

**CANDIDATE / OFFICEHOLDER  
REPORT OF UNEXPENDED CONTRIBUTIONS**

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

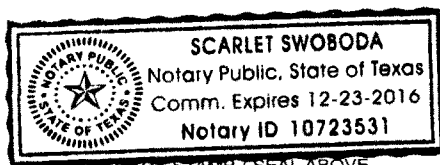
The C/OH-UC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)
2 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI <b>MR. THOMAS A</b>	<b>OFFICE USE ONLY</b> Date Received <b>JAN 15 2016</b> <b>RECEIVED</b> <b>City Secretary</b>
	NICKNAME LAST SUFFIX <b>TOM HALEPASKA</b>	
3 CANDIDATE / OFFICEHOLDER ADDRESS  <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>104 PECOS VICTORIA TX 77904</b>	Date Hand-delivered or Date Postmarked <b>JAN 15 2016</b>
		Receipt # Amount \$
4 REPORT TYPE	<input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final Disposition	Date Processed
5 PERIOD COVERED	Month Day Year Month Day Year <b>1 / 1 / 2015 THROUGH 12 / 31 / 2015</b>	Date Imaged
6 TOTALS	1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.	\$ <b>3020.54</b>
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.	\$ <b>1.56</b>

**7 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.

*Tom Halepaska*

Signature of Candidate or Officeholder



ATTACH NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tom Halepaska, this the 15th day of January, 2016, to certify which, witness my hand and seal of office.

*Scarlet Swoboda*  
Signature of officer administering oath

Scarlet Swoboda  
Printed name of officer administering oath

Notary  
Title of officer administering oath