CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

OFFICE USE ONLY

Date Received

CITY SECRETARY'S OFFICE
Received
JAN 1 4 2014
HARLINGEN, TX

Date Hand-delivered or Postmarked

Receipt #

Date Processed

Date Imaged

3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
		Mr.	Christopher	H.
		NICKNAME	LAST	SUFFIX
		Chris	Boswell	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address

ADDRESS / PO BOX: APT / SUITE #,   CITY: STATE: ZIP CODE

1001 Stack Circle   Harlingen, TX 78550

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(956)   421-2626

6	CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Mrs.	Anita	S.
		NICKNAME	LAST	SUFFIX
		Nita	Boswell	

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE):   APT / SUITE #:   CITY,   STATE: ZIP CODE

1001 Stack Circlw   Harlingen, TX 78550

8 CAMPAIGN TREASURER PHONE

AREA COOE   PHONE NUMBER   EXTENSION

(956)   421-2626

9 REPORT TYPE

- [X] 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		Month	Day	Year
07	01	2013	THROUGH	12	31	2013

11 ELECTION

ELECTION DATE
Month / Day / Year
/ /

ELECTION TYPE
- [ ] Primary
- [ ] Runoff
- [ ] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any)

Mayor

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	**15** ACCOUNT # (Ethics Commission Filers)
Christopher H. Boswell	

| **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
☐ GENERAL	
☐ SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
☐ additional pages	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$	-0-
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	-0-
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$	-0-
	4.	**TOTAL POLITICAL EXPENDITURES**	$	1,150.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$	500.31
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$	-0-

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.

PEGGY L. MORRISS
Notary Public, State of Texas
My Commission Expires
April 23, 2017
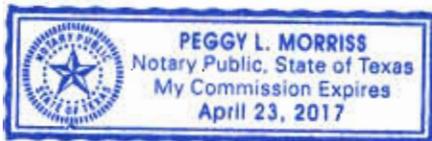
_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____Christopher H. Boswell_____, this the

___14th___ day of ___January___, 20 _14___, to certify which, witness my hand and seal of office.

Peggy L. Morriss	Peggy L. Morriss	Notary Public
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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: 1	2 FILER NAME Christopher H. Boswell	3 ACCOUNT # (Ethics Commission Filers)

4 Date 08/08/2013	5 Payee name Girl Scouts of Greater South Texas

6 Amount ($) $900.00	7 Payee address: City; State; Zip Code 1109 W. Nolana, Ste 202 McAllen, Texas 78501

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution/Donation	(b) Description (If travel outside of Texas, complete Schedule T) Youth Group

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 08/11/2013	Payee name Texans for Greg Abbott

Amount ($) $250.00	Payee address: City; State; Zip Code 504 Lavaca Street Austin, Texas 78701

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution/Donation	Description (If travel outside of Texas, complete Schedule T) Political Contribution

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address: City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name

Amount ($)	Payee address: City; State; Zip Code

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED