

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:				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <u>Randall</u>	MI <u>R</u>	OFFICE USE ONLY Date Received <div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED JAN 18 2022 BY: <u>JH</u> </div> Date Hand Delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged			
	NICKNAME	LAST <u>Grissom</u>	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX:	APT / SUITE #:	CITY; STATE; ZIP CODE				
<input type="checkbox"/> Change of Address	<u>113 mylea Lane Weatherford, TX 76087</u>						
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
		<u>(817) 597-7307</u>					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/>	FIRST <u>Jack</u>	MI <u>m</u>				
	NICKNAME	LAST <u>Pritchard</u>	SUFFIX				
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE):	APT / SUITE #:	CITY; STATE; ZIP CODE				
(Residence or Business)	<u>702 Pritchard Lane Brock, TX 76087</u>						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
		<u>(817) 304-1920</u>					
9 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)						
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year	
	<u>12</u>	<u>6</u>	<u>2021</u>	THROUGH	<u>12</u>	<u>31</u>	<u>2021</u>
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	
	<u>03</u>	<u>01</u>	<u>2022</u>	<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)					
		<u>Justice of the Peace, Parker County Pet 3</u>					
14 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.						
	<input type="checkbox"/> Additional Pages	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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**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME <u>Randall R. Grissom</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>Ø</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>7,905⁰⁰</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>106⁷⁰</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>8,343⁷⁰</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>7,499⁵⁵</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>3,115⁰⁰</u>

18 SIGNATURE 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

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

(2) Unsworn Declaration

My name is Randall Ray Grissom, and my date of birth is May, 2, 1966.
 My address is 113 Mylea Lane, Weatherford, TX, 76087, USA.
(street) (city) (state) (zip code) (country)

Executed in Parker County, State of Texas, on the 18 day of Jan, 20 22.
(month) (year)
Randall R. Grissom
 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7800 ⁰⁰
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 105 ⁰⁰
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 3,115 ⁰⁰
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,413 ⁷⁵
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Randall R Grissom		3 Filer ID (Ethics Commission Filers)
4 Date 12-6-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey Grissom	7 Amount of contribution (\$) \$1000.00
6 Contributor address; City; State; Zip Code 303 Fannin Millsap TX 76066		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-10-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darren + Anne Carbone	Amount of contribution (\$) \$500⁰⁰
Contributor address; City; State; Zip Code 990 Harmony Circle Weatherford, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-10-20	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Allen	Amount of contribution (\$) \$500⁰⁰
Contributor address; City; State; Zip Code 1510 Santa Fe Suite 100 Weatherford, TX 76086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-10-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackie Aldridge	Amount of contribution (\$) \$500⁰⁰
Contributor address; City; State; Zip Code 905 Ft. Worth Hwy Weatherford, TX 76086		
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

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Randall R Grissom		3 Filer ID (Ethics Commission Filers)
4 Date 12-14-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dedra Vick	7 Amount of contribution (\$) \$100⁰⁰
6 Contributor address; City; State; Zip Code 3614 Beech St. Weatherford, TX 76088		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-17-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Mauney	Amount of contribution (\$) \$200⁰⁰
Contributor address; City; State; Zip Code 899 Old Brock Rd Weatherford, TX 76088		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-17-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Hawkins	Amount of contribution (\$) \$750⁰⁰
Contributor address; City; State; Zip Code 5220 Bennett Rd Millsap, TX 76066		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-17-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Raprock	Amount of contribution (\$) \$500⁰⁰
Contributor address; City; State; Zip Code 1207 Foster Lane 76086		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME Randall Grissom		3 Filer ID (Ethics Commission Filers)
4 Date 12-29-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al Micallef	7 Amount of contribution (\$) \$ 500⁰⁰
6 Contributor address; City; State; Zip Code 1401 N. Bowie Dr. Weatherford, TX 76086		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12-29-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony + Toybeth	Amount of contribution (\$) \$250⁰⁰
Contributor address; City; State; Zip Code 6308 Horseshoe Bend Rd Weatherford, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12-29-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mando + Terri Gutierrez	Amount of contribution (\$) \$3000⁰⁰
Contributor address; City; State; Zip Code 900 Taylor Rd Weatherford, TX 76087		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> 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
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <u>1</u>	
2 FILER NAME <u>Randall R. Grissom</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <u>12-30-21</u>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Mark + Jennifer Bledsoe</u>	8 Amount of Contribution \$ <u>\$105.00</u>	9 In-kind contribution description <u>political signs</u>
7 Contributor address; City; State; Zip Code <u>226 Charlie Way Weatherford, TX 76086</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Randall R Grissom		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ Ø
5 Date of loan 12-6-21	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall R Grissom	9 Loan Amount (\$) 3,115⁰⁰
6 Is lender a financial institution? Y (N)	8 Lender address; City; State; Zip Code 113 Mylea Lane Weatherford, TX 76087	10 Interest rate Ø
		11 Maturity date NA
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1	2 FILER NAME Randall R Grissom	3 Filer ID (Ethics Commission Filers)
4 Date 12-6-21	5 Payee name Parker County Republican Party	
6 Amount (\$) \$375⁰⁰	7 Payee address; City; State; Zip Code 908 S. main st. Weatherford, TX 76087 Suite G	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Candidate Filing Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 12-7-21	Payee name Parker County Today		
Amount (\$) 1,170⁰⁰	Payee address; City; State; Zip Code 114 E Church St Weatherford, TX 76086		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description DC Newsblast Ad	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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 12-15-21	Payee name AcDC Banners, Signs & Designs		
Amount (\$) 1,868⁷⁵	Payee address; City; State; Zip Code PO Box 2071 Weatherford, TX 76086		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Political signs	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <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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