

# 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

MRS/MR      FIRST      MI  
THOMAS      A  
 NICKNAME      LAST      SUFFIX  
TOM      HALEPASKA

OFFICE USE ONLY

Date Received

JAN 8 2018

*[Handwritten Signature]*

Date Hand-delivered or Date Postmarked

JAN 8 2018 3:07pm

Receipt #

Amount \$

3 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX:      APT / SUITE #;      CITY;      STATE;      ZIP CODE  
104 PECOS      VICTORIA TX      77907

change of address

Date Processed

4 REPORT TYPE

Annual       Final Disposition

5 PERIOD COVERED

Month      Day      Year      Month      Day      Year  
1 / 1 / 2017 THROUGH 12 / 31 / 2017

Date Imaged

6 TOTALS

1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.

\$ 464.53

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

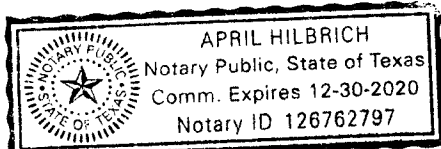
\$ .35

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



AFFIDAVIT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tom Halepaska, this the 5th day of Jan, 20 18, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

April Hilbrich

Printed name of officer administering oath

Notary

Title of officer administering oath