

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	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%; font-size: small;">MS / MRS / MR</td> <td style="width:35%;">Mr.</td> <td style="width:30%; font-size: small;">FIRST</td> <td style="width:20%;">Christopher</td> <td style="width:10%; font-size: small;">MI</td> <td style="width:10%;">H.</td> </tr> <tr> <td style="font-size: small;">NICKNAME</td> <td></td> <td style="font-size: small;">LAST</td> <td>Boswell</td> <td style="font-size: small;">SUFFIX</td> <td></td> </tr> </table>	MS / MRS / MR	Mr.	FIRST	Christopher	MI	H.	NICKNAME		LAST	Boswell	SUFFIX		OFFICE USE ONLY								
MS / MRS / MR	Mr.	FIRST	Christopher	MI	H.																	
NICKNAME		LAST	Boswell	SUFFIX																		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">ADDRESS / PO BOX:</td> <td style="font-size: small;">APT / SUITE #:</td> <td style="font-size: small;">CITY:</td> <td style="font-size: small;">STATE:</td> <td style="font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5">1001 Stack Cir., Harlingen, Texas 78550</td> </tr> </table>			ADDRESS / PO BOX:	APT / SUITE #:	CITY:	STATE:	ZIP CODE	1001 Stack Cir., Harlingen, Texas 78550													
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NICKNAME		LAST	Boswell	SUFFIX																		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">STREET ADDRESS (NO PO BOX PLEASE),</td> <td style="font-size: small;">APT / SUITE #:</td> <td style="font-size: small;">CITY:</td> <td style="font-size: small;">STATE:</td> <td style="font-size: small;">ZIP CODE</td> </tr> <tr> <td colspan="5">1001 Stack Cir., Harlingen, Texas 78550</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE),	APT / SUITE #:	CITY:	STATE:	ZIP CODE	1001 Stack Cir., Harlingen, Texas 78550					Receipt #								
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input checked="" type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input 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 checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	Date Processed										
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: small;">Month</td> <td style="font-size: small;">Day</td> <td style="font-size: small;">Year</td> <td style="font-size: small;">THROUGH</td> <td style="font-size: small;">Month</td> <td style="font-size: small;">Day</td> <td style="font-size: small;">Year</td> </tr> <tr> <td>07</td> <td>15</td> <td>2017</td> <td></td> <td>07</td> <td>15</td> <td>2018</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	07	15	2017		07	15	2018	Date Imaged				
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12 OFFICE	OFFICE HELD (if any) Mayor, City of Harlingen	13 OFFICE SOUGHT (if known) Mayor, City of Harlingen																				

CITY SECRETARY'S OFFICE
Received
JUL 11 2017
11:00 a.m.
All
HARLINGEN, TX

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

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

N/A

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 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) \$ 0.00

EXPENDITURE
TOTALS

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

4. TOTAL POLITICAL EXPENDITURES \$0.00

CONTRIBUTION
BALANCE

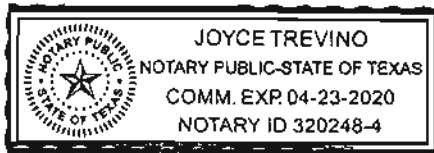
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$43.61

OUTSTANDING
LOAN TOTALS

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

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.



AFFIX NOTARY STAMP / SEAL ABOVE

CH - Boswell
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Christopher H. Boswell, this the 11th day of July, 20 17, to certify which, witness my hand and seal of office.

Joyce Trevino
Signature of officer administering oath

Joyce Trevino

Printed name of officer administering oath

Notary Public, State of Texas

Title of officer administering oath