

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: <div style="font-size: 2em; text-align: center;">4</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.5em;">SACQUELYN</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.5em;">WRIGHT</div>	<div style="border: 2px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;">OFFICE USE ONLY</p> <p style="font-size: 0.8em; margin: 2px 0;">Date Received</p> <p style="font-size: 0.8em; margin: 2px 0;">Date Hand-delivered or Postmarked</p> <p style="font-size: 0.8em; margin: 2px 0;">Receipt Amount</p> <p style="font-size: 0.8em; margin: 2px 0;">Date Processed</p> <p style="font-size: 0.8em; margin: 2px 0;">Date Imaged</p> </div> <div style="font-size: 0.8em; margin-top: 5px;"> RECEIVED BY: [Signature] ELECTIONS ADMINISTRATOR 2014 FEB 11 PM 3:52 FILED TARRANT COUNTY </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.5em;">some</div> NICKNAME LAST SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; font-size: 1.5em;">some</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () some		
9 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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <div style="font-size: 1.5em;">1 / 24 / 2014 2 / 22 / 2014</div>		
11 ELECTION	ELECTION DATE Month Day Year <div style="font-size: 1.5em;">03 / 04 / 2014</div>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <div style="font-size: 1.5em;">Justice of the Peace Pct 4</div>	13 OFFICE SOUGHT (if known)	
GO TO PAGE 2			

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME
JACQUELYN WRIGHT

15 ACCOUNT # (Ethics Commission Filers)

16 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.

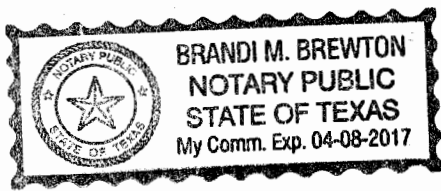
COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

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STEVIE RAYBORN
ELECTIONS ADMINISTRATION

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 170 ⁰⁰
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 465. ⁰⁰
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,965.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.



Jacquelyn Wright
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jacquelyn Wright, this the 21 day of February 20 14, to certify which, witness my hand and seal of office.

Brandi M. Brewton
Signature of officer administering oath
Brandi M. Brewton
Print name of officer administering oath
Admin. Clerk
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J): <u>1</u>	
2 FILER NAME <i>Jacquelyn Wright</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>2/20/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Wayne Burt</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address: City; State; Zip Code <i>828 Hackamore St. Ft. Worth, TX 76105</i>		(If travel outside of Texas, complete Schedule T)	
9 Contributor's principal occupation <i>investments</i>		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 <i>2/20/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Don Stuart</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>4540 Hodgkins Rd Ft. Worth, TX 76135</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>retired</i>		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 <i>2/20/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Richard Lavi</i>	Amount of contribution (\$) <i>\$20.00</i>	In-kind contribution description (if applicable)
Contributor address: City; State; Zip Code <i>7380 Love Circle Ft. Worth, TX 76135</i>		(If travel outside of Texas, complete Schedule T)	
Contributor's principal occupation <i>retired</i>		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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 ELECTIONS ADMINISTRATOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor 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 |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME <i>JACQUELYN WRIGHT</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <i>1-27-2014</i>	5 Payee name <i>Sonic Print - PREVIOUSLY REPORTED ON LAST EXPENSE REPORT</i>
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6 Amount (\$) <i>\$ 617.95</i>	7 Payee address; City; State; Zip Code <i>5018 Tampa West Blvd. Tampa, Fla. 33634</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>printing</i>	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/6/2014</i>	Payee name <i>62LE News</i>
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Amount (\$) <i>\$ 396.80</i>	Payee address; City; State; Zip Code <i>321 W. Main Azle, TX 76020</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>advertising</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>2/20/2014</i>	Payee name <i>American Signworks</i>
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Amount (\$) <i>\$ 68.20</i>	Payee address; City; State; Zip Code <i>5829 Jackson Hwy Ft. Worth, TX 76114</i>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>advertising</i>	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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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

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 TARRANT COUNTY
 2014 FEB 21 PM 3:53
 COUNTY CLERK
 ELECTIONS ADMINISTRATOR
 RY: