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) 00080286 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Baylor G. NAME Date Received **ELECTRONICALLY FILED** 01/09/2024 NICKNAME LAST **SUFFIX** Wortham CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Receipt # Amount **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Gilbert I. NAME NICKNAME LAST **SUFFIX** Buddy Low **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (409) 838-6412 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff lx l 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** 07/01/2023 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 136 Jefferson

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Wortham, Baylor G.	The Honorable)	14 Fil	er ID (Ethic 080286	s Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. consent. Candidates an	ndidate's or officehold	er's knowledge or						
Additional Pages	COMMITTEE TYPE								
_	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS						
16 CONTRIBUTION TOTALS	1. TOTAL UNITEM OR GUARANTE		0.00						
	2. TOTAL POLIT	\$	0.00						
EXPENDITURE TOTALS	3. TOTAL UNITEM	\$	0.00						
	4. TOTAL POLITICAL EXPENDITURES								
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAIN RIOD	ED AS OF THE LAST D	AY OF THE \$	63,605.49				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTAN TING PERIOD	HE LAST DAY \$	0.00					
17 AFFIDAVIT									
		true and corr	firm, under penalty of pel ect and includes all inforr 5, Election Code.						
			The Honorable B	aylor G. Wortham					
Signature of Candidate or Officeholder									
AFFIX NOT	TARY STAMP / SEAL AB	OVE							
Sworn to and subsc	ribed before me, by the s	aid	, th	nis the	day				
of, 20, to certify which, witness my hand and seal of office.									
Signature of offic	er administering oath	Printed name of officer adm	ninistering oath	Title of officer adm	ninistering oath				

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 5
18 FILER NA Wortham	(Ethics Commission Filers)		
	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	\$ 8,600.00	
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.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	\$	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/2 Rpt: 4/5	Wortham, Baylor G. (The Honorable) 00080286
4	Date	5 Payee name
	09/15/2023	Antioch Missionary Baptist Church
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3920 W Cardinal Drive
		Beaumont, TX 77705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Lamar CRU Scholarship Fund contribution
		Earlier of the Control of the Contro
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	12/01/2023	Circle of Hope
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	P.O. Box 953
		Nederland, TX 77627
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense 2024 Pardi Gras Table Sponsorship
		2024 Latur Gras Table Sportsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/14/2023	JCDP Primary Fund
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	2211 Calder
		Beaumont, TX 77701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Candidate Filing Fee for 2024 ballot
	Operation ONLY if allowed	On did to 10 ff as hald a grant Off as hald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee I	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						OTHER (enter a category not listed above)			
		_			Struction Gui	ue expiairis	s now to co	ilibic	te this form.	_			
1	Total pages Schedule F1:	2	FILER NAME							ı	Filer ID		(Ethics Commission Filers)
	Sch: 2/2 Rpt: 5/5		Wortham, Ba	aylor (G. (The Ho	norable)					000802	286	
4	Date	5	Payee name										
	09/24/2023		Jefferson Co	ounty [Democratio	Party							
6	Amount (\$)	7	Payee addres	SS;	City;	State	e; Zip Co	de					
	\$2,500.00		2211 Calder										
			Beaumont, 1	TX 777	701								
8	PURPOSE	(2)						(h)	Description				
°	OF	(a)	Category (Se		ries listed at the	top of this so	chedule)	(D)	Description	outoi	do of Toyon	Com	ploto Cobodulo T
	EXPENDITURE		Event Exper	ıse					Check if Austin,				plete Schedule T.
									2023 Blue Ga				
									2023 Blue Ga	aia	i abie 3	pons	sorsnip
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholde	er name		Office sou	ght			Offic	ce he	eld
	experialitare to beliefit eroi	'											
	Date		Payee name										
	12/01/2023		Junior Leagu	ue of E	Beaumont								
	Amount (\$)		Payee addres	ss;	City;	State	e; Zip Co	de					
	\$3,000.00		2388 McFad	din A	ve.								
			Beaumont, 1	TX 777	702								
	PURPOSE	(2)						(h)	Description				
	OF	(a)	Category (Se		ries listed at the	top of this so	chedule)	(D)	Description	outei	de of Teves	Com	plete Schedule T.
	EXPENDITURE		Event Exper	ıse					Check if Austin,				
2024 Dancing with the stars table													
										9			tatara aparraarap
	Complete ONLY if direct		Candidate/Offic	ceholde	er name		Office sou	aht			Offic	ce he	-id
	expenditure to benefit C/OI		zarialaato/ O me	Jonolae	or ricerito		011100 000	giit			0111	00 110	, i
\vdash													