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MAR 4 1974

STATE OF TEXAS
OFFICE OF THE SECRETARY OF STATE ENFORCEMENT DIVISION
AUSTIN, TEXAS 78711

FINANCIAL STATEMENT

Required to be filed
pursuant to Article 6252-9b, V.A.C.S.

For Calendar Year Ending Dec. 31, 1973

(Please Type)

FINANCIAL STATEMENT

Sec. 4(a) The financial statement shall include the account of the financial activity of the person required to file the statement and the financial activity of his spouse and dependent children over which he had actual control for the preceding calendar year.

PLEASE TYPE

INDIVIDUAL REQUIRED TO FILE:

NAME	WHITMIRE	JOHN	HARRIS
	_____	_____	_____
	Last	First	Middle

SPOUSE:

NAME	None		
	_____	_____	_____
	Last	First	Middle

DEPENDENT CHILD OR CHILDREN:

Sec. 2(14) A person's natural child, adopted child, or stepchild is his "dependent child" during the calendar year if the person provides over 50 percent of the child's support during the year.

NAME	None		
	_____	_____	_____
	Last	First	Middle

NAME			
	_____	_____	_____
	Last	First	Middle

NAME			
	_____	_____	_____
	Last	First	Middle

INSTRUCTIONS:

Where additional space is required, throughout this Financial Statement, please attach pages of the approximate same size and identify each section to which the attached pages pertain.

(Please Type)

FINANCIAL ACTIVITY

NAME	WHITMIRE	JOHN	HARRIS
	Last	First	Middle

State of Texas
Name of Employer

Austin, Texas
Address of Employer

If self-employed:

None
Nature of Occupation

Occupational Income (list all sources)

State of Texas

Identify any person, business entity or other organization from whom you or a business in which you have a substantial interest received a fee as a retainer for a claim on future services in case of need (as opposed to a fee for services on a matter specified at the time of contracting for or receiving the fee), whenever professional or occupational services were not actually performed during the reporting period commensurate to or in excess of the amount of the retainer, and the category of the amount of the fee.

(Please specify if the fee was received by you or a business in which you have a substantial interest and if received by said business please identify same.)

Fee received by:

None

Person, business entity or other organization from whom you or a business in which you have substantial interest received fee:

None

CATEGORY OF FEE:

- () less than \$1000.00
- () \$1000.00 to \$4999.99
- () \$5000.00 or more

(Please Type)

FINANCIAL ACTIVITY

SPOUSE None
 Last First Middle

Name of Employer

Address of Employer

If self-employed:

Nature of Occupation

Occupational Income (list all sources)

Identify any person, business entity or other organization from whom you or a business in which you have a substantial interest received a fee as a retainer for a claim on future services in case of need (as opposed to a fee for services on a matter specified at the time of contracting for or receiving the fee), whenever professional or occupational services were not actually performed during the reporting period commensurate to or in excess of the amount of the retainer, and the category of the amount of the fee.

(Please specify if the fee was received by you or a business in which you have a substantial interest and if received by said business please identify same.)

Fee received by:

None

Person, business entity or other organization from whom you or a business in which you have substantial interest received fee:

None

CATEGORY OF FEE:

- () less than \$1000.00
- () \$1000.00 to \$4999.99
- () \$5000.00 or more

(Please Type)

FINANCIAL ACTIVITY

DEPENDENT CHILD:

Sec. 2(14) A person's natural child, adopted child, or step-child is his "dependent child" during the calendar year if the person provides over 50 percent of the child's support during the year.

NAME None
Last First Middle

Name of Employer

Address of Employer

If self-employed:

Nature of Occupation

Occupational Income (list all sources)

Identify any person, business entity or other organization from whom you or a business in which you have a substantial interest received a fee as a retainer for a claim on future services in case of need (as opposed to a fee for services on a matter specified at the time of contracting for or receiving the fee), whenever professional or occupational services were not actually performed during the reporting period commensurate to or in excess of the amount of the retainer, and the category of the amount of the fee.

(Please specify if the fee was received by you or a business in which you have a substantial interest and if received by said business please identify same.)

Fee received by:

None

Person, business entity or other organization from whom you or a business in which you have substantial interest received fee:

None

CATEGORY OF FEE:

- () less than \$1000.00
- () \$1000.00 to \$4999.99
- () \$5000.00 or more

(Please Type)

(2) Identification by name and category of number of shares of stock of any business entity held or acquired, and if sold the category of the amount of net gain or loss realized from such sale:

STOCK IN BUSINESS ENTITY HELD OR ACQUIRED:

a. None

Name of Business Entity _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

CATEGORY OF NUMBER OF SHARES OF STOCK HELD OR ACQUIRED:

- ☐ less than 100 shares
- ☐ 100 shares to 499 shares
- ☐ 500 shares or more

IF SHARES OF STOCK IN BUSINESS ENTITY SOLD:

- ☐ Net Gain ☐ Net Loss ☐ less than \$1000.00
- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

(3) A list of all bonds, notes, and other commercial paper held or acquired, and if sold the category of the amount of net gain or loss realized from such sale:

BONDS:

a. None

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

b. _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

NOTES :

a. None

() Individual
() Spouse
() Dependent Child

Name -----
Last First Middle

b. _____

() Individual
() Spouse
() Dependent Child

Name -----
Last First Middle

OTHER COMMERCIAL PAPER:

a. None

() Individual
() Spouse
() Dependent Child

Name -----

Last	First	Middle
------	-------	--------

b. _____

() Individual
() Spouse
() Dependent Child

Name -----

Last	First	Middle
------	-------	--------

BONDS SOLD:

a. None

() Individual
() Spouse
() Dependent Child

Name -----

Last	First	Middle
------	-------	--------

[illegible]

(Please Type)

b. None

() Individual
() Spouse
() Dependent Child

Name _____
Last First Middle

() Net Gain () Net Loss

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

NOTES SOLD:

a. None

() Individual
() Spouse
() Dependent Child

Name _____
Last First Middle

[illegible]

b. ~~_____~~

() Individual
() Spouse
() Dependent Child

Name _____

Last	First	Middle
------	-------	--------

[illegible]

OTHER COMMERCIAL PAPER SOLD:

a. None

() Individual
() Spouse
() Dependent Child

Name _____
Last First Middle

() Net Gain () Net Loss

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

b. None

Name _____
Last First Middle

() Net Gain () Net Loss () less than \$1000.00
 () \$1000.00 to \$4999.99
 () \$5000.00 or more

(4) Identification of each source and the category of the amount of income in excess of \$500 derived per source from interest, dividends, royalties, and rents:

INTEREST: (please identify source and category of the amount only
if in excess of \$500.00)

a. None

Name _____
Last First Middle

CATEGORY OF THE AMOUNT:

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

DIVIDENDS: (please identify source and category of the amount only
if in excess of \$500.00)

a. _____ None

Name _____
Last First Middle

CATEGORY OF THE AMOUNT:

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

a. None

- Name _____
Last First Middle

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

a. None

- Name _____
Last First Middle

() less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

Identity of person or financial institution:

a. Northwest National Bank

- | Name | Whitmire | John | Harris |
|------|----------|-------|--------|
| | Last | First | Middle |

(X) \$1000.00 to \$4999.99
() \$5000.00 or more

(Please Type)

Identity of person or financial institution:

b. _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

CATEGORY OF AMOUNT OF THE LIABILITY:

- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

(6) Identification by description of all beneficial interests in real property and business entities held or acquired, and if sold the category of the amount of the net gain or loss realized from such sale:

DESCRIPTION OF BENEFICIAL INTEREST IN REAL PROPERTY HELD OR ACQUIRED:
 (a description of real property is required to be reported by number of lots or number of acres, as applicable, in each county and the name of the county.)

None

Describe beneficial interest _____

Number of lots or acres _____

Name of County _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

Describe beneficial interest _____

Number of lots or acres _____

Name of County _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

(Please Type)

DESCRIPTION OF BENEFICIAL INTEREST IN REAL PROPERTY SOLD:

Describe beneficial interest

Number of lots or acres -----

Name of County -----

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name -----
Last First Middle

- ☐ Net Gain ☐ Net Loss ☐ Less than \$1000.00
- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

Describe beneficial interest

Number of lots or acres -----

Name of County -----

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name -----
Last First Middle

- ☐ Net Gain ☐ Net Loss ☐ Less than \$1000.00
- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

DESCRIPTION OF BENEFICIAL INTEREST IN BUSINESS ENTITIES HELD OR ACQUIRED:

("Business entity" means a sole proprietorship, partnership, firm corporation, holding company, joint stock company, receivership, trust, or any other entity recognized in law through which business for profit is conducted.)

1. None

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name -----
Last First Middle

(Please Type)

2. _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

DESCRIPTION OF BENEFICIAL INTEREST IN BUSINESS ENTITIES SOLD:

1. None

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

- ☐ Net Gain ☐ Net Loss ☐ Less than \$1000.00
- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

2. _____

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____

- ☐ Net Gain ☐ Net Loss ☐ Less than \$1000.00
- ☐ \$1000.00 to \$4999.99
- ☐ \$5000.00 or more

(7) Identification of any person, business entity, or other organization from whom the person or his spouse or dependent children received a gift of money or property in excess of \$250.00 in value or a series of gifts of money or property, the total of which exceeds \$250.00 in value received from the same source, and a description of each gift, except gifts received from persons related to the person at any time within the second degree of consanguinity or affinity and campaign contributions, which were reported as required by law:

