

FORMER CANDIDATE FOR SPEAKER OF THE TEXAS HOUSE OF REPRESENTATIVES: ANNUAL REPORT OF UNEXPENDED CONTRIBUTIONS

FORM SPK-UC COVER SHEET

See SPK-UC Instruction Guide for detailed instructions.		1 ACCOUNT #	2 Total pages filed:
3 FORMER SPEAKER CANDIDATE NAME	TITLE FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX		
4 FORMER SPEAKER CANDIDATE MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Received	
		Date Hand-delivered or Postmarked	
		Receipt #	Amount
5 FORMER SPEAKER CANDIDATE TELEPHONE NUMBER	AREA CODE PHONE NUMBER EXTENSION ()	Date Processed	
		Date Imaged	
6 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year

7 VERIFICATION

I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Chapter 302, Texas Government Code.

Signature of Former Speaker Candidate

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

GO TO SCHEDULE A

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED CONTRIBUTIONS: CONTRIBUTIONS

FORM **SPK-UC** SCHEDULE **A**

See SPK-UC Instruction Guide for detailed instructions.

1 Total pages Schedule A:

2 FORMER SPEAKER CANDIDATE NAME

3 ACCOUNT #

4 Date	5 Full name of contributor	7 Amount / Value of contribution (\$)	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code		
Date	Full name of contributor	Amount / Value of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Date	Full name of contributor	Amount / Value of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Date	Full name of contributor	Amount / Value of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Date	Full name of contributor	Amount / Value of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		
Date	Full name of contributor	Amount / Value of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED CONTRIBUTIONS: LOANS

FORM SPK-UC SCHEDULE B

See SPK-UC Instruction Guide for detailed instructions.

1 Total pages Schedule B:

2 FORMER SPEAKER CANDIDATE NAME

3 ACCOUNT #

4 Date of loan

5 Amount of Loan (\$)

6

First reporting

Previously reported
but still unpaid

Paid during period covered
by this report

7 Name of lender

9 Names of responsible parties, other than former speaker candidate

8 Lender address; City; State; Zip Code

10 Addresses of responsible parties, other than former speaker candidate:
Address; City; State; Zip Code

11 Payment(s) made on note

Yes (continue at right)

No (go to next loan or schedule)

12 Amount of Payment(s)

13 Source of Payment(s)

Date of loan

Amount of Loan (\$)

First reporting

Previously reported
but still unpaid

Paid during period covered
by this report

Name of lender

Names of responsible parties, other than former speaker candidate

Lender address; City; State; Zip Code

Addresses of responsible parties, other than former speaker candidate:
Address; City; State; Zip Code

Payment(s) made on note

Yes (continue at right)

No (go to next loan or schedule)

Amount of Payment(s)

Source of Payment(s)

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FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED CONTRIBUTIONS: EXPENDITURES

FORM SPK-UC SCHEDULE C

See SPK-UC Instruction Guide for detailed instructions.

1 Total pages Schedule C:

2 FORMER SPEAKER CANDIDATE NAME

3 ACCOUNT #

4 Date

5 Payee name

7 Amount
(\$)

6 Payee address; City; State; Zip Code

8 Purpose of expenditure

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

Purpose of expenditure

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

Purpose of expenditure

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

Purpose of expenditure

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