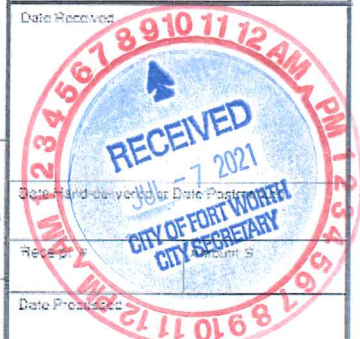
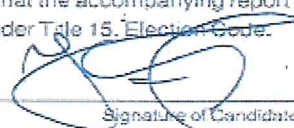


**OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX**

**CANDIDATE / OFFICEHOLDER
REPORT OF UNEXPENDED CONTRIBUTIONS** **FORM C/OH-UC
COVER SHEET PG 1**

The C/OH-UC Instruction Guide explains how to complete this form.		1 Filer ID (Enter Commission Filer)
2 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR <input type="checkbox"/> FIRST <u>Theodore</u> MI <u>O'Connor</u> NECKNAME LAST SUFFIX <u>Gray</u>	OFFICE USE ONLY
3 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> change of address	ADDRESS PO BOX APT / SUITE CITY STATE ZIP CODE <u>1848 Potrilto Fortworth, TX 76131</u>	
	4 REPORT TYPE <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Final Disposition	Date Received Date Hand-delivered or Date Posted Received Date Produced Date Imaged
5 PERIOD COVERED	Month Day Year Month Day Year <u>04/22 2021</u> THROUGH <u>06/01 2021</u>	
6 TOTALS	1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DECEMBER 31 OF THE PREVIOUS YEAR.	\$ <u>Ø</u>
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.	\$ <u>Ø</u>

7 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.


Signature of Candidate/Officeholder

Please complete either option below:



Sworn to and subscribed before me by Theodore Gray this the 6th day of July 2021, to certify which, witness my hand and seal of office.

Irene E. Armendarez Irene Armendarez (Notary)
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____ and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)