	TE / OFFICEHOLDER IN FINANCE REPORT	FORM C/OH COVER SHEET PG 1			
The C/OH Instruction	n Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission F	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER NAME	MR. CHRISTOHER MI	OFFICE USE ONLY			
IAVINE	NICKNAME LAST SUF	Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX, APT / SUITE #; CITY; STATE; ZIP !	CODE			
	MARRIE FALLS, TX 78654	Date Hand-delivered of Date Postmerked			
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE NUMBER EXTENSION (830) 578 5400	Receipt # Amount			
PHONE		Date Processed			
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI NICKNAME LAST SUFF	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STAT	TE; ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION				
9 REPORTTYPE	January 15 30th day before election Runoff	15th day after campaign treasurer appointment (officeholder only)			
	July 15 8th day before election Exceeded \$500 ii	imit Final report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THROUGH 6	30 / 2010			
11 ELECTION	Month Day Year ELECTION TYPE Primary Runoff	General Special			
12 OFFICE	OFFICE HELD (If any) 13 OFFICE SOUGHT CONSTABLE PRECINCY 4	(if known)			
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL. CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE. Name				
BY OTHER INDIVIDUALS	114(11)				
additional pages	Address / PO Box, Apt. / Suite #; City; State; Zip Code				
	GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT	& IOIAL	.5	COVER SHEET PG 2
16 C/OH NAME CURESTOPHE	R M. J	EIT	16 ACCOUNT # (Ethics Commission Filers)
17 NOTICE FROM POLITICAL	CANDIDATE / OFFICE	TICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MAINTED FOR THE CANDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDERS AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC		
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL P	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE	\$ D
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0
EXPENDITURE TOTALS	3. TOTAL P	OLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ	ZED \$ O
	4. TOTAL POLITICAL EXPENDITURES		\$ 0
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		AY \$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$		
19 AFFIDAVIT		is true and correct and includes all in	perjury, that the accompanying report information required to be reported by
DEB	RA ALINE BIND Notary Public STATE OF TEXAS My Commission	SEIL me under Title 15, Election Code.	
	xpires 01/02/2012	Signature of Candi	date or Officeholder
Sworn to and subsc		e, by the said Christopler	Je++ , this the
$\frac{7}{4}$ day	of Jack	, 20 <u>/ / / ,</u> , to certify which, witness my	hand and seal of office.
Signature of officer admini	Sudul stering oath	Debra Aline Bindseil Printed name of officer administering oath	Motary Title of officer administering oath