

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
Mr Matthew C
NICKNAME LAST SUFFIX
Matt Powell

OFFICE USE ONLY

Date Received

19 JAN 15 PM 3:42

3 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
4007 Arrow Wood Rd Cedar Park TX 78613

LMU

Date Hand-delivered or Date Postmarked

change of address

Receipt #

Amount \$

4 REPORT TYPE

Annual Final Disposition

Date Processed

5 PERIOD COVERED

Month Day Year Month Day Year
7 / 15 / 18 THROUGH 1 / 1 / 19

Date Imaged

6 TOTALS

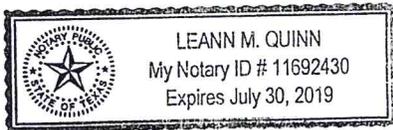
1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.

\$ 16,942.57

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

\$ 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.

Matthew Powell
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Matthew Powell, this the 15th day of January, 20 19, to certify which, witness my hand and seal of office.

LeAnn M. Quinn · LeAnn M. Quinn City Sec
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath