

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: FORM JC/OH
SUPPORT & TOTALS (pg 2 of 12) COVER SHEET PG 2

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

additional pages

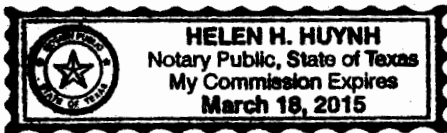
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 OCT - 2 PM 3:10
 CLERK OF COURTS
 COUNTY

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>6,100.</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>3,716.¹³</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>10,892.⁰⁵</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>18,911.⁴⁶</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, this the 2nd day of October, 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
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

(Pg 3 of 12)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **6** (Pg 1 of 6)

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

4 Date 07/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Chaisson	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code 728 Lynda Dr, River Oaks, TX 76114		(If travel outside of Texas, complete Schedule T)	

9 Contributor's principal occupation **Administrative employee** 10 Contributor's job title **Admin.**

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 07/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MONA Bailey	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 6200 Lake Way N. Richland Hills, TX 76180		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **Retired** Contributor's job title **NONE**

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 07/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peggy Sue Branch - Clark	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 3208 Walton Rd Walton City, TX 76117		(If travel outside of Texas, complete Schedule T)	

Contributor's principal occupation **retired** Contributor's job title **NONE**

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
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)** (Pg 4 of 12) **SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): 6 (Pg 2 of 6)	
2 FILER NAME Ralph D. Swearingin Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 07/26/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) H. Dale Clark	7 Amount of contribution (\$) \$500.⁰⁰	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code 3208 Halton Rd Halton City, TX 76117		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation Law enforcement		10 Contributor's job title Constable	
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 08/18/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larry Antin	Amount of contribution (\$) \$500.⁰⁰	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 7020 Castle Creek Ct. Ft. Worth, TX 76132		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Business Owner		Contributor's job title President	
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 08/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adrian Murray	Amount of contribution (\$) \$100.⁰⁰	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 125 Willow Ridge Rd. Ft. Worth, TX 76103		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation Business Owner		Contributor's job title President	
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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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)** (Pg 5 of 4) **SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): 6 (Pg 3 of 6)

2 FILER NAME
Ralph O. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date
8/15/14

5 Full name of contributor out-of-state PAC (ID# _____)
Gary Brown
Construction Chemical LLC.

7 Amount of contribution (\$)
\$500.00

8 In-kind contribution description (if applicable)
—

6 Contributor address; City; State; Zip Code
900 E. Clarendon Dr.
Dallas, TX 75203

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Business Owner

10 Contributor's job title
President

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
8/07/14

Full name of contributor out-of-state PAC (ID# _____)
Phillip Phillips
Contributor address; City; State; Zip Code
101 Summit Ave.
Ft. Worth, TX 76102

Amount of contribution (\$)
\$200.00

In-kind contribution description (if applicable)
—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Legal

Contributor's job title
attorney

Contributor's employer/law firm
Law office of Philip Phillips

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

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

Date
08/11/14

Full name of contributor out-of-state PAC (ID# _____)
Randall W. Harrison
Contributor address; City; State; Zip Code
6300 Italifax Rd.
Fr. Worth, TX 76116

Amount of contribution (\$)
\$1,000.00

In-kind contribution description (if applicable)
—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Business Owner

Contributor's job title
President

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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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)**

(Pg 6 of 12) **SCHEDULE A (J)**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J): (Pg 4 of 6) **6**

2 FILER NAME
Ralph D. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date
08/07/14

5 Full name of contributor out-of-state PAC (ID#: _____)
Sue Ann Hester

7 Amount of contribution (\$) **\$100.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
**P.O. Box 8622
Ft. Worth, TX 76124**

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
Real Estate

10 Contributor's job title
Office Manager

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
09/10/14

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

Amount of contribution (\$) **\$100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**2161 Kimbrough Dr.
Irving, TX 75038**

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
legal

Contributor's job title
attorney

Contributor's employer/law firm
Angela Downes Attorney

Law firm of contributor's spouse (if any)

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

Date
09/17/14

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

Amount of contribution (\$) **\$100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**4712 Flat Rock Rd.
Ft. Worth, TX 76132**

