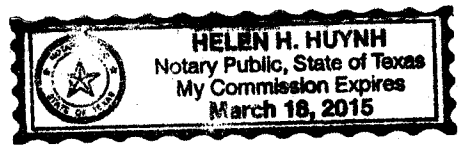
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

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18 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>5,675.00</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>4,035.72</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>7,358.18</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>14,201.14</u>

19 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 8th day of January, 20 14, to certify which, witness my hand and seal of office.

helen h. huynh Helen H. Huynh Notary Public
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS **SCHEDULE A (J)**
OTHER THAN PLEDGES OR LOANS (JUDICIAL) (pg 3 of 11)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): <i>(of 5)</i>	
2 FILER NAME <i>Ralph D. Swearingin Jr.</i>		3 ACCOUNT # (Ethics Commission filers) —	
4 Date <i>11/23/13</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mel and Gail Ashdown</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>2120 Handley Dr. # 118 Ft. Worth, TX 76112</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>Business Owner</i>		10 Contributor's job title <i>owner</i>	
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 <i>11/23/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hiep Van Nguyen</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3200 Walker Pl. Coppermine TX 76051</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Business Owner</i>		Contributor's job title <i>owner</i>	
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 <i>11/23/13</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bill and Lee Burdock</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1428 New Hope Rd. Boyd, TX 76023</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney at Law</i>	
Contributor's employer/law firm <i>Bill Burdock Attorney at Law</i>		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 FORM AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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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): (2 of 5)

2 FILER NAME Ralph D. Swearingin JR. 3 ACCOUNT # (Ethics Commission filers) -

4 Date <u>11/23/13</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Ronnie D. Long</u>	7 Amount of contribution (\$) <u>\$100.⁰⁰</u>	8 In-kind contribution description (if applicable) <u>-</u>
6 Contributor address: City: State: Zip Code <u>6004 Airport Frwy Halton City, TX 76117</u>		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation Bondsman 10 Contributor's job title owner

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 <u>11/23/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Rolly Milliron</u>	Amount of contribution (\$) <u>\$100.⁰⁰</u>	In-kind contribution description (if applicable) <u>-</u>
Contributor address: City: State: Zip Code <u>1016 Stuckert Dr Burleson, TX 76028</u>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation retired judge Contributor's job title retired

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 <u>11/23/13</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Michael S. Scott, P.C.</u>	Amount of contribution (\$) <u>\$250.⁰⁰</u>	In-kind contribution description (if applicable) <u>-</u>
Contributor address: City: State: Zip Code <u>1126 Metrocrest Dr. Ste 100 Carrollton, TX 75006</u>		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation Attorney - Contributor's job title Attorney

Contributor's employer/law firm Michael S. Scott, P.C. Attorneys At Law Law firm of contributor's spouse (if any) -

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

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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): (3 of 5)	
2 FILER NAME Ralph D. Swearingin Jr.		3 ACCOUNT # (Ethics Commission filers) -	
4 Date 12/20/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen S. Mosher	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) -
6 Contributor address; City; State; Zip Code 2804 Ryan Place Dr. Ft. Worth, TX 76140		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Attorney		10 Contributor's job title Attorney	
11 Contributor's employer/law firm Whitaker, Chalky Swindle & Schwartz P.C.		12 Law firm of contributor's spouse (if any) -	
13 If contributor is a child, law firm of parent(s) (if any) -			

Date 12/20/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Peterson	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code 3701 Glasenberry St. Keller, TX 76244		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Business owner		Contributor's job title owner	
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 12/20/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bob Dugan	Amount of contribution (\$) 75.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code 7510 Davis Blvd, Ste. A. Ft. Worth, TX 76182		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Business owner		Contributor's job title owner	
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) -			

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL) (Pg. 6 of 11) **SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): (4 of 5)	
2 FILER NAME Ralph D. Swearingin Jr.		3 ACCOUNT # (Ethics Commission filers) —	
4 Date 12/20/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Alisa Rickman	7 Amount of contribution (\$) 50.⁰⁰	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code 4619 Insurance Ln. Dallas, TX 75205		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation self employed		10 Contributor's job title insurance	
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 12/20/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles Scoma	Amount of contribution (\$) \$50.⁰⁰	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 8300 Cardinal Lane N. Richland Hills, TX 76182		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation retired		Contributor's job title retired	
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 12/20/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Louis Papaliodis	Amount of contribution (\$) 50.⁰⁰	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 1020 Macon St. Suite 5-A Ft. Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Attorney		Contributor's job title owner-attorney	
Contributor's employer/law firm Papaliodis Law Firm, L.P.		Law firm of contributor's spouse (if any) —	
14 If contributor is a child, law firm of parent(s) (if any) —			

