

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) 23-11	2 Total pages filed: 1
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR NICKNAME Mr. Preach	FIRST LAST Christopher McCain	MI SUFFIX T. —
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1900 Lemita Lake, Arlington, TX 76010		OFFICE USE ONLY Date Received 13 MAY -2 PM 1:13 RECEIVED - CSO Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (682) 203. 3661		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR NICKNAME Ms. —	FIRST LAST Colletta Smith	
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1403 Hickory Hill, Arlington, TX, 76014		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () 214 603 2750		
9 REPORT TYPE	<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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 6th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04 / 11 / 2013 05 / 02 / 2013		
11 ELECTION	ELECTION DATE Month Day Year 05 / 11 / 2013	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) —	13 OFFICE SOUGHT (if known) Arlington City Council District 5	

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