

**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: DR. NICKNAME: ANDREW LAST: J SUFFIX: YOUNG

3 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: 801 APT / SUITE #: W COMMERCIAL, VICTORIA TX CITY: STATE: ZIP CODE: 77901

change of address

4 REPORT TYPE

Semi-Annual Final Disposition

5 PERIOD COVERED

Month Day Year: 1 / 1 / 16 THROUGH Month Day Year: 6 / 30 / 16

6 TOTALS

1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.
2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.

OFFICE USE ONLY

Date Received: RECEIVED JUL 15 2016 City Secretary
Date Hand-delivered or Date Postmarked: JUL 15 2016
Receipt # Amount \$
Date Processed
Date Imaged

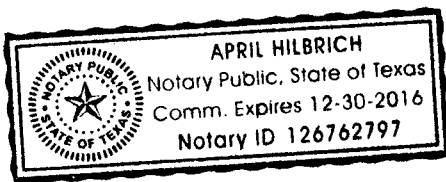
\$ 199.40
\$ 0

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.

[Handwritten Signature]

Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Andrew Young, this the 15th day of July, 20 16, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

April Hilbrich
Printed name of officer administering oath

Notary
Title of officer administering oath