

# 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 (Ethics Commission Filers)	2 Total pages filed:  <div style="font-size: 2em; text-align: center;">5</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI <div style="text-align: center; font-size: 1.2em;">Ronnie</div>	<b>OFFICE USE ONLY</b>  Date Received  <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>RECEIVED</b>                       JUL 15 2020                       City Manager's / City Secretary's Office                 </div>	
	NICKNAME                      LAST                      SUFFIX <div style="text-align: center; font-size: 1.2em;">Anderson</div>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <div style="font-size: 1.2em;">704 Chateau Ct. Denton, TX 76209</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION <div style="font-size: 1.2em;">(214) 458-9988</div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI <div style="text-align: center; font-size: 1.2em;">Michelle</div>	Receipt #                      Amount \$  Date Processed  Date Imaged	
	NICKNAME                      LAST                      SUFFIX <div style="text-align: center; font-size: 1.2em;">Diamond</div>		
	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE <div style="font-size: 1.2em;">5201 Par Dr., #1212 Denton, TX 76208</div>		
7 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	AREA CODE                      PHONE NUMBER                      EXTENSION <div style="font-size: 1.2em;">(940) 230-5211</div>		
8 CAMPAIGN TREASURER PHONE	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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
9 REPORT TYPE	10 PERIOD COVERED  Month    Day    Year                      Month    Day    Year <div style="font-size: 1.5em;">03 / 03 / 2020                      THROUGH                      6 / 30 / 2020</div>		
10 PERIOD COVERED	11 ELECTION  ELECTION DATE                      ELECTION TYPE Month    Day    Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <div style="font-size: 1.2em;">03 / 11 / 3 / 2020                      <input checked="" type="checkbox"/> General                      <input type="checkbox"/> Special</div>		
11 ELECTION	12 OFFICE  OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)  <div style="font-size: 1.5em;">City Council District 2</div>	
GO TO PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Ronnie Anderson 15 Filer ID (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	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 5,000.00
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.

[Signature]  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ronnie Anderson, this the 15<sup>th</sup> day of July, 2020, to certify which, witness my hand and seal of office.

[Signature]  
Signature of officer administering oath

Michelle Diamond  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME <i>Ronnie Anderson</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>5,000</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>/</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>/</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>/</i>
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>/</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>/</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>/</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>/</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>/</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>/</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>/</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>/</i>

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

*p. 1 of 2*

2 FILER NAME

*Ronnie Anderson*

3 Filer ID (Ethics Commission Filers)

4 Date

*6/9/2020*

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

*Wesley Marshall*

7 Amount of contribution (\$)

*1,000.<sup>00</sup>*

6 Contributor address; City; State; Zip Code

*4898 Oakhurst Ln Frisco TX 75034*

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

*6/9/2020*

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

*RLA Heritage Living Trust Amy G. Griffin*

Amount of contribution (\$)

*1,000.<sup>00</sup>*

Contributor address; City; State; Zip Code

*8912 Crestview Dr. Denton TX 76207*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*6/11/2020*

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

*Stephan or Jennifer Alexander*

Amount of contribution (\$)

*1,000.<sup>00</sup>*

Contributor address; City; State; Zip Code

*13391 George Foster Rd Ponder TX 76259*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*6/10/2020*

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

*Don & Nancy Cole*

Amount of contribution (\$)

*1,000.<sup>00</sup>*

Contributor address; City; State; Zip Code

*4109 Hampton Rd. Denton TX 76207*

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

*p. 2 of 2*

2 FILER NAME

*Ronnie Anderson*

3 Filer ID (Ethics Commission Filers)

4 Date

*1/22/2020*

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Ryan Griffin*

7 Amount of contribution (\$)

*1,000.00*

6 Contributor address; City; State; Zip Code

*P.O. Box 190829 Dallas TX 75219*

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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