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
Business

Contributor's job title
Administrative

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

(pg 7 of 12)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J):

6 (pg 5 of 6)

2 FILER NAME

Ralph D. Swearingin Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

09/17/14

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

Judy Strzinek

6 Contributor address; City; State; Zip Code

4814 Fairway Ct.
N. Richland Hills, TX 76180

7 Amount of contribution (\$)

\$300.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

Retired

10 Contributor's job title

—

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

09/17/14

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

Carol Gilstrap

Contributor address; City; State; Zip Code

4628 Ridgeman
Halton City, TX 76117

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation

Business

Contributor's job title

clerical

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

08/06/14

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

Republican Party of Texas
Candidate Resource Committee

Contributor address; City; State; Zip Code

1108 Lavaca, Suite 500
Austin, TX 78701

Amount of contribution (\$)

1,500.00

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

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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ELECTIONS ADMINISTRATION

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

(pgs of 12) SCHEDULE A (J)

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A(J): **6** (pgs of 8)

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

4 Date **08/06/14** 5 Full name of contributor out-of-state PAC (ID#) **Ft. Worth Republican Women PAC**
6 Contributor address; City; State; Zip Code **P.O. Box 101613 Ft. Worth, TX 76185** (Treasurer Jan Brafczynski)
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 **—** 10 Contributor's job title **Ft. Worth Republican Women**

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 Full name of contributor 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)~~

~~Date Full name of contributor 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.

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LOANS (JUDICIAL) *Note: The loan shown on this report is the total of Political Expenditures made from personal funds and reported on schedule G.* **SCHEDULE E (J)**
 (pg 9 of 12)

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: → → → → → →		\$ —
5 Date of loan 09/02/14	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Ralph D. Swearingin Jr.	9 Loan Amount (\$) 600.⁰⁰
6 Is lender a financial institution? Y <input checked="" type="radio"/> N <input type="radio"/>	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 type="checkbox"/> none —		18 Check if personal funds were deposited into political account <input type="checkbox"/> —
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor N/A 21 Guarantor address; City; State; Zip Code	22 Amount Guaranteed (\$) —
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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 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

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 STATE OF TEXAS
 ELECTIONS ADMINISTRATOR
 BY:

POLITICAL EXPENDITURES

SCHEDULE F

(pg 10 of 12)

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 F: 1	2 FILER NAME Ralph D. Swearingin Jr.	3 ACCOUNT # (Ethics Commission Filer)
---------------------------------------	--	---------------------------------------

4 Date 09/02/14	5 Payee name Carcaten Meadowbrook News
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6 Amount (\$) 329⁰⁰	7 Payee address; City; State; Zip Code P.O. Box 24264 Ft. Worth, TX 76124
--	---

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

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 09/02/14	Payee name MACKAY Advertising
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Amount (\$) 1,687.¹³	Payee address; City; State; Zip Code 301 W. Vickery Blvd. Fort Worth, TX 76104
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Bus Bench Advertising <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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Date 09/08/14	Payee name Mackay Advertising
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Amount (\$) 1,100.⁰⁰	Payee address; City; State; Zip Code 301 W. Vickery Blvd. Ft. Worth, TX 76104
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Poster Board Advertising <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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Date 09/09/14	Payee name TRE Weekly Magazines
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Amount (\$) 600.⁰⁰	Payee address; City; State; Zip Code 3202 N. Shiloh Rd Garland, TX 75044
---	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Advertisement <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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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

(pg 1 of 12)

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: 1	2 FILER NAME Ralph O. Swearingin Jr	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 09/09/14	5 Payee name TRE Weekly Magazines
---------------------------	---

6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 3202 N. Shiloh Rd. Garland, TX 75044
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Reimbursement from political contributions intended

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

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)

Reimbursement from political contributions intended

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)

Reimbursement from political contributions intended

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)

Reimbursement from political contributions intended

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 STATE AGENCY
 ELECTRONIC ADMINISTRATOR

OUTSTANDING LOANS

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

SCHEDULE L

(19 of 12)

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

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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STATE OF TEXAS
ELECTIONS ADMINISTRATOR