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) 00084057 10 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable A. Brook NAME Date Received **ELECTRONICALLY FILED** 07/14/2025 NICKNAME LAST **SUFFIX** Fulks CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Brook NAME NICKNAME LAST **SUFFIX Fulks 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** (469) 307-7722 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 470 Collin District Judge District 470

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 10

13 C / OH NAME	Fulks, A. Brook (The	Honorable)	14 Filer ID 00084057	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
, taditoria i agos	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTIONS(OTHER THA	 N PLEDGES, LOANS,	
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 0.00
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 1,296.29
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	AST DAY OF THE	\$ 47,108.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the acc Ill information required t	companying report is to be reported by me
		The Hor	orable A. Brook Fulk	s
		Signature o	f Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		rtify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

	3 of 10		
18 FILER NA Fulks, A.	ME Brook (The Honorable)	19 Filer ID 00084057	(Ethics Commission Filers)
20 SCHEDUL NAME OF	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	\$ 1,276.29	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$ 20.00
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	\$

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		mmittee	Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter	a category not listed al	oove)
	Credit Card F dyment			The Instruction G	uide explains l	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 1/6 Rpt: 4/10		Fulks, A. Br	ook (The Hono	rable)					00084057		
4	Date	5	Payee name									
	03/01/2025		Baylor Unive	ersity								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$100.00		1114 South	University Park	s Drive							
			Waco, TX 7	6798								
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Fees			·		=			nplete Schedule T.	
	LXI LINDITORL							—		officeholder livin		
								Baylor Law A	uun	nni Associa	tion aues.	
_	0 1: 0 1: 0	L	0 1:1 : 10.5			\(r''				0.00		
9	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
	Date		Payee name									
	05/22/2025		Blue Goose									
	Amount (\$)		Payee addres		•	Zip Co	de					
	\$63.10		2020 N Cen	tral Expresswa	у							
			McKinney, ٦	TX 75070								
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Staff lunch.					=			nplete Schedule T.	
								Staff lunch.	, IX,	officeholder livin	g expense	
								Stair lution.				
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	aht			Office h	eld	
	expenditure to benefit C/OI		Janaidate/Oni	ceriolaer riame		JIIICC 300	giit			Office II	Ciu	
_	Date		Dayson name									
	03/24/2025		Payee name	ty Republican F	Partv							
						Zin Co	do					
	Amount (\$) \$300.00		Payee address 2963 West 2	, ,,	State,	Zip Co	ue					
	φ300.00			ISHI SHEEL								
			Suite 2981									
			Plano, TX 7	5075								
	PURPOSE OF	(a)		ee Categories listed at	the top of this scho	edule)	(b)	Description	outo:	de of Toyon Con	anlata Cabadula T	
	EXPENDITURE		Event Exper	nse						officeholder livin	nplete Schedule T. a expense	
								2025 Lincoln			9	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI											
l												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	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: 2/6 Rpt: 5/10	Fulks, A. Brook (The Honorable)	00084057
4	Date	5 Payee name	•
	01/02/2025	Google LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7.68	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	Description
	OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		R	Recurring expense for email.
Ļ			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
┕	·		
	Date	Payee name	
L	02/03/2025	Google LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.68	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		L R	Cecurring expense for email.
			toodg oxposioo ioi omain
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
H	Date	Payee name	
	03/03/2025	Google LLC	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.68	1600 Amphitheatre Pkwy	
		,	
		Mountain View, CA 94043	
_	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		R	Recurring expense for email.
L			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	experientale to beliefft C/Of	,	

SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		nittee I	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		pense ages/	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)		
1	Total pages Schedule F1:	2 F	ILER NAMF		-				3	Filer ID	(Ethics Commission Filers))
_	Sch: 3/6 Rpt: 6/10	1		ook (The Honor	able)					00084057		,
4	Date	5 P	Payee name									
	04/02/2025	1	Google LLC									
6	Amount (\$)	7 P	Payee addres	s; City;	State:	; Zip Coo	de					
	\$7.68	1		theatre Pkwy	-,	•						
			1	,								
		N	/lountain Vie	ew, CA 94043								
8	PURPOSE	(a) C	ategory (See	e Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Advertising E					=		de of Texas. Com		
								_		officeholder living		
								Recurring exp	ρ c i	ise iui eiiidii		
_	Complete ONU V if alice	<u> </u>		ala al day or a see		>#:	u la +			O#: !	.lal	
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name		Office souç	gnt 			Office he	eia	
	Date	Р	Payee name									
	05/02/2025	G	Google LLC									
	Amount (\$)	Р	ayee addres	s; City;	State;	; Zip Cod	de					
	\$7.68	1	.600 Amphit	theatre Pkwy								
		M	/lountain Vie	ew, CA 94043								
	PURPOSE OF			e Categories listed at th	ne top of this sch	edule)	(b)	Description				
	EXPENDITURE	A	Advertising E	Expense				=		de of Texas. Com officeholder living		
								Recurring exp				
								. toodining cap	, CI	.co ioi ciiidii	•	
	Complete ONLY if direct	L Ca	ındidate/Offic	ceholder name		Office soug	ght			Office he	eld	
expenditure to benefit C/OH												
	Date		Pavee name									
	06/02/2025	l	Google LLC									
	Amount (\$)	ı	Payee addres		State;	; Zip Coo	de					
	\$7.68	1	.600 Amphi	theatre Pkwy								
		N	∕lountain Vi∈	ew, CA 94043								
	PURPOSE	(a) C	ategory (See	e Categories listed at th	ne top of this sch	edule)	(b)	Description				
	OF EXPENDITURE	1	Advertising E		•	·		ш		de of Texas. Com		
	LAI LADITURE									officeholder living		
								Recurring exp	pen	ise for email		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	eholder name	C	Office soug	ght			Office he	eld	
	experience to beliefit 6/01	•										
_												

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 4/6 Rpt: 7/10	Fulks, A. Brook (The Honorable) 00084057					
4	Date	5 Payee name					
	03/02/2025	Hampton Inn					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$330.49	4259 North I-35					
		Waco, TX 76705					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Hotel Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Hotel (2/28 - 3/2) - teaching Baylor Law School					
		Floter (2/20 3/2) teaching Baylor Eaw 30/100/					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
۱	expenditure to benefit C/O						
-	Date	Dougo nomo					
	05/20/2025	Payee name					
		Junior League of Collin County					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$90.00	5805 S Coit Road					
		Plano, TX 75093					
	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 2025-2026 dues.					
		2023-2020 dues.					
_	Complete ONLV if direct	Candidate/Officeholder name Office sought Office held					
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
_	Data						
	Date	Payee name					
	01/31/2025	Republican Women of Greater North Texas					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$30.00	PO Box 2353					
		Frisco, TX 75034					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense 2025 membership fee.					
		2023 Membership Ice.					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 5/6 Rpt: 8/10	2 FILER NAME Fulks, A. Brook (The Honorable) 3 Filer ID (Ethics Commission Filers) 00084057
4	Date 05/07/2025	5 Payee name Republican Women of Greater North Texas
6	Amount (\$) \$30.00	7 Payee address; City; State; Zip Code PO Box 2353 Frisco, TX 75034
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Club meeting meal.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/24/2025	Payee name SG Hosting Inc.
	Amount (\$) \$230.13	Payee address; City; State; Zip Code 901 N Pitt Street Suite 325 Alexandria, VA 22314
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website hosting fee.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/20/2025	Payee name The Republican Club at Heritage Ranch
	Amount (\$) \$35.91	Payee address; City; State; Zip Code 465 Scenic Ranch Circle.
		Fairview, TX 75069
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Club meeting dinner fee.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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 Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 6/6 Rpt: 9/10	Fulks, A. Brook (The Honorable)	00084057
4	Date	5 Payee name	
	01/31/2025	The Republican Club at Heritage Ranch	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$15.00	465 Scenic Ranch Circle.	
		Fairview, TX 75069	
8	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
			2025 membership fee.
			'
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	1	
	Date	Payee name	
	01/06/2025	USPS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.58	8700 Stonebrook Pkwy	
		Frisco, TX 75034	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Postage	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Stamp.
			Stamp.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule G: Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 10/10 Fulks, A. Brook (The Honorable) 00084057 Date Payee name 04/24/2025 Richardson Republican Women 6 Amount (\$) Payee address; State; Zip Code City; \$20.00 PO Box 831626 Reimbursement from political contributions intended Χ Richardson, TX 75083 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** 2025 membership fee. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH