

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084038	2 Total pages filed: 5								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI The Honorable Albert D.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/22/2025								
	NICKNAME LAST SUFFIX Pat Pattillo III										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE REDACTED PER 254.0313, GOV'T CODE		Date Hand-delivered or Date Postmarked								
			Receipt # Amount								
			Date Processed								
			Date Imaged								
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Kerwin L.										
	NICKNAME LAST SUFFIX Overby										
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOV'T CODE										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (830) 896-1100										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td>☒ January 15</td> <td>☐ 30th day before election</td> <td>☐ Runoff</td> <td>☐ 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td>☐ July 15</td> <td>☐ 8th day before election</td> <td>☐ Exceeded modified reporting limit</td> <td>☐ Final Report (Attach C/OH-FR)</td> </tr> </table>			☒ January 15	☐ 30th day before election	☐ Runoff	☐ 15th day after campaign treasurer appointment (officeholder only)	☐ July 15	☐ 8th day before election	☐ Exceeded modified reporting limit	☐ Final Report (Attach C/OH-FR)
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9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025										
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☐ General ☐ Special								
11 OFFICE	OFFICE HELD (if any) District Judge (Multi-county) District 216 Kerr		12 OFFICE SOUGHT (if known) District Judge (Multi-county) District 216								

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
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13 C / OH NAME Pattillo III, Albert D. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00084038
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15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
	COMMITTEE TYPE ☐ GENERAL ☐ SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

 The Honorable Albert D. Pattillo III
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath
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SUBTOTALS - JC/OH**FORM JC/OH
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18 FILER NAME Pattillo III, Albert D. (The Honorable)		19 Filer ID 00084038	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	☒ SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	0.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	☒ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	0.00
4.	☒ SCHEDULE E(J): LOANS (JUDICIAL)	\$	0.00
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	0.00
6.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):
Sch: 1/1 Rpt: 4/5

2 FILER NAME
Pattillo III, Albert D. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00084038

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 5/5
2 FILER NAME Pattillo III, Albert D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084038
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender ☐ out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Lender's Principal Occupation		13 Lender's Job Title
14 Lender's Employer/Law Firm		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral ☐ None		18 Check if personal funds were deposited into political account (See Instructions) ☐
19 GUARANTOR INFORMATION ☐ not applicable	20 Name of guarantor	
	21 Guarantor address; City; State; Zip Code	
22 Amount Guaranteed (\$)		
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		