CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE / MS / MRS / MR MI OFFICE USE ONLY **OFFICEHOLDER** NAME City of Heath NICKNAME SUFFIX RECEIVED 4 CANDIDATE / ADDRESS / PO BOX; CITY; STATE: ZIP CODE **OFFICEHOLDER** APR 03 2025 MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER **EXTENSION** 5 CANDIDATE/ Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE MS / MRS / MR MI CAMPAIGN TREASURER NAME NICKNAME SUFFIX yndi STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; CAMPAIGN TREASURER **ADDRESS** (Residence or Business) AREA CODE PHONE NUMBER EXTENSION 8 CAMPAIGN TREASURER PHONE 9 REPORT TYPE 15th day after campaign January 15 30th day before election Runoff treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month COVERED 2005 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION Primary Runoff Other Month Description **K** General Special 13 OFFICE SOUGHT (if known) 12 OFFICE OFFICE HELD (if any) 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 14 NOTICE FROM POLITICAL CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME		16 File	r ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	마을 사용하는 것을 위한 사용하는 이 마이트 보고 보내 다른 사용하는 사용하는 사용하는 사용하는 사용하는 사용하는 사용하는 사용하는		\$ ~~
•	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOAN)	NS)	\$ 7,376.92
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	. UNITEMIZED POLITICAL EXPENDITURE.	
	4. TOTAL POLITICAL EXPENDITURES	TOTAL POLITICAL EXPENDITURES	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE OF REPORTING PERIOD	BUTIONS MAINTAINED AS OF THE LAST DAY	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A LAST DAY OF THE REPORTING PERIOD	S OF THE	\$
	ear, or affirm, under penalty of perjury, that the accompanying report is ired to be reported by me under Title 15, Election Code.	s true and co	orrect and includes all information
	mike mele	lass	
			or Officeholder
MyA	ORMA E. DUNCAN lotary ID # 129218292 ires February 4, 2029	low:	
(1) Affidavit			
NOTÁRY STAMP/SEAL	m: , , , , , , , , , , , , , , , , , , ,	200	1 0
Sworn to and subscribed b		the O	day of Horl.
ST	rhich, witness my hand and seal of office.	^	
norma Durce	A IMA DA ALARA	()	The Seretary
Signature of officer administeri	Total III		Title of officer administering oath
	OR		
(2) Unsworn Declaratio			
	, and my date of bir	tn is	
My address is	(atra-d) (atra-d)		
Formulad?	(street) (city)	(state)	(zip code) (country)
Executed in	County, State of, on the day of	nonth)	, 20 (year)
	-		
	Signature of C	andidate/Offi	ceholder (Declarant)

SUBTOTALS - C/OH

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

19 FILER NAME Mike McClard 20 Filer ID (Ethics C	Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. Z SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,376.92
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	\$ 4,463.31
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	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:			
2 FILER NAME	McClard	3 Filer ID (Ethics Commission Filers)			
4 Date	5 Full name of contributor	7 Amount of contribution (\$)			
2/13/25	6 Contributor address; City; State; Zip Code	\$100,00			
^	9 Employer (See Instructions)	tions)			
Retired	Project/Program Bus, Consultant				
Date	Full name of contributor	Amount of contribution (\$)			
2/18/25	Dave Meyer Contributor address; City; State; Zip Code	\$5,000.00			
	116 Blue Heron Heath TX 75032	1.27			
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Rehrad Portable Building Manufacturar Owner Subelt Modular				
Date	Full name of contributor	Amount of contribution (\$)			
2/18/25	Eric Harless Contributor address; City; State; Zip Code 123 Dunford Dr Heath TX 75032	\$276.92			
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)			
3/10/25	Brad Larsen Contributor address; City; State; Zip Code	\$2,000,00			
Principal occur	2000 Kings Pass Heath TX 75032 pation / Job title (See Instructions) Employer (See Instruc	tions)			
^	School Duner Operator Owner	uonay			
11.19012	School Bank Bernet				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Benking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politica Credit Cerd Payment		Wages/Contract Labor	Other (enter a cate	rict gory not listed above)
1 Total pages Schedule F1:	2 FILER NAME Mike MCC) and		3 Filer ID (Ethi	ics Commission Filers)
4 Date				
2 20125	Tractor Suply			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$267.43	772 I-30	RoyseCity	双	75189
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE		T-Posts		
EXPENDITURE		1 .00		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder livi	ng expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
3/4/25	Pablos Restaurant			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$21.68	213 Hubbard Dr	Heath	TX	75032
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE		Refreshments Check If Austin, TX, officeholder living expense		
	Check if travel outside of Texas. Complete Schedule T.			
Complete ONLY if direct expenditure to benefit C/OI-	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
3/10/25	Keepers Press			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$4,122.16	520 Loma Vista	Heath	双	75032
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE		Signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austl	In, TX, officeholder livi	ng expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	
	ALIAMIADDITIONAL OUT IEGOT THE	- JANES OFF TO HE		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Vages/Contract Labor	Travel Out Of Distric Other (enter a catego	
1 Total pages Schedule F1:	2 FILER NAME MCClard		3 Filer ID (Ethics	Commission Filers)
4 Date 3/29/25	5 Payee name Amazon			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$5,51				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE		CLillaga	1200	
OF EXPENDITURE		Stickers	y bags	
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austi	n, TX, officeholder living	expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
4/2/25	Amazon			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$ 46.53				
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE		Shirts		
	Check if travel outside of Texas. Complete Schedule T.	Check If Austi	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas, Complete Schedule T.	Check if Austli	n, TX, officeholder living	expense
Complete ONLY If direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED	