

# 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)  
00000001

**2 PAGE #**  
1 of 9

**3 CANDIDATE / OFFICEHOLDER NAME**

MS / MRS / MR: Mr. FIRST: Tudor George Gaillard MI:

NICKNAME: LAST: Uhlhorn SUFFIX:

OFFICE USE ONLY

Date Received: **Received**

**JUL 11 2013**

*all*

HARLINGEN, TX

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**

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

2601 S. 77 Sunshine Strip  
Harlingen, TX 78550-8320

Change of Address

**5 CAMPAIGN TREASURER NAME**

MS / MRS / MR: Mr. FIRST: Nicholas MI:

NICKNAME: LAST: Consiglio SUFFIX:

Nick

**6 CAMPAIGN TREASURER ADDRESS**  
(Residence or business)

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

1721 Mourning Dove Circle  
Harlingen, TX 78550

**7 CAMPAIGN TREASURER PHONE**

AREA CODE PHONE NUMBER EXTENSION

(956) 536-4605

**8 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)

**9 PERIOD COVERED**

Month Day Year Month Day Year

05/02/2013 THROUGH 06/30/2013

**10 ELECTION**

ELECTION DATE: Month Day Year: 05/11/2013

ELECTION TYPE:  Primary  Runoff  General  Special

**11 OFFICE**

OFFICE HELD (if any): Harlingen City Commission District 2

**12 OFFICE SOUGHT (if known)**

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME Uhlhorn, Tudor George Gaillard (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
00000001

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 460.29

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 4,521.33

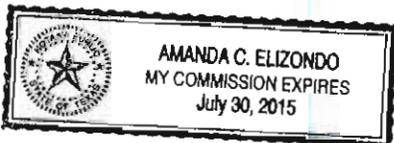
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

17 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.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tudor G. Uhlhorn, this the 10<sup>th</sup> day of July, 2013, to certify which, witness my hand and seal of office.

Amanda C. Elizondo Amanda C. Elizondo City Secretary  
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/1 Report: 3/9	
<b>2</b> FILER NAME Uhlhorn, Tudor George Gaillard (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000001	
<b>4</b> Date  05/16/2013	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Argullin, Francisco (Mr.)  ..... <b>6</b> Contributor address; City; State; Zip Code 26334 FM 803 San Benito, TX 78586-7538	<b>7</b> Amount of contribution (\$)  \$250.00	<b>8</b> In-kind contribution description (if applicable) Donation - Use of trailer for campaign signs    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  05/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rowe, James (Dr.)  ..... Contributor address; City; State; Zip Code 2220 Haine Drive - Suite 49 Harlingen, TX 78550	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/16/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Topp, John W. (Mr.)  ..... Contributor address; City; State; Zip Code 701 Palm Valley Drive West Harlingen, TX 78552-9039	Amount of contribution (\$)  \$110.29	In-kind contribution description (if applicable) Data Processing Services - Early Voter Data Entry    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/3 Report: 4/9	<b>2 FILER NAME</b> Uhlhorn, Tudor George Gaillard (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 00000001
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<b>4 Date</b> 05/14/2013	<b>5 Payee name</b> Colletti's
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<b>6 Amount (\$)</b> \$1,743.05	<b>7 Payee address City; State; Zip Code</b> 202 First Avenue Harlingen, TX 78550
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Event Expense	<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Election Night Event - Food & Beverages
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/10/2013	<b>Payee name</b> Consiglio, Dominic S. (Mr.)
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<b>Amount (\$)</b> \$100.00	<b>Payee address City; State; Zip Code</b> 1721 Mourning Dove Cir. Harlingen, TX 78550
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Labor to Erect & Dismantle Campaign Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/10/2013	<b>Payee name</b> Consiglio, Nicholas P. (Mr.)
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<b>Amount (\$)</b> \$100.00	<b>Payee address City; State; Zip Code</b> 1721 Mourning Dove Cir. Harlingen, TX 78550
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Labor to Erect & Dismantle Campaign Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/10/2013	<b>Payee name</b> de la Garza, Juan (Mr.)
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<b>Amount (\$)</b> \$100.00	<b>Payee address City; State; Zip Code</b> 2713 Hunters Crossing Harlingen, TX 78550
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense	<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Labor to Erect & Dismantle Campaign Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/3 Report: 5/9	<b>2 FILER NAME</b> Uhlhorn, Tudor George Gaillard (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 00000001
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<b>4 Date</b> 05/15/2013	<b>5 Payee name</b> Meade Marketing, Inc.
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<b>6 Amount (\$)</b> \$379.13	<b>7 Payee address</b> City; State; Zip Code 211 W. Jefferson Ave. Harlingen, TX 78550
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<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Production and placement of newspaper Thank You ad to voters
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<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 05/23/2013	<b>Payee name</b> Meade Marketing, Inc.
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<b>Amount (\$)</b> \$54.61	<b>Payee address</b> City; State; Zip Code 211 W. Jefferson Ave. Harlingen, TX 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> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Production and print cost for 4X4 sign directing voters to voting locations on election day
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/10/2013	<b>Payee name</b> Uhlhorn, Tudor G.G. (Mr.)
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<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City; State; Zip Code 2601 S. 77 Sunshine Strip Harlingen, TX 78550-8320
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Repay Loan to Campaign Fund made by Candidate
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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<b>Date</b> 06/10/2013	<b>Payee name</b> Uhlhorn, Tudor G.G. (Mr.)
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<b>Amount (\$)</b> \$551.87	<b>Payee address</b> City; State; Zip Code 2601 S. 77 Sunshine Strip Harlingen, TX 78550-8320
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimburse for Political Expenditures paid by Candidate from Personal Funds
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought:	Office held:
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense	Gifts/Awards/Memorial 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.

<b>1 PAGE #</b> Schedule: 3/3 Report: 6/9		<b>2 FILER NAME</b> Uhlhorn, Tudor George Gaillard (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00000001	
<b>4 Date</b> 06/10/2013		<b>5 Payee name</b> United Way of Northern Cameron County			
<b>6 Amount (\$)</b> \$531.59		<b>7 Payee address</b> City; State; Zip Code 134 E. Van Buren Ave. Harlingen, TX 78550			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Charitable Donation to Close Candidate/Officeholder Campaign Account	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought:                      Office held:	

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

**EXPENDITURE CATEGORIES**

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial 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.

<b>1</b> PAGE # Schedule: 1/1 Report: 7/9	<b>2</b> FILER NAME Uhlhorn, Tudor George Gaillard (Mr.)	<b>3</b> ACCOUNT # (TEC filers) 00000001
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<b>4</b> Date 05/03/2013	<b>5</b> Payee name H.E.B.
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<b>6</b> Amount (\$) \$19.94 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code 1213 S. Commerce Harlingen, TX 78550
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beverages for Campaign Volunteers
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Date 05/10/2013	Payee name H.E.B.
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Amount (\$) \$26.19 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1103 Morgan Blvd. Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beverages & Snacks for Campaign Volunteers
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Date 05/10/2013	Payee name Lowe's
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Amount (\$) \$4.09 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 4705 S. Expressway 77/83 Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Foam handles for hand held campaign signs
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Date 05/11/2013	Payee name Whataburger
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Amount (\$) \$30.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1522 E. Harrison Harlingen, TX 78550
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch for Campaign Volunteers working at Polling Locations on Election Day
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# PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/1 Report: 8/9		<b>2 FILER NAME</b> Uhlhorn, Tudor George Gaillard (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00000001	
<b>4 Date</b> 05/14/2013		<b>5 Business name</b> Rio Grande Equipment Co.			
<b>6 Amount (\$)</b> \$380.81		<b>7 Business address</b> City; State; Zip Code 2601 S. 77 Sunshine Strip Harlingen, TX 78550-8320			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Construction of wood frame for campaign signs mounted on trailer & sign stake cleaning	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: _____ Office held: _____	

**CANDIDATE/OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT**

**FORM C/OH - FR**

The Instruction Guide explains how to complete this form.  
\*\* Complete only if 'Report Type' on page 1 is marked 'Final Report' \*\*

Page 9 of 9

**1 C/OH NAME** Uhlhorn, Tudor George Gaillard (Mr.)

**2 ACCOUNT #** (Ethics Commission filers)  
00000001

**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

**4 FILER WHO IS NOT AN OFFICEHOLDER**

\*\* Complete A & B below only if you are not an officeholder \*\*

**A. CAMPAIGN FUNDS**

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpanded interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

**5 OFFICEHOLDER**

\*\* Complete this section only if you are an officeholder \*\*

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.



\_\_\_\_\_  
Signature of Officeholder