

SPEAKER'S REUNION DAY REPORT

FORM SPK-RD COVER SHEET

See the back of this Cover Sheet for information about the law regarding the Speaker's Reunion Day Report.		OFFICE USE ONLY	
1 TOTAL PAGES OF SCHEDULE A FILED: _____ TOTAL PAGES OF SCHEDULE B FILED: _____		Filer ID # _____	
		Date Received _____	
2 CHAIRMAN'S NAME	TITLE	FIRST	MI
	Hand-delivered or Postmarked		Amount \$
	NICKNAME	LAST	SUFFIX
	Receipt #		Date Processed
Date Imaged			
3 CHAIRMAN'S MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
4 CHAIRMAN'S TELEPHONE NUMBER	AREA CODE	TELEPHONE NUMBER	EXTENSION
()			
5 REPORT TYPE	<input type="checkbox"/> FINAL REPORT <input type="checkbox"/> SUPPLEMENTAL REPORT IF THIS IS A FINAL REPORT, IS THERE AN OUTSTANDING DEBT ON THE DATE OF THIS REPORT? <input type="checkbox"/> YES <input type="checkbox"/> NO		
6 DATE OF CEREMONY	MONTH	DAY	YEAR
/ /			
7 CONTRIBUTION TOTALS	A. TOTAL CONTRIBUTIONS FROM SCHEDULE A		\$
	B. TOTAL CONTRIBUTIONS OF \$50 OR LESS		\$
	C. TOTAL OF ALL CONTRIBUTIONS (ADD LINES 7A & 7B)		\$
8 EXPENDITURE TOTALS	A. TOTAL EXPENDITURES FROM SCHEDULE F		\$
	B. TOTAL EXPENDITURES OF \$50 OR LESS		\$
	C. TOTAL OF ALL EXPENDITURES (ADD LINES 8A & 8B)		\$
_____ Signature of chairman			

SPEAKER'S REUNION DAY REPORT

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SPEAKER'S REUNION DAY CEREMONY. Government Code chapter 303 regulates contributions and expenditures for a Speaker's Reunion Day ceremony.

DESIGNATION OF CHAIRMAN. Before any contributions are accepted or any expenditures are made for a Speaker's Reunion Day ceremony, the speaker shall designate a chairman to be responsible for conducting the ceremony. The chairman is responsible for keeping the records and filing the reports required by Government Code chapter 303.

CONTRIBUTION LIMIT. Contributions from a contributor to the Speaker's Reunion Day ceremony may not exceed an aggregate of \$1,000 cash or an aggregate value of more than \$1,000.

REQUIRED REPORTS.

Final Report: Not later than the 60th day after the date of the Speaker's Reunion Day ceremony, the chairman shall file with the Texas Ethics Commission a final report of contributions and expenditures.

Supplemental Report: If there is an outstanding debt when the final report is filed, the chairman shall file a supplemental report of contributions and expenditures not later than the 30th day after the date on which the debt is retired.

REPORTING CONTRIBUTIONS.

Complete Schedule A for each individual or entity that contributed more than \$100. Enter the aggregate total of contributions reported on Schedule A on Line 7A of the Cover Sheet.

Enter the aggregate total of contributions from individuals or entities that contributed \$100 or less on Line 7B of the Cover Sheet.

Add Lines 7A and 7B to calculate total contributions and enter that amount on Line 7C of the Cover Sheet.

REPORTING EXPENDITURES.

Complete Schedule F for each expenditure of more than \$100. Enter the aggregate total of expenditures reported on Schedule F on Line 8A of the Cover Sheet.

Enter the aggregate total of expenditures of \$100 or less on Line 8B of the Cover Sheet.

Add Lines 8A and 8B to calculate total expenditures and enter that amount on Line 8C of the Cover Sheet.

SURPLUS FUNDS. If there is a surplus of funds at the end of the 60-day period, the chairman shall distribute the balance to one or more charities designated by the Speaker, or, retain the balance in an account established for that purpose in the name of the Speaker.

CONTRIBUTIONS

SCHEDULE A (SPK)

(Complete Schedule A for any individual or entity whose total contributions exceed \$50.)

1 Total pages Schedule A (SPK):		OFFICE USE ONLY	
2 Chairman's name			
3 Date	4 Full name of contributor 5 Contributor address; City; State; Zip Code	6 Amount of contribution (\$)	7 Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution
Date	Full name of contributor Contributor address; City; State; Zip Code	Amount of contribution (\$)	Type of contribution <input type="checkbox"/> cash contribution <input type="checkbox"/> in-kind contribution

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

EXPENDITURES

SCHEDULE F (SPK)

(Complete Schedule F for expenditures of more than \$50.)

1 Total pages Schedule F (SPK):	OFFICE USE ONLY
2 Chairman's name	

3 Date	4 Payee name	6 Amount (\$)
	5 Payee address; City; State; Zip Code	

7 Purpose of expenditure

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of expenditure

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of expenditure

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	

Purpose of expenditure

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED