



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

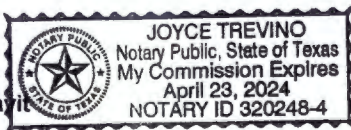
<b>15 C/OH NAME</b>		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,750.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 14,116.67
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 649.56
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**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.

*[Handwritten Signature]*

Signature of Candidate or Officeholder

**Please complete either option below:**



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Chris Boswell this the 29th day of April, 2022, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*

Joyce Trevino

Notary Public

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

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. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 5,750.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 250.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 14,116.67
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1 Total pages Schedule A1:</b> 5
<b>2 FILER NAME</b> Chris Boswell		<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 Date</b> 04/08/2022	<b>5 Full name of contributor</b> out-of-state PAC (ID#: _____) Davis, Robert <hr/> <b>6 Contributor address;</b> <b>City;</b> <b>State;</b> <b>Zip Code</b> 2901 Haine Dr., Apt. 1707                      Harlingen,                      TX                      78550	<b>7 Amount of contribution (\$)</b>  \$100.00
<b>8 Principal occupation / Job title (See Instructions)</b>		<b>9 Employer (See Instructions)</b>

<b>Date</b> 04/08/2022	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Cano, Yvette Marie <hr/> <b>Contributor address;</b> <b>City;</b> <b>State;</b> <b>Zip Code</b> 2817 Mariposa Lane,                      Harlingen,                      TX                      78550	<b>Amount of contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

<b>Date</b> 04/08/2022	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Madden, Tootie <hr/> <b>Contributor address;</b> <b>City;</b> <b>State;</b> <b>Zip Code</b> 27646 Coston Rd.,                      San Benito,                      TX                      78550	<b>Amount of contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

<b>Date</b> 04/08/2022	<b>Full name of contributor</b> out-of-state PAC (ID#: _____) Frazier, Michael <hr/> <b>Contributor address;</b> <b>City;</b> <b>State;</b> <b>Zip Code</b> 35 Resaca Vista,                      San Benito,                      TX                      78550	<b>Amount of contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

**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:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 04/11/2022	5 Full name of contributor out-of-state PAC (ID# _____) Keim, Larry T. ----- 6 Contributor address; City; State; Zip Code P.O. Box 532406 Harlingen, TX 78553-2406	7 Amount of contribution (\$)  \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/14/2022	Full name of contributor out-of-state PAC (ID# _____) Youngblood, Terri B. ----- Contributor address; City; State; Zip Code 534 Lake Drive, Harlingen, TX 78550	Amount of contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2022	Full name of contributor out-of-state PAC (ID# _____) Nott, Deborah Pool ----- Contributor address; City; State; Zip Code P.O. Box 102 Harlingen, TX 78551-0102	Amount of contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2022	Full name of contributor out-of-state PAC (ID# _____) Campbell, Scott & Campbell, Kevin ----- Contributor address; City; State; Zip Code 41210 E. Tyler, Harlingen, TX 78550	Amount of contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Dunkin, Robert B. <hr/> 6 Contributor address; City; State; Zip Code 6338 Camino Real, Harlingen, TX 78552-0000	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/20/2022	Full name of contributor out-of-state PAC (ID#: _____) Allen, J. Michael & Susan E. <hr/> Contributor address; City; State; Zip Code 509 E. Woodland Drive Harlingen TX 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/20/2022	Full name of contributor out-of-state PAC (ID#: _____) Burns, Laura T. <hr/> Contributor address; City; State; Zip Code 21201 Hatchett Road, Harlingen, TX 78552	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/20/2022	Full name of contributor out-of-state PAC (ID#: _____) Doucet, Robert C. Sharon D. <hr/> Contributor address; City; State; Zip Code 24315 Preston Trail, Harlingen, TX 78552	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2022	5 Full name of contributor out-of-state PAC (ID#: _____) TREPAC/Texas Association of Realtors Political Action Committee <hr/> 6 Contributor address; City; State; Zip Code P.O. Box 2246, Austin TX 78768-2246	7 Amount of contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/26/2022	Full name of contributor out-of-state PAC (ID#: _____) Wetegrove, Raymond F. <hr/> Contributor address; City; State; Zip Code P.O. Box 520 Raymondville, TX 78580-0520	Amount of contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2022	Full name of contributor out-of-state PAC (ID#: _____) Swayze, Lorie Melody <hr/> Contributor address; City; State; Zip Code 5702 Spicewood, Harlingen, TX 78552	Amount of contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/26/2022	Full name of contributor out-of-state PAC (ID#: _____) Magee, John & Janet <hr/> Contributor address; City; State; Zip Code P.O. Box 730, Port Isabel, TX 78578-0730	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Chris Boswell		3 Filer ID (Ethics Commission Filers)
4 Date 04/26/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Gonzalez, Angie ..... 6 Contributor address: City: State: Zip Code 101 W. Harrison Ave., Harlingen, TX 78550	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Hale, Frank M. & Machietto, Lupita ..... Contributor address: City: State: Zip Code 5601 Wild Oak Ct. Harlingen, TX 78552	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Borchers Electric ..... Contributor address: City: State: Zip Code 314 North B Street, Harlingen, TX 78550	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) ..... Contributor address: City: State: Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor 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  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME Chris Boswell	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 03/29/2022	<b>5</b> Payee name Meade Marketing, Inc.
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<b>6</b> Amount (\$) \$3,325.00	<b>7</b> Payee address; 211 West Jefferson Avenue, Suite 2	City; Harlingen,	State; TX	Zip Code 78550
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising expense	<b>(b) Description</b> Newspaper and Television advertisements
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

