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

FORM SPK-UC COVER SHEET

	See SPK-UC Instruc	tion Guide for detailed	instructions.	1 Filer ID (Ethics Commission I	Filers)	2 Total pages fil	ed:
3	FORMER SPEAKER	TITLE	FIRST		MI	OFFICE	USE ONLY
	CANDIDATE NAME					Date Received	
		NICKNAME	LAST		SUFFIX		
4	FORMER	ADDRESS / PO BOX;	APT / SUITE #; 0	CITY; STATE;	ZIP CODE	Date Hand-delivered or	Dato Bostmarkod
	SPEAKER CANDIDATE					Date Hallu-delivered of	Dale Posiliarkeu
	MAILING ADDRESS					Receipt #	Amount
5	FORMER SPEAKER	AREA CODE	PHONE NUMBER	EXTENS	ION	Date Processed	1
	CANDIDATE TELEPHONE					Date Imaged	
6	NUMBER	() Month Day	Year			Month Day	Year
6	COVERED	/ /	Teal	THROUGH		/ /	/
7	VERIFICATION						
			reported	by me under Char			nt Code.
				Signature	Former Speak	Canuluale	
	AFFIX NOTARY STA	MP / SEAL					
		bed before me, by the safe which, witness my ha	aid		_ , this the	day of	:,
	Signature of office	er administering oath	Printed name of of	icer administering oath	ı T	itle of officer admir	nistering oath

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDEDFORM SPK-UCCONTRIBUTIONS:MONETARY CONTRIBUTIONSSCHEDULE A(S)1

	See SPK-UC Instruction Guide for detailed instructions.			1	1 Total pages Schedule A(S)1:		
2	FORMER SP	EAI	KER CANDIDATE NAME	3	Filer ID (Ethics Commission Filers)		
4	Date	5	Full name of contributor Contributor address; City; State; Zip Code	7	Amount / Value of contribution (\$)		

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDEDFORM SPK-UCCONTRIBUTIONS:IN-KIND CONTRIBUTIONSSCHEDULE A(S)2

	See SPK-UC Instruction Guide for detailed instructions.			1 Total pages Schedule A(S)2:			
2	FORMER SP	EAKER CANDIDATE NAME	3	Filer ID (Ethic	s C	ommission Filers)	
4	Date	 Full name of contributor Contributor address; City; State; Zip Code 	7	Amount / Value of contribution (\$)	8	In-kind contribution description (if applicable)	

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED FORM SPK-UC SCHEDULE E(S)

2 FORMER SPEAKER CANDIDATE NAME 3 Filer ID (Ethics Commission Filer) 4 Date of Ioan 5 Amount of Loan (\$) 6 Previously reported but still unpaid Paid during period covered by this reported but still unpaid 7 Name of lender 9 Responsible parties, other than speaker candidate 8 Lender address; City; State; Zip Code 10 11 Payment(s) made on this note 12 Amount of Payment(s) 13 Source of Payment(s) Yes (continue at right) No (go to next loan or schedule) 12 Amount of Payment(s) 13 Source of Payment(s)	See SPK-UC Instruction Guide for detailed instructions.					1 Total pages Schedule E(S):			
Image: Previously reported but still unpaid Paid during period covered by this reported but still unpaid Paid during period covered by this reported but still unpaid 7 Name of lender 9 Responsible parties, other than speaker candidate 8 Lender address; City; State; Zip Code 10 Address; City; State; Zip Code 11 Payment(s) made on this note 12 Amount of Payment(s) 13 Source of Payment(s) Yes (continue at right) 12 Amount of Payment(s) 13 Source of Payment(s)	2 FORMER SPEAKE	R CANDIDATE NAME			3	Filer ID (Ethics Co	ommission Filers)		
8 Lender address; City; State; Zip Code 10 Address; City; State; Zip Code 11 Payment(s) made on this note 12 Amount of Payment(s) 13 Source of Payment(s) 13 Source of Payment(s)	4 Date of loan	5 Amount of Loan (\$)		rting	Previously reporte but still unpaid		uring period d by this report		
11 Payment(s) made on this note 12 Amount of Payment(s) 13 Source of Payment(s) Yes (continue at right) 14 Amount of Payment(s) 13 Source of Payment(s)	7 Name of lender			9 Responsi	ble parties, other tha	an speaker candidate			
Yes (continue at right)	8 Lender address;	City; State;	Zip Code	10 Address;	City;	State;	Zip Code		
	Yes (continue a	at right)	unt of Payment(s)	13 Source of	Payment(s)				

FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED FORMER SPEAKER CANDIDATE REPORT OF UNEXPENDED FOR CONTRIBUTIONS: EXPENDITURES Set 500 SE

FORM SPK-UC SCHEDULE F(S)

Γ	See SPK-I	JC Instruction Guide for detailed instructions.	1	Total pages Schedule F(S):
2	FORMER SP	EAKER CANDIDATE NAME	3	Filer ID (Ethics Commission Filers)
4	Date	5 Payee name	7	Amount (\$)
		6 Payee address; City; State; Zip Code		
8	Purpose of ex	kpenditure	•	