JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 4

OFFICE USE ONLY

Date Received
FILED IN MY OFFICE
JOY ADAMS
ELECTION ADMINISTRATOR
JAN 03 2025
JOHNSON COUNTY
11:53am

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

Sharina Bellora

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST	MI
Mr.	Finis	S

NICKNAME	LAST	SUFFIX
Steve	McClure	

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

204 South Buffalo, Suite 409, Cleburne, TX 76033

☐ Change of Address

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE	PHONE NUMBER	EXTENSION
(817)	556-6395	

6 CAMPAIGN TREASURER NAME

MS / MRS / MR	FIRST	MI
Ms.	Kathleen	J

NICKNAME	LAST	SUFFIX
Kathy	McClure	

7 CAMPAIGN TREASURER ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

704 Quail Walk, Cleburne, TX 76033

8 CAMPAIGN TREASURER PHONE

AREA CODE	PHONE NUMBER	EXTENSION
(817)	648-4214	

9 REPORT TYPE

- [X] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (Officeholder Only)
- [ ] July 15
- [ ] 8th day before election
- [ ] Exceeded Modified Reporting Limit
- [ ] Final Report (Attach C/OH - FR)

10 PERIOD COVERED

	Month	Day	Year
	1	1	2024
THROUGH	12	31	2024

11 ELECTION

ELECTION DATE

Month	Day	Year
11	08	2022

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [ ] Other Description
- [X] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any)
Judge of Johnson County Court at Law No. 2

13 OFFICE SOUGHT (if known)
Judge of Johnson County Court at Law No. 2

14 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

COMMITTEE TYPE
- ☐ GENERAL
- ☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME	16 Filer ID (Ethics Commission Filers)
Finis "Steve" McClure	

17 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	$
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 12.28
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 28,637.52

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

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,

20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Finis Steven McClure, and my date of birth is June 18, 1951.

My address is 204 South Buffalo (street), Cleburne (city), TX (state), 76033 (zip code), USA (country).

Executed in Johnson County, State of Texas, on the 2nd day of January (month), 2025 (year).

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
Finis "Steve" McClure	

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	$

13. ✓ SCHEDULE L: OUTSTANDING LOANS

OUTSTANDING LOANS

SCHEDULE L

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.	1 Total pages Schedule L: 1
2 FILER NAME Finis Steven McClure	3 Filer ID (Ethics Commission Filers)

LENDER INFORMATION	4 Name of lender Steve McClure 5 Lender address: 704 Quail Walk, Cleburne, TX 76033 City: State: Zip Code
GUARANTOR INFORMATION ☐ not applicable	6 Name of guarantor 7 Guarantor address: City: State: Zip Code
LENDER INFORMATION	Name of lender Lender address: City: State: Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address: City: State: Zip Code
LENDER INFORMATION	Name of lender Lender address: City: State: Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address: City: State: Zip Code
LENDER INFORMATION	Name of lender Lender address: City: State: Zip Code
GUARANTOR INFORMATION ☐ not applicable	Name of guarantor Guarantor address: City: State: Zip Code

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED