CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

			1			
The C/OH Instruction G	uide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE/ OFFICEHOLDER	MS/MRS/MR	GARCY	B	OFFICE USE ONLY		
NAME	NICKNAME SCALE	MABRI	SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #; /	CITY; STATE; ZIP CODE	4/20/2023m		
Change of Address				•		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	817-845-	EXTENSION 3 50 9	Date Hand-delivered or Date Postmarked Receipt # Amount \$		
6 CAMPAIGN TREASURER	MS/MRS/MR M2.	FIRST Q ARm	. MI	Date Processed		
NAME	NICKNAME	LAST	SUFFIX			
	BLAGE	MABR	,	Date Imaged		
7 CAMPAIGN		NO PO BOX PLEASE); APT / S	-	STATE; ZIP CODE		
TREASURER ADDRESS	10833	OWL CREEK	in inc.			
(Residence or Business)	FW	, TX 7	6179			
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(817)	845-3509				
9 REPORT TYPE	January 15	30th day before	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)		
	July 15	8th day before el	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)		
10 PERIOD	Month	Day Year	Month	Day Year		
COVERED	4/7/23 THROUGH 4/28/23					
11 ELECTION	ELECTION DA	TE	ELECTION TYPE			
	Month Day	Year Primary				
	6 / i	General	Description Special			
	5/6/	25				
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (IF KNOWN SCHOOL BOAR)	· •		
14 NOTICE FROM POLITICAL	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(S)	COMMITTEE TYPE	COMMITTEE NAME	INCED TO REPORT THIS INFORMATION ONLY IF	NET RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TR	REASURER ADDRESS			
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	16 F	iler ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 6			
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0			
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 6			
	4. TOTAL POLITICAL EXPENDITURES	\$ 6			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA OF REPORTING PERIOD	* \$ 6			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ \$			
	swear, or affirm, under penalty of perjury, that the accompanying report is true and quired to be reported by me under Title 15, Election Code.	correct and includes all information			
	Gre BLL				
	Signature of Candida	ate or Officeholter			
,	Please complete either option below:				
	ST PULL	REBECCA NEVINS			
(1) Affidavit	Com	ry Public, State of Texas nm. Expires 07-26-2025 otary ID 125375495			
(1) Allidavit	No. of the second secon	otary ID 123373400			
NOTARY STAMP/SEA	^ 1	hen April en			
Sworn to and subscribed	before me by Gary Blake Mabry this the 25	73 day of 2025.			
20, 23, to certify which, witness my hand and seasof office. Reverse H. Nevins Executive Assistant					
Signature of officer administ	ering oath Printed name of officer administering oath OR	Title of officer administering oath			
(2) Unsworn Declarat	THE RESERVE OF THE PROPERTY OF				
My name is	, and my date of birth is	·			
My address is	,,,				
Executed in	(street) (city) (state) County, State of , on the day of (month)	(zip code) (country) , 20 (year)			
	Signature of Candidate/C	Officeholder (Declarant)			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Com	nmission Filers)
	GARY BLAKE MABRY	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$