Identity of person, business entity, or other organization

None

Description of gift in excess of \$250.00

- ☐ Individual
- ☐ Spouse
- ☐ Dependent Child

Name _____
 Last First Middle

Identity of person, business entity, or other organization

Description of gift in excess of \$250.00

() Individual
() Spouse
() Dependent Child

Name _____

Last	First	Middle
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(8) Identification of the source and the category of the amount of all income received as beneficiary of a trust and identification of each asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500.00:

None
Beneficiary

Trust

List assets known, if income derived more than \$500.00

Check category of amount received only during reporting period:

() Less than \$1000.00
() \$1000.00 to \$4999.99
() \$5000.00 or more

(9) Identification by description and category of the amount of all assets and liabilities of any corporation in which 50 percent or more of the outstanding stock was held, acquired, or sold:

Name of corporation:

None

ASSETS: (description)

() Individual
() Spouse
() Dependent Child

Name _____

Last	First	Middle
------	-------	--------

() Held/Acquired () Sold () Less than \$1000.00
 () \$1000.00 to \$4999.99
 () \$5000.00 or more

LIABILITIES: (description)

() Individual
() Spouse
() Dependent Child

Name _____

Last	First	Middle
------	-------	--------

() Held/Acquired () Sold () Less than \$1000.00
 () \$1000.00 to \$4999.99
 () \$5000.00 or more

(10) A list of all boards of directors of which you are a member and executive positions which you hold in corporations, firms, partnerships, and proprietorships, stating the name of each corporation, firm, partnership, or proprietorship and the position held.

None
Name of corporation, firm, partnership, proprietorship

Position held

A list of all boards of directors of which your spouse or dependent child or children are members and executive positions held by them in corporations, firms, partnerships, and proprietorships, stating the name of each corporation, firm, partnership, or proprietorship and the position held.

Name of corporation, firm, partnership, proprietorship

Position held

() Spouse
() Dependent Child

Name _____

Last	First	Middle
------	-------	--------

Name of corporation, firm, partnership, proprietorship

Position held

() Spouse
() Dependent Child

Name -----

Last	First	Middle
------	-------	--------

VERIFICATION

I do solemnly swear that the foregoing Financial Statement, filed herewith is in all things true and correct, and fully shows all information required to be reported by me pursuant to Article 6252-9b, V.A.C.S.

John H. Whitmire

Signature of Affiant

Sworn to and subscribed before me by John H. Whitmire
this the 4th day of March,
1974, to certify which, witness my hand and seal.

Betty Murray
Notary Public, Travis
County, Texas

OFFICE OF THE SECRETARY OF STATE
ENFORCEMENT DIVISION
STATE OF TEXAS
CAPITOL STATION
AUSTIN, TEXAS 78711

STATE OF TEXAS
POSTAGE
FEB-70

*noted at
2/12/74*

REASON FOR RETURN
UNDELIVERED
ADDRESSEE UNKNOWN
NO SUCH STREET
NO SUCH OFFICE IN STATE
DO NOT RECALL IN THIS ENVELOPE

Hon. John H. Whitmire
202 North Loop West
Suite 205
Houston, Texas 77018

Address Only

IMPORTANT PAPERS

This envelope contains two copies of
the Official Financial Statement
required to be filed pursuant to
Article 6252-9b, V.A.C.S. for
Calendar Year Ending 1973

OFFICIAL HOUSE BILL #1 FORMS

CERTIFIED
NO. 7910361
RETURN RECEIPT REQUESTED



STATE OF TEXAS
OFFICE OF THE SECRETARY OF STATE
AUSTIN, TEXAS 78711

February 5, 1974

Mark W. White, Jr.
SECRETARY OF STATE

Bruce Hughes
ASST. SECRETARY OF STATE

RE: Financial Statement Forms
for calendar year 1973

Dear Candidate:

Enclosed herein you will find two (2) copies of the official financial statement form prepared pursuant to Article 6252-9b, V.A.C.S. The filing deadline for the financial statement is 5 P.M., March 6, 1974, with the Office of the Secretary of State for candidates seeking the following offices:

- A. a member of the legislature (Exception: candidates seeking the office of state representative for Districts 7, 17, 19, 32, 35, 37, 48, 72, 75, whose deadline for filing for office was extended by court order from February 4, 1974, to February 18, 1974. For these candidates, the filing deadline for filing the financial statement is 5 P.M., March 20, 1974, with the Office of the Secretary of State);
- B. an executive or judicial officer elected in a statewide election;
- C. a judge of a court of civil appeals, a district court, a court of domestic relations, or a juvenile court created by special law;
- D. a member of the State Board of Education.

Please return a copy of the completed form to the attention of the Enforcement Division, Office of the Secretary of State, P. O. Box 12887, Austin, Texas 78711. In addition, kindly sign the enclosed postcard and send it by return mail to the office in order that we will know that you have received your two (2) copies of the financial statement.

Your cooperation in this matter will be appreciated.

Yours truly,

MARK W. WHITE, JR.
Secretary of State

By *Terry Reed Goodman*
Terry Reed Goodman, Director
Enforcement Division