CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction C	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 4				
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Mr. John	MI C	OFFICE USE ONLY				
NAME	NICKNAME LAST Classe	SUFFIX	Date Received				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 14688 Ballentrae Drive Frisco, TX 75035	CITY; STATE; ZIP CODE					
Change of Address							
5 CANDIDATE/ OFFICEHOLDER PHONE	(214) 336-5557	EXTENSION	Date Hand-delivered or Date Postmarked				
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST	МІ	Receipt # Amount \$				
NAME	Mr. John	C SUFFIX	Date Processed				
	Classe		Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 14688 Ballentrae Drive Frisco, TX 75035							
8 CAMPAIGN TREASURER PHONE	(214) 336-5557	EXTENSION					
9 REPORT TYPE	January 15 30th day before e	election Runoff	15th day after campaign treasurer appointment (Officeholder Only)				
	July 15 8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)				
10 PERIOD COVERED	Month Day Year	Month	Day Year				
COVERED	01 / 01 / 24	тнкоидн 06	/ 30 / 24				
11 ELECTION ELECTION DATE Month Day Year Month Day Year General Special ELECTION TYPE Other Description							
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known))				
	Frisco ISD Place 6	n/a					
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'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATE'S AND OFFICEHOLDER'S ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.						
	COMMITTEE TYPE COMMITTEE NAME						
Additional Pages	GENERAL COMMITTEE ADDRESS						
	SPECIFIC COMMITTEE CAMPAIGN TREASURER NAME						
COMMITTEE CAMPAIGN TREASURER ADDRESS							
GO TO PAGE 2							

Forms provided by Texas Ethics Com

Reset Form

Reset Page

Revised 1/1/2024

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME John Classe	16 Filer ID (Ethics Commission Filers)					
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0				
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0				
	4. TOTAL POLITICAL EXPENDITURES	\$ 0				
CONTRIBUTION BALANCE	1 5. IOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY					
OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		F THE \$ 0				
	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	e and correct and includes all information				
	No.	va .				
W SPECIAL SOLUTION OF 25 OF 131314	8600	Algore				
ARY PO	Signature of Ca	andidate or Officeholder				
1 2/0 N						
	ν ο <u>Ε</u>					
1						
= 10 FOFT	Please complete either option below	v:				
11/1/to 00.05	202 11111					
7//////////////////////////////////////	minin.					
C-000-01771000						
(1) Affidavit						
NOTARY STAMP/SEA						
Sworn to and subscribed before me by John Classe this the 1st day of July.						
20 24, to certify	which, witness my hand and seal of office.	•				
Whichelle aul	leus Michelle Arellano	Hotary				
Signature of officer administe		Title of officer-administering oath				
	OR					
(2) Unsworn Declaration						
My name is John Christopher Classe , and my date of birth is 10/20/1976						
My address is 14000 E						
- Collin		state) (zip code) (country)				
Executed in Collin	County, State of Texas, on the 1stday of July (month	, 20 <mark>24</mark> .				
A About						
	Signature of Candid	date/Officeholder (Declarant)				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19 FILER NAME John Classe 20 Filer ID (Ethics Co		mmission Filers)	
21 SCI	HEDULE SUBTOTALS ME 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		\$

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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	The Instruction Guide explains how to complete this form.						
		•• Complete only if "Report Type" on page 1 is marked	"Final Report" ••				
	C/OH N		2 Filer ID (Ethics Commission Filers)				
Jo	hn Cla	sse					
3	SIGNA	TURE	•				
	designa	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.					
			A Bar				
		Sig	gnature of Candidate / Officeholder				
4	FILER WHO IS NOT AN OFFICEHOLDER Complete A & B below only if you are not an officeholder.						
	A.	CAMPAIGN FUNDS					
	Chec	conly one:					
		I do not have unexpended contributions or unexpended interest or income ear	ned from political contributions.				
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.						
	В.	ASSETS					
	Check only one:						
		I do not retain assets purchased with political contributions or interest or other income from political contributions.					
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.						
			Signature of Candidate				
5		EHOLDER					
	· Com	plete this section only if you are an officeholder					
		I am aware that I remain subject to filing requirements applicable to an officeholder file. I am also aware that I will be required to file reports of unexpended contribut an officeholder, I retain political contributions, interest or other income from political contributions or interest or other income from political contributions.	ions if, after filing the last required report as				
			A Bare				
		NATIONAL AND ADDRESS OF THE PROPERTY OF THE PR	Signature of Officeholder				