

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|---------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------------------|----------------------------------|--------------------------------------------------|------------------------------------------------------------|--------------------------------------------------------|
| <b>The JC/OH Instruction Guide explains how to complete this form.</b>                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00085674 | <b>2</b> Total pages filed:<br><br>5                                                                                                                                                             |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME                                                              | MS / MRS / MR FIRST MI<br>The Honorable Bryan T.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                             | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>01/04/2026                                                                                                         |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     | NICKNAME LAST SUFFIX<br>Bufkin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br><br><div style="background-color: black; color: white; text-align: center; padding: 5px;">                     REDACTED PER 254.0313, GOV'T CODE                 </div>                                                                                                                                                                                                                                                                                                                                          |                                                             | Date Hand-delivered or Date Postmarked                                                                                                                                                           |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Receipt # Amount                                                                                                                                                                                 |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Date Processed                                                                                                                                                                                   |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             | Date Imaged                                                                                                                                                                                      |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>5</b> CAMPAIGN TREASURER NAME                                                                    | MS / MRS / MR FIRST MI<br>Mrs. Rachael J.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     | NICKNAME LAST SUFFIX<br>Bufkin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br><br><div style="background-color: black; color: white; text-align: center; padding: 5px;">                     REDACTED PER 254.0313, GOV'T CODE                 </div>                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>7</b> CAMPAIGN TREASURER PHONE                                                                   | AREA CODE PHONE NUMBER EXTENSION<br>(817) 408-9573                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>8</b> REPORT TYPE                                                                                | <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> |                                                             |                                                                                                                                                                                                  | <input checked="" type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | <input type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
| <input checked="" type="checkbox"/> January 15                                                      | <input type="checkbox"/> 30th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Runoff                             | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)                                                                                                       |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <input type="checkbox"/> July 15                                                                    | <input type="checkbox"/> 8th day before election                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Exceeded modified reporting limit  | <input type="checkbox"/> Final Report (Attach C/OH-FR)                                                                                                                                           |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>9</b> PERIOD COVERED                                                                             | Month Day Year      Month Day Year<br>07/01/2025      THROUGH      12/31/2025                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>10</b> ELECTION                                                                                  | ELECTION DATE<br>Month Day Year<br>03/03/2026                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
|                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                             |                                                                                                                                                                                                  |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |
| <b>11</b> OFFICE                                                                                    | OFFICE HELD (if any)<br>District Judge District 355 Hood                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                             | <b>12</b> OFFICE SOUGHT (if known)<br>District Judge District 355                                                                                                                                |                                                |                                                   |                                 |                                                                                            |                                  |                                                  |                                                            |                                                        |

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|           |                    |                                  |           |                 |                            |
|-----------|--------------------|----------------------------------|-----------|-----------------|----------------------------|
| <b>13</b> | <b>C / OH NAME</b> | Bufkin, Bryan T. (The Honorable) | <b>14</b> | <b>Filer ID</b> | (Ethics Commission Filers) |
|           |                    |                                  |           | 00085674        |                            |

 Additional Pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

|    |                                                                                             |    |          |
|----|---------------------------------------------------------------------------------------------|----|----------|
| 2. | <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 1,500.00 |
|----|---------------------------------------------------------------------------------------------|----|----------|

|    |                                         |    |      |
|----|-----------------------------------------|----|------|
| 3. | TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
|----|-----------------------------------------|----|------|

|                            |    |                                                                                               |    |        |
|----------------------------|----|-----------------------------------------------------------------------------------------------|----|--------|
| OUTSTANDING<br>LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>OF THE REPORTING PERIOD | \$ | 511.17 |
|----------------------------|----|-----------------------------------------------------------------------------------------------|----|--------|

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**SUBTOTALS - JC/OH****FORM JC/OH  
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|                                                          |                                                                                                             |                                                           |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>18 FILER NAME</b><br>Bufkin, Bryan T. (The Honorable) |                                                                                                             | <b>19 Filer ID</b> (Ethics Commission Filers)<br>00085674 |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE         |                                                                                                             | SUBTOTAL AMOUNT                                           |
| 1.                                                       | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$ 1,500.00                                               |
| 2.                                                       | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$                                                        |
| 3.                                                       | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                    | \$                                                        |
| 4.                                                       | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)                                                    | \$                                                        |
| 5.                                                       | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 1,500.00                                               |
| 6.                                                       | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$                                                        |
| 7.                                                       | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                                                        |
| 8.                                                       | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$                                                        |
| 9.                                                       | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$                                                        |
| 10.                                                      | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$                                                        |
| 11.                                                      | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$                                                        |
| 12.                                                      | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                                                        |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

|                                                                     |                                                                                                    |                                                          |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form.           |                                                                                                    | 1 Total pages Schedule A(J)1:<br>Sch: 1/1 Rpt: 4/5       |
| 2 FILER NAME<br>Bufkin, Bryan T. (The Honorable)                    |                                                                                                    | 3 Filer ID (Ethics Commission Filers)<br>00085674        |
| 4 Date<br>12/01/2025                                                | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bufkin, Bryan | 7 Amount of Contribution (\$)<br>\$1,500.00              |
|                                                                     | 6 Contributor address; City; State; Zip Code<br><br><b>REDACTED PER 254.0313, GOV'T CODE</b>       |                                                          |
| 8 Contributor's Principal Occupation<br>Judge                       |                                                                                                    | 9 Contributor's Job Title<br>355th District Judge (SELF) |
| 10 Contributor's employer/law firm<br>N/A                           |                                                                                                    | 11 Law firm of contributor's spouse (if any)<br>N/A      |
| 12 If contributor is a child, law firm of parent(s) (if any)<br>N/A |                                                                                                    |                                                          |

# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

|                                                                     |                                                                                                    |                                                                                                                                                                                                      |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 5/5              | <b>2</b> FILER NAME<br>Bufkin, Bryan T. (The Honorable)                                            | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085674                                                                                                                                             |
| <b>4</b> Date<br>12/01/2025                                         | <b>5</b> Payee name<br>Hood County Republican Party                                                |                                                                                                                                                                                                      |
| <b>6</b> Amount (\$)<br>\$1,500.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>1315 Water's Edge Drive<br><br>Granbury, TX 76048 |                                                                                                                                                                                                      |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Filing Fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                        | Office sought      Office held                                                                                                                                                                       |