

01-16-04P01:24 RCVD  
**RECEIVED**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

JAN 16 2004  
at 1:24 p.m.

FORM C/OH  
COVER SHEET PG 1

The C/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: MR  
FIRST: RALPH  
MI:  
NICKNAME: MCCLOUD  
LAST: MCCLOUD  
SUFFIX:

OFFICE USE ONLY

OFFICIAL RECORD  
CITY SECRETARY  
FT. WORTH, TEX  
Date Received:  
Date Valid Through or Date Postmarked:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 Change of Address

ADDRESS / PO BOX: 2412  
APT / SUITE #: Anglen  
CITY: Fort Worth, Tx  
STATE:  
ZIP CODE:

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE: (817)  
PHONE NUMBER: 535 2820  
EXTENSION:

Receipt #

Amount

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: CHRISTINA  
FIRST: CHRISTINA  
MI:  
NICKNAME: MCCLOUD  
LAST: MCCLOUD  
SUFFIX:

Date Processed

Date Imaged

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: 07 / 15 / 03 THROUGH Month Day Year: 01 / 16 / 04

11 ELECTION

ELECTION DATE: / /  
ELECTION TYPE:  
 Primary  
 Runoff  
 General  
 Special

12 OFFICE

OFFICE HELD (if any):  
CITY COUNCIL #

13 OFFICE SOUGHT (if known):  
N/A

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

additional pages

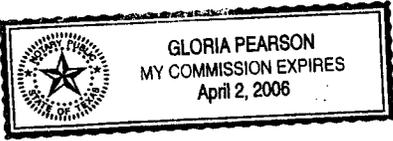
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

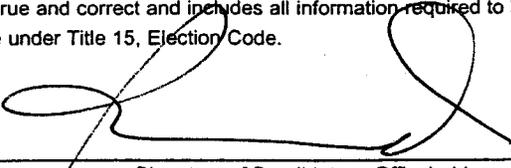
<b>15 C/OH NAME</b>		<b>16 ACCOUNT #</b> (Ethics Commission filers)	
<b>17 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	** This box is for notice of political expenditures by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  <hr/> <b>COMMITTEE ADDRESS</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  <hr/>	
	<b>18 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1
	<b>EXPENDITURE TOTALS</b>	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1
	<b>CONTRIBUTION BALANCE</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 1
<b>OUTSTANDING LOAN TOTALS</b>	4. TOTAL POLITICAL EXPENDITURES	\$ 1	
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1	
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1	

**19 AFFIDAVIT**



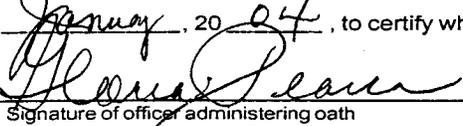
GLORIA PEARSON  
MY COMMISSION EXPIRES  
April 2, 2006

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 of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ralph McClone, this the 16th day of January, 2004, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering oath

Gloria Pearson

 \_\_\_\_\_  
 Printed name of officer administering oath

City Secretary

 \_\_\_\_\_  
 Title of officer administering oath