

# 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) 00089774		2 Total pages filed:  7	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Gerald		OFFICE USE ONLY  Date Received ELECTRONICALLY FILED 01/12/2026
	NICKNAME		LAST Fowler		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1220 Blalock Rd. Suite 339 HOUSTON, TX 77055		ZIP CODE		Date Hand-delivered or Date Postmarked
					Receipt #
					Amount
					Date Processed
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Dennis		MI
	NICKNAME		LAST Baldwin		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 922 Rochow St.  Houston, TX 77019		APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(713)	686-0025			
8 REPORT TYPE	<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)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
		07/01/2025			12/31/2025
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE		
			<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) District Judge District 157	

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
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<b>13 C / OH NAME</b> Fowler , Gerald (Mr.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00089774
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> 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.		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>	
		<b>COMMITTEE ADDRESS</b>	
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	
<b>16 CONTRIBUTION TOTALS</b>	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2.	<b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
<b>EXPENDITURE TOTALS</b>	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4.	<b>TOTAL POLITICAL EXPENDITURES</b>	\$ 2,603.54
<b>CONTRIBUTION BALANCE</b>	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
<b>OUTSTANDING LOAN TOTALS</b>	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,500.00

<b>17 AFFIDAVIT</b>		
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.		
Mr. Gerald Fowler _____ 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

**SUBTOTALS - JC/OH****FORM JC/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Fowler , Gerald (Mr.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00089774	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	4,500.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,603.54
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	\$	

# LOANS (JUDICIAL)

## SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/2 Rpt: 4/7
<b>2</b> FILER NAME Fowler , Gerald (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089774
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 11/21/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Gerald	<b>9</b> Loan Amount (\$) \$3,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  HOUSTON, TX 77055	<b>10</b> Interest Rate 0.0
		<b>11</b> Maturity Date 12/31/2035
<b>12</b> Lender's Principal Occupation Attorney		<b>13</b> Lender's Job Title Attorney
<b>14</b> Lender's Employer/Law Firm McGowen & Fowler, PLLC		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor	<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is child, law firm of parent(s) (if any)		

**LOANS (JUDICIAL)****SCHEDULE E(J)**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 2/2 Rpt: 5/7
<b>2</b> FILER NAME Fowler , Gerald (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00089774
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 07/15/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Gerald	<b>9</b> Loan Amount (\$) \$1,500.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  Houston, TX 77055	<b>10</b> Interest Rate 0.0
		<b>11</b> Maturity Date 12/31/2035
<b>12</b> Lender's Principal Occupation Attorney		<b>13</b> Lender's Job Title Attorney
<b>14</b> Lender's Employer/Law Firm McGowen & Fowler, PLLC		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor	
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>22</b> Amount Guaranteed (\$)		
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is child, law firm of parent(s) (if any)		

# 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: Sch: 1/1 Rpt: 6/7	<b>2</b> FILER NAME Fowler , Gerald (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00089774
<b>4</b> Date 07/18/2025	<b>5</b> Payee name Amegy Bank	
<b>6</b> Amount (\$) \$103.54	<b>7</b> Payee address; City; State; Zip Code 1330 Wirt Rd.  Houston, TX 77055	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for checks
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2025	Payee name Harris County Republican Primary	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 8588 Katy Fwy. Suite 445 Houston, TX 77024	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statutory required filing fee for judicial office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# OUTSTANDING LOANS

## SCHEDULE L

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule L:  
Sch: 1/1 Rpt: 7/7

**2** FILER NAME  
Fowler , Gerald (Mr.)

**3** Filer ID (Ethics Commission Filers)  
00089774

LENDER  
INFORMATION

**4** Name of lender  
Fowler, Gerald

**5** Lender address; City; State; Zip Code

HOUSTON, TX 77055

GUARANTOR  
INFORMATION

**6** Name of guarantor

☒ not applicable

**7** Guarantor address; City; State; Zip Code

LENDER  
INFORMATION

Name of lender  
Fowler, Gerald

Lender address; City; State; Zip Code

HOUSTON, TX 77055

GUARANTOR  
INFORMATION

Name of guarantor

☒ not applicable

Guarantor address; City; State; Zip Code