

# 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:

<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI Mr.                      Richard                      Thurl NICKNAME                      LAST                      SUFFIX Dick                      Bowen	<b>OFFICE USE ONLY</b> Date Received <div style="text-align: center; font-weight: bold; font-size: 1.2em;">                     2014 JUL 15 AM 11:52                      CITY CLERK DEPT.                 </div> Date Hand-delivered or Postmarked Receipt #                      Amount Date Processed Date Imaged
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> change of address	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 309 Celaya Way                      El Paso, TX                      79927	
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION (915 )                      858-0128	
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI Mr.                      H.                      Clarke NICKNAME                      LAST                      SUFFIX Harvey	

<b>7 CAMPAIGN TREASURER ADDRESS (residence or business)</b>	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 6273 Los Robles                      El Paso, TX                      79912
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<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION (915 )                      588-1168
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<b>9 REPORT TYPE</b>	<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"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)
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<b>10 PERIOD COVERED</b>	Month                      Day                      Year                      THROUGH                      Month                      Day                      Year 06-18-14 /                      07-11-2014
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<b>11 ELECTION</b>	ELECTION DATE                      ELECTION TYPE Month                      Day                      Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special 97 / 19 / 2014
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<b>12 OFFICE</b> OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b> El Paso, City Council District 6
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**GOTO PAGE 2**

# PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### 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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule H:	<b>2</b> FILER NAME	<b>3</b> ACCOUNT # (Ethics Commission Filer)
One (1)	RICHARD THURL BOWEN	
<b>4</b> Date	<b>5</b> Business name	
6-21-14	First National Bank	
<b>6</b> Amount (\$)	<b>7</b> Business address; City; State; Zip Code	
\$29.65	El Paso, TX 79925	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Fees	Checks
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
	Dick Bowen	City council District 6
Date	Business name	
7-09-14	Perky Press	
Amount (\$)	Business address; City; State; Zip Code	
\$657.54	11385 James Watt El Paso, TX 79936	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Printing Expense	Signs, mailers and Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
	Dick Bowen	City Council District 6
Date	Business name	
Amount (\$)	Business 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	Business name	
Amount (\$)	Business 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

2014 JUL 15 AM 11:52  
CITY CLERK DEPT.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**CANDIDATE / OFFICEHOLDER  
SPECIAL PRE-ELECTION REPORT**

**FORM C/OH-T**

<b>1 ACCOUNT #</b>		<b>2 Total pages filed:</b> Two (2)		<b>OFFICE USE ONLY</b>	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS/MRS/MR	FIRST	MI	Date Received	
	NICKNAME	LAST	SUFFIX	2014 JUL 15 AM 11:53 CITY CLERK DEPT	
<b>4 CANDIDATE / OFFICEHOLDER ADDRESS</b>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;		
<b>5 OFFICE SOUGHT</b>	El Paso City Council District 6				Date Hand-delivered or Postmarked
				Receipt #	Amount
				Date Processed	
				Date Imaged	

**POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES)**

<b>6 Date</b>	<b>7 Contributor name</b>	<b>9 Amount of contribution (\$)</b>	<b>10 In-kind contribution description (if applicable)</b>
7-09-14	H. Clarke Harvwy	\$1500.00	
	<b>8 Contributor address; City; State; Zip Code</b>		
	6273 Los Robles El Paso, TX 79912		
		(If travel outside of Texas, complete Schedule T)	
<b>Date</b>	<b>Contributor name</b>	<b>Amount of contribution (\$)</b>	<b>In-kind contribution description (if applicable)</b>
	Contributor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	
<b>Date</b>	<b>Contributor name</b>	<b>Amount of contribution (\$)</b>	<b>In-kind contribution description (if applicable)</b>
	Contributor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	

**PLEDGED CONTRIBUTIONS**

<b>Date</b>	<b>Pledgor name</b>	<b>Amount of contribution (\$)</b>	<b>In-kind contribution description (if applicable)</b>
	Pledgor address; City; State; Zip Code		
		(If travel outside of Texas, complete Schedule T)	

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME \_\_\_\_\_ 15 ACCOUNT # (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.

GENERAL  
 SPECIFIC

COMMITTEE NAME: Dick Bowen Campaign Committee

COMMITTEE ADDRESS: 309 Celaya Way El Paso, TX 79927

COMMITTEE CAMPAIGN TREASURER NAME: H. Clarke Harvey

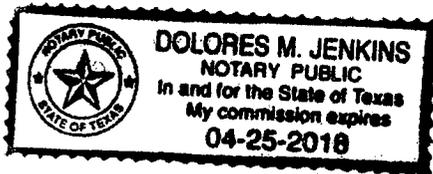
COMMITTEE CAMPAIGN TREASURER ADDRESS: 6273 Los Robles El Paso, TX 79912

additional pages

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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)	\$ 1500.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 40.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 657.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1722.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1716.67

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.

*[Signature]*  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard J. Bowen, this the 15th day of July, 20 14, to certify which, witness my hand and seal of office.

Dolores M. Jenkins Signature of officer administering oath  
Dolores M. Jenkins Printed name of officer administering oath  
Notary Title of officer administering oath