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

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

SCHEDULE A (J)

(pg 70A11)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): (5 of 5)	
2 FILER NAME Ralph D. Swearingin, Jr		3 ACCOUNT # (Ethics Commission filers) -	
4 Date 12/20/13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lineberger, Goggan Blair & Sampson, LLP.	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) -
6 Contributor address; City; State; Zip Code 160 Throckmorton St, Suite 300 Fr. Worth, TX 76102		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Law firm		10 Contributor's job title Law firm	
11 Contributor's employer/law firm Lineberger, Goggan, Blair & Sampson, LLP.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

Date 12/20/13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Apartment Association of Tarrant County, P.A.C.	Amount of contribution (\$) \$3,500.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code 6350 Baker Blvd. Fond Worth, TX 76118		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation PAC - Apartment Association		Contributor's job title P.A.C. Apartment Assoc	
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	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)			

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

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LOANS (JUDICIAL) * Note: The Loan Reported for this report period is the total of Political Expenditures made from Personal Funds and Reported ON Schedule G. **SCHEDULE E (J)**

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: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$ 35.72
5 Date of loan 11/11/13	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph D. Swearingin Jr.	9 Loan Amount (\$) 35.72
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 6890 Bluebonnet Ct. N. Richland Hills, TX 76182	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 <input checked="" type="checkbox"/> none		
18 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	19 Name of guarantor N/A	21 Amount Guaranteed (\$)
20 Guarantor address; City; State; Zip Code		
22 Guarantor's Principal Occupation		23 Guarantor's Job Title
24 Guarantor's Employer/Law Firm N/A		25 Law Firm of guarantor's spouse (if any) A
26 If guarantor is child, law firm of parent(s) (if any) N/A		

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

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ELECTIONS ADMINISTRATOR
BY: _____

POLITICAL EXPENDITURES

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SCHEDULE F

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F: **1**

2 FILER NAME **Ralph D. Swearingin, Jr.** 3 ACCOUNT # (Ethics Commission filers) **-**

4 Date 11/09/13	5 Payee name Tarrant County Republican Party	7 Amount (\$) \$1,000.00
6 Payee address; City; State; Zip Code 2405 Gravel Rd. Forth Worth, TX 76118		

8 Purpose of payment (See instructions regarding type of information required.)
Filing Fee
(If travel outside of Texas, complete Schedule T)

9 **** Complete 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 payment (See instructions regarding type of information required.)
(If travel outside of Texas, complete Schedule T)

**** Complete 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 payment (See instructions regarding type of information required.)
(If travel outside of Texas, complete Schedule T)

**** Complete 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 payment (See instructions regarding type of information required.)
(If travel outside of Texas, complete Schedule T)

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

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

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of 11)

SCHEDULE G

The Instruction Guide explains how to complete this form.		1 Total pages Schedule G: 1
2 FILER NAME Ralph O. Swearingin Jr.		3 ACCOUNT # (Ethics Commission filers)
4 Date 11/11/13	5 Payee name Fed Ex office	8 Amount (\$) \$ 35.72
6 Payee address; City; State; Zip Code 6020 CAMP BOWIE Blvd. Ft. Worth, TX 76116		
7 Purpose of expenditure Print Campaign Letter <small>(If travel outside of Texas, complete Schedule T)</small>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure <small>(If travel outside of Texas, complete Schedule T)</small>	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure <small>(If travel outside of Texas, complete Schedule T)</small>	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure <small>(If travel outside of Texas, complete Schedule T)</small>	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure <small>(If travel outside of Texas, complete Schedule T)</small>	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended

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OUTSTANDING LOANS

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SCHEDULE L

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. N. Richland Hills TX 76182

GUARANTOR INFORMATION 6 Name of guarantor
7 Guarantor address; City; State; Zip Code
 not applicable

LENDER INFORMATION Name of lender
Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
Guarantor address; City; State; Zip Code
 not applicable

LENDER INFORMATION Name of lender
Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
Guarantor address; City; State; Zip Code
 not applicable

LENDER INFORMATION Name of lender
Lender address; City; State; Zip Code

GUARANTOR INFORMATION Name of guarantor
Guarantor address; City; State; Zip Code
 not applicable

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