

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 Filor ID (Ethics Commission Filers)	
2 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI	OFFICE USE ONLY	
	Date		
3 CANDIDATE / OFFICEHOLDER ADDRESS	NICKNAME LAST SUFFIX	Date Received 6/11/2025 Vicki Miller	
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked	
4 REPORT TYPE	<input type="checkbox"/> Annual <input checked="" type="checkbox"/> Final Disposition	Receipt # Amount \$	
	Month Day Year Month Day Year	Date Processed 6/11/2025	
5 PERIOD COVERED	3 / 19 / 2024 THROUGH 5 / 29 / 2025	Date Imaged	
6 TOTALS	1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.	\$ 554.51	
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.	\$ 0.00	

7 SIGNATURE 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.

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is DALE McQueen, and my date of birth is 9/25/1959.

My address is 238 E FM 1396, Ivanhoe, TX, 75447, Fannin.
(street) (city) (state) (zip code) (country)

Executed in Fannin County, State of Texas, on the 11 day of June, 2025.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

**C/OH REPORT OF UNEXPENDED CONTRIBUTIONS:
EXPENDITURES****FORM C/OH-UC****PG 2**

8 C/OH NAME Dale McQueen		9 Filer ID (Ethics Commission Filers)
10 Date 5/29/2025	11 Payee name Fannin County Republican Party	13 Amount (\$) 554.51
	12 Payee address; City; State; Zip Code PO Box 83, Randolph, TX 75475	
14 Purpose of expenditure (See instructions regarding type of information required.) Remaining funds to Fannin County Republican Party <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		15 Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date	Payee name Payee address; City; State; Zip Code	Amount (\$)
Purpose of expenditure (See instructions regarding type of information required.) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED		