FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083581 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Susan Neely NAME Date Received **ELECTRONICALLY FILED** 01/14/2025 NICKNAME LAST **SUFFIX** Kelly CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 1923 MAILING Receipt # Amount **ADDRESS** Waco, TX 76703 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Nancy NAME NICKNAME LAST **SUFFIX** Lacy **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 1102 Old Steinbeck Road **ADDRESS** (Residence or Business) Waco, TX 76708 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (254) 754-5117 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 54 McLennan District Judge District 54

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 7

13 C / OH NAME	Kelly, Susan Neely (1	he Honorable)	14 Filer ID 00083581	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political These expenditures may have been mad I officeholders are required to report this i	le without the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASUREF	R NAME					
		COMMITTEE CAMPAIGN TREASUREF	R ADDRESS					
 16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS(OT)						
TOTALS		ES OF LOANS, OR CONTRIBUTIONS M	IADE ELECTRONICALLY)	\$ 0.00				
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 0.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES						
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 1,666.32				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	OF THE LAST DAY OF THE	\$ 254.82					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LITING PERIOD	OANS AS OF THE LAST DAY	\$ 0.00				
17 AFFIDAVIT			der penalty of perjury, that the accinctudes all information required t					
		under Title 15, Election		o be reported by the				
		Tł	ne Honorable Susan Neely Ke	elly				
			gnature of Candidate or Officehol					
AFFIX NO	TARY STAMP / SEAL ABO	OVE						
		aid		day				
		ertify which, witness my hand and seal of						
Signature of office	cer administering oath	Printed name of officer administering	g oath Title of office	r administering oath				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 7
18 FILER NA Kelly, Su:	ME san Neely (The Honorable)	19 Filer ID 00083581	(Ethics Commission Filers)
l	LE SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 115.47
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 1,550.85
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Gift/Awar Legal Se	verage Expense rds/Memorials Ex rvices struction Guid			ense ages/Co	ntract Labor this form.		Travel in Distric Travel Out of Di OTHER (enter a	strict	listed above)
1	Total pages Schedule F1: Sch: 1/1 Rpt: 4/7	2	FILER NAM Kelly, Susa		y (The Hon	orable)				- 1	Filer ID 00083581	(Ethics Co	ommission Filers)
	Date 09/16/2024	5	Payee name		<u> </u>					1			
6	Amount (\$) \$115.47	7	Payee addre		City;	State;	Zip Coo	le					
8	PURPOSE OF EXPENDITURE	(a)	Category (S Printing Ex		ries listed at the	top of this sche	edule)		4	tin, TX,	de of Texas. Con officeholder livin		le T.
9	Complete ONLY if direct expenditure to benefit C/OI	Η (Candidate/Off	ficeholde	er name	C	Office soug	ht			Office h	eld	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gi nmittee Le	ood/Beverage Expense ft/Awards/Memorials E gal Services he Instruction Guid	xpense		kpense /ages/Contract Labor		Travel in Dis Travel Out o OTHER (en	
1	. 0	l	FILER NAME					1	Filer ID	(Ethics Commission Filers)
	Sch: 1/3 Rpt: 5/7			Neely (The Hon	orable)			'	0008358	31
4	Date		Payee name	Sall longet O = 1						
	12/18/2024	_		Call Inn of Court						
6	Amount (\$) \$308.50	l	Payee address P. O. Box 192	•	State;	Zip Co	de			
			P. O. BOX 192	23						
	X Reimbursement from political contributions intended		Waco, TX 76	703						
8	PURPOSE OF	l ` ´		Categories listed at the	top of this sche	edule)	(b) Description	=		outside of Texas. Complete Schedule T.
	EXPENDITURE		Event Expens	se			Laliday Mambar	_		, TX, officeholder living expense
							Holiday Members	sinh	CVCIIL	
9	Complete ONLY if direct expenditure to benefit C/OH	C an	didate/Officeho	lder name			Office sought			Office held
	Date		Payee name							
	12/17/2024		Judge Abner	V. McCall Inn o	f Court					
	Amount (\$)		Payee address	; City;	State;	Zip Co	de			
	\$389.30		P. O. Box 192	23						
	Reimbursement from political contributions intended		Waco, TX 76	703						
	PURPOSE OF		Category (See	Categories listed at the	top of this sche	edule)	Description	=		outside of Texas. Complete Schedule T.
	EXPENDITURE		Event Expens	se			Comtributions	_		, TX, officeholder living expense
							Contributions to I	mee	ungsu	
	Complete ONLY if direct expenditure to benefit	Can	didate/Officeho	lder name			Office sought			Office held
	C/OH									
	Date		Payee name							
	10/02/2024		MCRW							
	Amount (\$)		Payee address	; City;	State;	Zip Co	de			
	\$29.17		P.O. Box 729	1						
	X Reimbursement from political contributions intended		Waco, TX 76	710						
	PURPOSE		Category (See	Categories listed at the	top of this sche	edule)	Description	_		outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Event Expens	se			NA o matte to a constant	_	eck if Austin,	, TX, officeholder living expense
							Monthly meeting			
	Complete ONLY if direct expenditure to benefit C/OH	Can	didate/Officeho	lder name			Office sought			Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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		Gift/Awards/Memorials Expense nmittee Legal Services		Expense /Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guide explai	ins how to c	complete this form.	
1	Total pages Schedule G:	2	FILER NAME		3	3 Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 6/7		Kelly, Susan Neely (The Honorable)			00083581
4	Date	5	Payee name			
	07/10/2024	1	MCRW			
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode	
	\$28.00	1	P.O. Box 7291			
	Reimbursement from	1				
	X political contributions intended		Waco, TX 76710			
8	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	1	Event Expense			Check if Austin, TX, officeholder living expense
	EXI ENDITORE	l			monthly meeting	
		1				
9	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit					
	C/OH					
	Date		Payee name			
	12/31/2024	l	MCRW			
	Amount (\$)	t	Payee address; City; Sta	ate; Zip C	Code	
	\$250.00	l	P.O. Box 7291			
	Reimbursement from					
	political contributions intended		Waco, TX 76710			
		_			T —	
	PURPOSE OF	l	Category (See Categories listed at the top of this	schedule)	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	1	Contributions/Donations Made By Candidate/Officeholder/Political Con	nmittee	L	Check if Additif, 17, officerolder living expense
			Candidate/Officeriolder/1 officer Con	illillillee	Dues	
	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	Ţ	" I - 10" I - I - I			000
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name		Office sought	Office held
	C/OH					
	Date	Г	Dayoo nama			
	10/14/2024	l	Payee name Waco Civic Theatre			
		╀		. 7: 0		
	Amount (\$)	l	• •	ate; Zip C	ode	
	\$150.00	l	1517 Lake Air Drive			
	Reimbursement from political contributions	l				
	intended	l	Waco, TX 76710			
	PURPOSE		Category (See Categories listed at the top of this	schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	1	Contributions/Donations Made By			Check if Austin, TX, officeholder living expense
	EXI ENDITORE	1	Candidate/Officeholder/Political Con	nmittee	membership dues	
		Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH					
	O, OTT					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awa Legal Se	everage Expense ords/Memorials Expe ervices struction Guide			pense /ages/Contract L			Travel in D Travel Out OTHER (e	of Distric	ct tegory not li	sted above)	
1	Total pages Schedule G:	2	FILER NAME	E						3	Filer ID	(Eth	ics Comr	nission Fil	lers)
	Sch: 3/3 Rpt: 7/7		Kelly, Susa	n Neel	ly (The Honoi	rable)					000835	81			
4	Date	5	Payee name	!											
	12/04/2024		Waco Sym												
6	Amount (\$)	7	Payee addre	ess;	City;	State;	Zip Co	de							
	\$62.00		P. O. Box 1	201	,		•								
	Reimbursement from political contributions intended		Waco, TX 7	76703											
8	PURPOSE	(a)			ories listed at the to	n of this sche	dule)	(b) Descrip	otion [Ch	eck if trave	l outside	of Texas. C	Complete Sch	edule T.
_	OF	'	Event Expe			,	,	(,		=				ing expense	
	EXPENDITURE							concert							
9	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Office	holder	name			Office so	ought			Offi	ce held		
	Date		Payee name	!											
	11/05/2024		Waco Sym	phony											
	Amount (\$)	T	Payee addre	ess;	City;	State;	Zip Co	de							
	\$129.05		P. O. Box 1	201											
	Reimbursement from														
	x political contributions intended		Waco, TX 7	76703											
	PURPOSE	T	Category (S	ee Categ	ories listed at the to	p of this sche	dule)	Descrip	otion	Ch	eck if trave	l outside	of Texas. C	Complete Sch	edule T.
	OF EXPENDITURE		Contribution	ns/Dor	nations Made	Ву				Ch	eck if Austi	n, TX, off	iceholder liv	ing expense	
	EX. ENDITORE		Candidate/	Officer	nolder/Politica	ıl Commi	ttee	Concert							
	Complete ONLY if direct expenditure to benefit	Car	ndidate/Office	holder	name			Office so	ought			Offi	ce held		
	C/OH														
	Date	1	Davisa nama												
	12/14/2024		Payee name Walmart												
	Amount (\$)	┢	Payee addre	.ee.	City;	State:	Zip Co	de							
	\$204.83		4320 Frank	-	•	State,	Zip Co	uc							
	Reimbursement from		.020		•										
	x political contributions intended		Waco, TX 7	76710											
	PURPOSE OF		5 , \	·	ories listed at the to	p of this sche	dule)	Descrip	otion	=				complete Sch	
	EXPENDITURE		Event Expe	ense				norodo	_	」	IECK II AUSII	II, IA, UII	icenoidei iiv	ing expense	
								parade							
	Complete ONLV if direct	<u>Car</u>	ndidate/Office	holder	name			Office	ough t			Off:	ce held		
	expenditure to benefit	Cal	ididate/Office	noider	name			Office so	Jugill			Oili	ce nelu		
	C/OH														