## CANDIDATE / OFFICEHOLDER REPORT OF UNEXPENDED CONTRIBUTIONS

### FORM C/OH-UC COVER SHEET PG 1

	The C/OH-UC	Instruction Guide explains ho	w to complete this form.		1 Filer ID (Ethics C	commission Filers)
2	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST		MI	OFFICE Date Received	USE ONLY
	NAME	NICKNAME LAST		SUFFIX	Date Necesved	
3	CANDIDATE / OFFICEHOLDER ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
	change of address				Receipt #	Amount \$
4	REPORT TYPE	Annual	Final Disposition		Date Processed	
5	PERIOD COVERED	Month Day Year	Month Day	Year /	Date Imaged	
6	TOTALS		TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.			
		RNED ON OUS YEAR.	\$			
		rear, or affirm, under penalty of pormation required to be reported b	y me under Title 15, Electic	on Code.	e/Officeholder	
(1	) Affidavit	Please cor	mplete either option	below:		
	NOTARY STAMP/SEAL					
		efore me by		this the	day of	
2	U, to certify w	hich, witness my hand and seal of office	9.			
Si	gnature of officer administerir		Title of officer administering oath			
10	) Haswara Deslaration		OR			
(2	) Unsworn Declaration	1				
M	y address is	(street)	,(city)		,, e) (zip code)	
Ex	ecuted in	County, State of	` * * *	`	, , ,	` ,
			Signature o	of Candidate	/Officeholder (Decl	arant)

#### **EXPENDITURES PG** 2 9 Filer ID (Ethics Commission Filers) 8 C/OHNAME 10 13 Date Payee name Amount (\$) City; State; Zip Code Payee address; 14 Purpose of expenditure (See instructions regarding type of information required.) Is expenditure a contribution Yes to a candidate, officeholder, or political committee? No Check if travel outside of Texas. Complete Schedule T. Amount Payee name Date (\$) Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) Is expenditure a contribution Yes to a candidate, officeholder, or No political committee? Check if travel outside of Texas. Complete Schedule T. Date Amount Payee name (\$) City; State; Zip Code Payee address; Purpose of expenditure (See instructions regarding type of information required.) Is expenditure a contribution Yes to a candidate, officeholder, or No political committee? Check if travel outside of Texas. Complete Schedule T. Date Amount Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) Is expenditure a contribution Yes to a candidate, officeholder, or No political committee? Check if travel outside of Texas. Complete Schedule T. ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

C/OH REPORT OF UNEXPENDED CONTRIBUTIONS:

FORM C/OH-UC



# AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2022, a candidate or officeholder who has accepted more than \$28,800 in political contributions or made more than \$28,800 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name	Filer ID #

OFFICE USE ONLY					
Date Received	Date Received				
Date Hand-delivered or Date Postmarked					
Receipt #	Amount \$				
Date Processed	Date Processed				
Date Imaged					

- 1. I swear or affirm that I have not accepted more than \$28,800 in political contributions or made more than \$28,800 in political expenditures in a calendar year.
- 2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$28,800 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
- 5. I am filing this affidavit with the \_\_\_\_\_ report due on \_\_\_\_.
  I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

#### Please complete either option below:

(1) Affidavit Signature of Filer NOTARY STAMP/SEAL Sworn to and subscribed before me by \_\_\_\_\_ \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_ \_\_\_\_, 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 (2) Unsworn Declaration My name is \_\_\_\_\_\_, and my date of birth is \_\_\_\_\_ My address is \_\_\_\_\_ (city) (state) (zip code) (country) Executed in \_\_\_\_\_ County, State of \_\_\_\_\_ , on the \_\_\_\_ day of \_ (month) Signature of Filer (Declarant)

FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER