

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**



The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Henry		OFFICE USE ONLY
NICKNAME	LAST	SUFFIX	
Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	445 E FM 1382 #3-338		
	Cedar Hill, TX 75104		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Henry		OFFICE USE ONLY
NICKNAME	LAST	SUFFIX	
Curry			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	744 Brick Row Dr. #2442 Richardson Tx 75081		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	214	254-6325	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	07/01/2022		09/29/2022
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11/08/2022		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 6


13 C / OH NAME Curry, Henry	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS


16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 200.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 450.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,219.76
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 633.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.




AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder


Sworn to and subscribed before me, by the said HENRY CURRY, this the 17 day of January, 2023, to certify which, witness my hand and seal of office.



Signature of officer administering

DEATRICE E. KIRK

Printed name of officer administering



Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Curry, Henry		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 450.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,219.76
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2021

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 Sch: 1/1 Rpt: 4/6
2 FILER NAME Curry, Henry		3 Filer ID
4 Date 09/21/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Sharyn	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 6139 Black Berry Ln Dallas, TX 75248		
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 09/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Henry	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 211 Athel Drive Mesquite, TX 75149		
Principal occupation / Job title (See Instructions) Transportation		Employer (See Instructions) DART
Date 09/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pfiffner, Ellen and Tim	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 7315 Winterwood Lane Dallas, TX 75248		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) EBP Bus Consulting

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 5/6		2 FILER NAME Curry, Henry		3 Filer ID	
4 Date 09/23/2022		5 Payee name Communities Foundation of Texas			
6 Amount (\$) \$47.50		7 Payee address; City; State; Zip Code 5500 Caruth Haven Ln Dallas, TX 75225			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense North Texas Giving Day	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/02/2022		Payee name Dallas County Democratic Party			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Ticket	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/15/2022		Payee name Dalton, Jeff			
Amount (\$) \$200.00		Payee address; City; State; Zip Code TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 6/6		2 FILER NAME Curry, Henry		3 Filer ID	
4 Date 08/08/2022		5 Payee name Preston Hollow Democrats			
6 Amount (\$) \$35.00		7 Payee address; City; State; Zip Code TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Ticket	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/18/2022		Payee name Texas Democratic Party			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 505 W 12th St, Ste 200 Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Contact Expenses	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/31/2022		Payee name Vista Print			
Amount (\$) \$837.26		Payee address; City; State; Zip Code 275 Wyman Street Waltham, MA 02451			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

UNSWORN DECLARATION

FORM UD
JAN 17 03 PM 2024

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

- | | |
|---|--|
| <input checked="" type="checkbox"/> CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL COMMITTEE |
| <input type="checkbox"/> JUDICIAL CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL PARTY |
| <input type="checkbox"/> PERSONAL FINANCIAL STATEMENT | <input type="checkbox"/> STATE/COUNTY CHAIR |
| <input type="checkbox"/> DIRECT CAMPAIGN EXPENDITURE | |

4 TYPE OF REPORT 30 Day 2022 General

5 DUE DATE

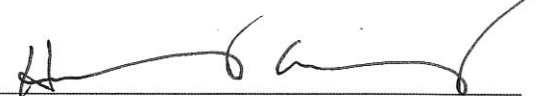
6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. Richardson, Tx. 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of Tx, on the 17 day of January 2023.


Signature of Filer/ Committee Representative
(Declarant)

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Henry		OFFICE USE ONLY Date Received
NICKNAME	LAST	SUFFIX	
Curry			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	445 E FM 1382 #3-338		
	Cedar Hill, TX 75104		Date Hand-delivered or Date Postmarked
	Receipt #	Amount	Date Processed
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / <u>MR</u>	FIRST	MI
	Henry		OFFICE USE ONLY Date Hand-delivered or Date Postmarked
NICKNAME	LAST	SUFFIX	
Curry			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
744 Brick Row Dr. #2442 Richardson, Tx 75081			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
214	254	6325	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	09/30/2022		10/29/2022
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
11 / 08 / 2022		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 5


13 C / OH NAME Curry, Henry	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	


16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 100.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,350.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,750.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 233.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.




AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder


Sworn to and subscribed before me, by the said HENRY CURRY, this the 17 day of January, 2023, to certify which, witness my hand and seal of office.



Signature of officer administering

DEATRICE E KIRK

Printed name of officer administering



Title of officer administering

SUBTOTALS - C/OH

20240207

18 FILER NAME Curry, Henry	19 Filer ID
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20	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,350.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,750.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2 FILER NAME Curry, Henry		3 Filer ID
4 Date 10/28/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Katrina 6 Contributor address; City; State; Zip Code 4220 Sloane Street Carrollton, TX 75007	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Brenda Lee Contributor address; City; State; Zip Code 5728 Old Ox Rd Dallas, TX 75241	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wedgeworth, Richard (Dr.) Contributor address; City; State; Zip Code 508 Adventurous Shield Dr. Lewisville, TX 75056	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Anesthesiologist		Employer (See Instructions) Medical City Las Colinas

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/5	2 FILER NAME Curry, Henry	3 Filer ID
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4 Date 10/11/2022	5 Payee name Beyond the Slogan
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6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 2710 Routh Creek Pkwy Apt 4120 Richardson, TX 75082
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/24/2022	Payee name Beyond the Slogan
--------------------	---------------------------------

Amount (\$) \$500.00	Payee address; City; State; Zip Code 2710 Routh Creek Pkwy Apt 4120 Richardson, TX 75082
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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UNSWORN DECLARATION

FORM UD
17-01-2023

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

- | | |
|---|--|
| <input checked="" type="checkbox"/> CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL COMMITTEE |
| <input type="checkbox"/> JUDICIAL CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL PARTY |
| <input type="checkbox"/> PERSONAL FINANCIAL STATEMENT | <input type="checkbox"/> STATE/COUNTY CHAIR |
| <input type="checkbox"/> DIRECT CAMPAIGN EXPENDITURE | |

4 TYPE OF REPORT

8 Day 2022 General

5 DUE DATE

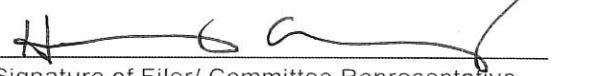
6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson Tx 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of Texas, on the 17 day of January, 2023.


Signature of Filer/ Committee Representative
(Declarant)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

06/27/2022 10:22:00 AM

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 5	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	
	Henry			
NICKNAME		LAST	SUFFIX	
		Curry		OFFICE USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
	445 E FM 1382 #3-338			
	Cedar Hill, TX 75104			
			Date Hand-delivered or Date Postmarked	
		Receipt #	Amount	
		Date Processed		
		Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
	Henry			
NICKNAME		LAST	SUFFIX	
		Curry		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;
	744 Brick Row Dr. #2442			Richardson, Tx
				75081
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	214-254-6325			
8 REPORT TYPE	<input type="checkbox"/> January 15		<input type="checkbox"/> 30th day before election	
	<input checked="" type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election	
		<input type="checkbox"/> Runoff		<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)
		<input type="checkbox"/> Exceeded modified reporting limit		<input type="checkbox"/> Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month	Day	Year	THROUGH
			02/20/2022	06/30/2022
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	
		11/08/2022	<input type="checkbox"/> Primary	
			<input checked="" type="checkbox"/> General	
			<input type="checkbox"/> Runoff	
			<input type="checkbox"/> Special	
		<input type="checkbox"/> Other		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
			Constable District 3	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 5

13 C / OH NAME Curry, Henry	14 Filer ID
------------------------------------	--------------------

15 NOTICE FROM POLITICAL COMMITTEE(S)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
---	---

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	150.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	400.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	83.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,210.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said HENRY CURRY, this the 17 day of January, 2023, to certify which, witness my hand and seal of office.

 Signature of officer administering oath	<u>DEATRICE E. KIRK</u> Printed name of officer administering oath	<u>Admin. Mgr</u> Title of officer administering oath
---	---	--

SUBTOTALS - C/OH

3 of 5

18 FILER NAME Curry, Henry	19 Filer ID
--------------------------------------	--------------------

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 400.00	
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 83.00	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

03/07/2022

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 Sch: 1/1 Rpt: 4/5
2 FILER NAME Curry, Henry		3 Filer ID
4 Date 03/07/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyner, Greg 6 Contributor address; City; State; Zip Code 1511 East Main Street Grand Prairie, TX 75050	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Dave's Hi-Way Wrecker Service Inc

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/5		2 FILER NAME Curry, Henry		3 Filer ID	
4 Date 06/01/2022		5 Payee name USPS			
6 Amount (\$) \$83.00		7 Payee address; City; State; Zip Code TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box Rental	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

UNSWORN DECLARATION

FORM UD

20230929

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

- | | |
|---|--|
| <input checked="" type="checkbox"/> CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL COMMITTEE |
| <input type="checkbox"/> JUDICIAL CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL PARTY |
| <input type="checkbox"/> PERSONAL FINANCIAL STATEMENT | <input type="checkbox"/> STATE/COUNTY CHAIR |
| <input type="checkbox"/> DIRECT CAMPAIGN EXPENDITURE | |

4 TYPE OF REPORT

July 15 2022 General

5 DUE DATE

6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson Tx 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Pallas County, State of TX, on the 17 day of January, 2023.


Signature of Filer/ Committee Representative
(Declarant)

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 6

13 C / OH NAME Curry, Henry	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages


This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
---	---

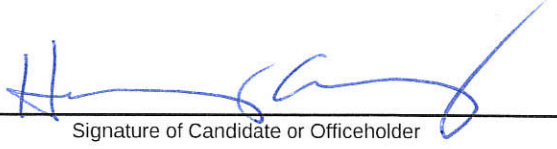
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	500.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	3,529.01
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,160.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.




AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder


Sworn to and subscribed before me, by the said HENRY CURRY, this the 17th day of January, 20 23, to certify which, witness my hand and seal of office.



Signature of officer administering

DEATRICE E. KIRK

Printed name of officer administering



Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Curry, Henry		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 500.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,529.01
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 4/6		2 FILER NAME Curry, Henry		3 Filer ID	
4 Date 02/07/2022		5 Payee name Atwoods			
6 Amount (\$) \$86.38		7 Payee address; City; State; Zip Code 2825 Corporate Dr Waxahachie, TX 75165			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Posts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/14/2022		Payee name Atwoods			
Amount (\$) \$59.43		Payee address; City; State; Zip Code 2825 Corporate Dr Waxahachie, TX 75165			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Posts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/11/2022		Payee name Facebook			
Amount (\$) \$125.00		Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE 1

12/20/22

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 5/6	2 FILER NAME Curry, Henry	3 Filer ID
4 Date 02/14/2022	5 Payee name Facebook	
6 Amount (\$) \$7.79	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2022	Payee name Kraft Embroidery	
Amount (\$) \$467.60	Payee address; City; State; Zip Code 255 S Cedar Ridge Dr Duncanville, TX 75116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shirt Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2022	Payee name Texting for Less	
Amount (\$) \$324.80	Payee address; City; State; Zip Code 62 Raymond Street Hasbrouck Heights, NJ 07604	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expenses
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 6/6	2 FILER NAME Curry, Henry		3 Filer ID
4 Date 01/25/2022	5 Payee name UZ Marketing		
6 Amount (\$) \$2,138.51	7 Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Marketing Expenses	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 01/21/2022	Payee name Yes We Can Print That		
Amount (\$) \$319.50	Payee address; City; State; Zip Code 606 Oriole Blvd Ste 206 Duncanville, TX 75116		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

UNSWORN DECLARATION

11/17/2022

FORM UD

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

- | | |
|---|--|
| <input checked="" type="checkbox"/> CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL COMMITTEE |
| <input type="checkbox"/> JUDICIAL CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL PARTY |
| <input type="checkbox"/> PERSONAL FINANCIAL STATEMENT | <input type="checkbox"/> STATE/COUNTY CHAIR |
| <input type="checkbox"/> DIRECT CAMPAIGN EXPENDITURE | |

4 TYPE OF REPORT

Primary 8 Day

5 DUE DATE

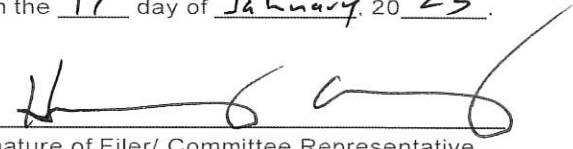
6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson, TX 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of TX, on the 17 day of January, 2023.


Signature of Filer/ Committee Representative
(Declarant)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

2022

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Henry	MI
	NICKNAME	LAST Curry	SUFFIX
OFFICE USE ONLY			
Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	445 E FM 1382 #3-338		
	Cedar Hill, TX 75104		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Henry	MI
	NICKNAME	LAST Curry	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	744 Brick Row Dr. #2442 Richardson, Tx 75081		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
	214-254-6325		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year		Month Day Year
	01/01/2022		THROUGH 01/20/2022
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
	03/08/2022		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			Constable District 3

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 4

13 C / OH NAME Curry, Henry	14 Filer ID
------------------------------------	--------------------

15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 4,250.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,609.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said HENRY CURRY, this the 17 day of January, 2023, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering

DEATRICE E. KIRK
Printed name of officer administering

Admin. Dir.
Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Curry, Henry	19 Filer ID
--------------------------------------	--------------------

20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,300.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/4
2 FILER NAME Curry, Henry		3 Filer ID
4 Date 01/20/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arya, Johnny 6 Contributor address; City; State; Zip Code 1906 North Waterview Drive Richardson, TX 75080	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) Dallas County

UNSWORN DECLARATION

FORM 100D

2023

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

- | | |
|---|--|
| <input checked="" type="checkbox"/> CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL COMMITTEE |
| <input type="checkbox"/> JUDICIAL CANDIDATE/ OFFICEHOLDER | <input type="checkbox"/> POLITICAL PARTY |
| <input type="checkbox"/> PERSONAL FINANCIAL STATEMENT | <input type="checkbox"/> STATE/COUNTY CHAIR |
| <input type="checkbox"/> DIRECT CAMPAIGN EXPENDITURE | |

4 TYPE OF REPORT

Primary 30 Day

5 DUE DATE


6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson, TX 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of Tx, on the 17 day of January 2023.


Signature of Filer/ Committee Representative
(Declarant)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: <div style="text-align: center; font-size: 1.2em;">11</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Henry	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX Curry	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 445 E FM 1382 #3-338 Cedar Hill, TX 75104	Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS <u>MR</u> FIRST MI Henry		
	NICKNAME LAST SUFFIX Curry		
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 744 Brick Row Dr. #2442 Richardson, TX 75081		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 214-254-6325		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2021 THROUGH 12/31/2021		
10 ELECTION	ELECTION DATE Month Day Year 03/08/2022	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Constable District 3	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 11


13 C / OH NAME Curry, Henry	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table style="width:100%"> <tr> <td style="width:30%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

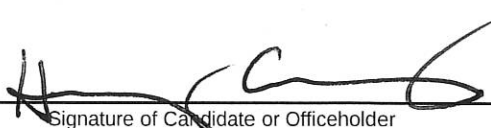
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 2,445.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,745.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,488.44
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,359.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 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.

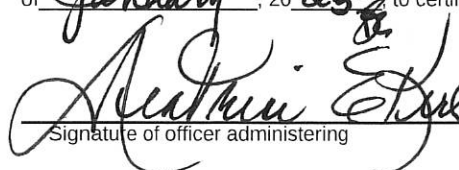


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said HENRY CURRY, this the 19th day of January, 20 23, to certify which, witness my hand and seal of office.



Signature of officer administering

DEATRICE E. KIRK

Printed name of officer administering

Admin. Mgr

Title of officer administering (with)

SUBTOTALS - C/OH

18 FILER NAME Curry, Henry		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,745.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,326.95
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,161.49
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11
2 FILER NAME Curry, Henry		3 Filer ID
4 Date 11/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Charles 6 Contributor address; City; State; Zip Code 1811 Meadow Valley Lane Dallas, TX 75232	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Chief Deputy		9 Employer (See Instructions) Dallas County
Date 11/05/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Anthony Contributor address; City; State; Zip Code 4109 West Northgate Dr. #821 Irving, TX 75062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Henry Contributor address; City; State; Zip Code 744 Brick Row Richardson, TX 75081	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Dallas County
Date 10/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Ellington, Nosheska Contributor address; City; State; Zip Code 1806 E. Branch Hollow Dr Carrolton, TX 75007	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 11/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Shawna Contributor address; City; State; Zip Code 1110 Yukon Boulevard Waxahachie, TX 75167	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Chief		Employer (See Instructions) Dallas County

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 5/11		2 FILER NAME Curry, Henry		3 Filer ID	
4 Date 12/01/2021		5 Payee name Adam Swartz for Justice of the Peace			
6 Amount (\$) \$52.95		7 Payee address; City; State; Zip Code 12639 Coit Dallas, TX 75251			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Donation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/24/2021		Payee name Communities Foundation of Texas			
Amount (\$) \$115.00		Payee address; City; State; Zip Code 5500 Caruth Haven Ln Dallas, TX 75225			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense North Texas Giving Day donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/15/2021		Payee name Dallas County Democratic Party			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 1414 N Washington Ave Dallas, TX 75204			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 6/11	2 FILER NAME Curry, Henry	3 Filer ID
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4 Date 09/23/2021	5 Payee name Hernandez and Associates
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6 Amount (\$) \$599.00	7 Payee address; City; State; Zip Code 2320 W Davis St Dallas, TX 75208
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attorney Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/19/2021	Payee name Texas Democratic Party
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Amount (\$) \$460.00	Payee address; City; State; Zip Code 505 W 12th St, Ste 200 Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN Access
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/5 Rpt: 7/11	2 FILER NAME Curry, Henry	3 Filer ID
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4 Date 08/23/2021	5 Payee name Courtland
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6 Amount (\$) \$150.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photographs
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/06/2021	Payee name Courtland
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Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photographs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2021	Payee name Facebook
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Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/5 Rpt: 8/11	2 FILER NAME Curry, Henry	3 Filer ID
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4 Date 10/12/2021	5 Payee name Facebook
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6 Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Ads <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/14/2021	Payee name Facebook
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Amount (\$) \$26.62 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Ads <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/02/2021	Payee name Facebook
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Amount (\$) \$50.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Ads <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/5 Rpt: 9/11	2 FILER NAME Curry, Henry	3 Filer ID
4 Date 11/15/2021	5 Payee name Facebook	
6 Amount (\$) \$52.78 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2021	Payee name Facebook	
Amount (\$) \$97.21 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/27/2021	Payee name GoDaddy	
Amount (\$) \$6.40 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite. 226 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/5 Rpt: 10/11	2 FILER NAME Curry, Henry	3 Filer ID
4 Date 07/27/2021	5 Payee name GoDaddy	
6 Amount (\$) \$22.34 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite. 226 Scottsdale, AZ 85260	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/27/2021	Payee name GoDaddy	
Amount (\$) \$127.79 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14455 N. Hayden Rd., Suite. 226 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2021	Payee name USPS	
Amount (\$) \$67.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PO Box Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/5 Rpt: 11/11	2 FILER NAME Curry, Henry	3 Filer ID
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4 Date 09/03/2021	5 Payee name Yes We Can Print That
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6 Amount (\$) \$319.34 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 606 Oriole Blvd Ste 206 Duncanville, TX 75116
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/06/2021	Payee name Yes We Can Print That
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Amount (\$) \$92.01 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 606 Oriole Blvd Ste 206 Duncanville, TX 75116
--	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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UNSWORN DECLARATION

2023
FORM UD

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

CANDIDATE/ OFFICEHOLDER

POLITICAL COMMITTEE

JUDICIAL CANDIDATE/ OFFICEHOLDER

POLITICAL PARTY

PERSONAL FINANCIAL STATEMENT

STATE/COUNTY CHAIR

DIRECT CAMPAIGN EXPENDITURE

4 TYPE OF REPORT

January 15 2022 Primary

5 DUE DATE

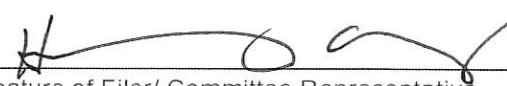
6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson Tx 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of Tx, on the 17 day of January, 20 23.


Signature of Filer/ Committee Representative
(Declarant)

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 3


13 C / OH NAME Curry, Henry	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

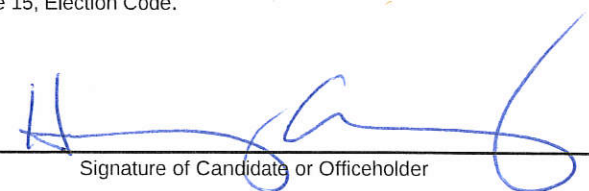
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	1,100.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,100.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	31.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 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.




AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said HENRY CURRY, this the 17 day of January, 2023, to certify which, witness my hand and seal of office.



Signature of officer administering

DEATRICE E. KIRK

Printed name of officer administering

Admin. Ingr.

Title of officer administering oath

SUBTOTALS - C/OH

2022

18 FILER NAME Curry, Henry		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,100.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

UNSWORN DECLARATION

FORM UD

17-01-20

Attach this unsworn declaration to the front of any campaign finance report or personal financial statement in lieu of a notarized signature. See Tex. Civil Practice and Remedies Code § 132.001.

OFFICE USE ONLY

Date Received

Method of Delivery

Date Processed

1 FILER ID:
(Ethics Commission filers)

2 NAME OF FILER
(PLEASE TYPE OR PRINT)

Henry Curry

3 TYPE OF FILER

CANDIDATE/ OFFICEHOLDER

POLITICAL COMMITTEE

JUDICIAL CANDIDATE/ OFFICEHOLDER

POLITICAL PARTY

PERSONAL FINANCIAL STATEMENT

STATE/COUNTY CHAIR

DIRECT CAMPAIGN EXPENDITURE

4 TYPE OF REPORT

January 15 2023 Semi-Annual

5 DUE DATE


6 UNSWORN DECLARATION:

My name is Henry Curry, and my date of birth is 12/20/70.

My Address is 744 Brick Row Dr. #2442 Richardson, Tx 75081 USA
(street) (city) (state) (zip code) (country)

I swear, or affirm, under penalty of perjury that the information in the attached report is in all things true and correct, and includes all information required to be reported by me under Title 15, Election Code, or Chapter 572, Government Code.

Executed in Dallas County, State of Tx, on the 17 day of January 2023.


Signature of Filer/ Committee Representative
(Declarant)

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI A MICHAEL NICKNAME LAST SUFFIX OROZCO	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5707 VANDERBILT AV DALLAS, TX 75206		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 236-0463		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="radio"/> FIRST MI A MICHAEL NICKNAME LAST SUFFIX OROZCO		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1708 WESTLAKE DR PLANO, TX 75075		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 404-2280		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 10 / 30 / 2022 THROUGH 12 / 31 / 2022		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) CONSTABLE P.L.T.S	13 OFFICE SOUGHT (if known)	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS	

GO TO PAGE 2