<b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 04/11/2022	<b>Payee name</b> The Shepard Group
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<b>Amount (\$)</b> \$230.66	<b>Payee address;</b>	<b>City;</b> Harlingen,	<b>State;</b> TX	<b>Zip Code</b> 78550
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising expense	<b>Description</b> postcards, posters, rack cards
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 04/18/2022	<b>Payee name</b> Topp Direct Marketing
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<b>Amount (\$)</b> \$5,300.00	<b>Payee address;</b> 701 Palm Valley Drive West	<b>City;</b> Harlingen,	<b>State;</b> TX	<b>Zip Code</b> 78552
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising expense	<b>Description</b> Early Vote and Election Day GOTV advertisements
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete <b>ONLY</b> 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

# 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Chris Boswell	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 04/26/2022	<b>5</b> Payee name Topp Direct Marketing
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<b>6</b> Amount (\$) \$5,261.01	<b>7</b> Payee address; 701 Palm Valley Dr. West	<b>City;</b> Harlingen,	<b>State;</b> TX	<b>Zip Code</b> 78552
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising expense	<b>(b)</b> Description Early Vote and Election Day GOTV advertisements
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b>	<b>Payee name</b>
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<b>Amount (\$)</b>	<b>Payee address;</b>	<b>City;</b>	<b>State;</b>	<b>Zip Code</b>
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>Description</b>
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b>	<b>Payee name</b>
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<b>Amount (\$)</b>	<b>Payee address;</b>	<b>City;</b>	<b>State;</b>	<b>Zip Code</b>
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)	<b>Description</b>
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> 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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: 1	
<b>2</b> FILER NAME Chris Boswell		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 250.00	
<b>5</b> Date 04/16/2022	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John W. Topp <b>7</b> Contributor address; City; State; Zip Code 701 Palm Valley Dr West, Harlingen, TX 78550	<b>8</b> Amount of Contribution \$ \$250.00	<b>9</b> In-kind contribution description advertising  Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Direct Mail Advertiser		<b>11</b> Employer (FOR NON-JUDICIAL)(See Instructions) self-employed	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL)(See Instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<b>Date</b>	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)  <b>Contributor address;</b> City; State; Zip Code	<b>Amount of Contribution \$</b>	<b>In-kind contribution description</b>  Check if travel outside of Texas. Complete Schedule T.
<b>Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)</b>		<b>Employer (FOR NON-JUDICIAL)(See Instructions)</b>	
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL)(See Instructions)</b>	
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>	
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			