

**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) 00090167	2 Total pages filed: 22		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Stephen R.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Walker	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 705 Brentwood Drive			Date Hand-delivered or Date Postmarked		
	Lufkin, TX 75901			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Michelle C.	MI			
	NICKNAME	LAST Briley	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1517 West Frank Avenue		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Lufkin, TX 75904					
7 CAMPAIGN TREASURER PHONE	AREA CODE (936) 675-0506	PHONE NUMBER 0506	EXTENSION			
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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
THROUGH						
10 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other		
11 OFFICE	OFFICE HELD (if any) None			12 OFFICE SOUGHT (if known) District Judge District 217TH		

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

2 of 22

13 C / OH NAME	Walker, Stephen R. (Mr.)		14 Filer ID (Ethics Commission Filers) 00090167												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	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)		\$ 6,677.66												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 69,569.78												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 31,155.86												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 95,000.00												
17 AFFIDAVIT															
<p>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.</p>															
<p>Mr. Stephen R. Walker _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
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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18 FILER NAME Walker, Stephen R. (Mr.)	19 Filer ID (Ethics Commission Filers) 00090167
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 5,450.00	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 1,227.66	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$	
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) \$ 95,000.00	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 69,294.14	
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 275.64	
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: Sch: 1/4 Rpt: 4/22												
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167												
4 Date 12/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BADDERS, JEFFERY HEATH 6 Contributor address; City; State; Zip Code NACOGDOCHES, TX 75964	7 Amount of Contribution (\$) \$1,000.00												
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY												
10 Contributor's employer/law firm BADDERS LAW FIRM		11 Law firm of contributor's spouse (if any) BADDERS LAW FIRM												
12 If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 12/19/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, ROBERT Contributor address; City; State; Zip Code GALVESTON, TX 77551</td> <td>Amount of Contribution (\$) \$100.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation ATTORNEY</td> <td>Contributor's Job Title ATTORNEY</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm MILLS SHIRLEY LLP</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, ROBERT Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$100.00	Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY	Contributor's employer/law firm MILLS SHIRLEY LLP		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BOOTH, ROBERT Contributor address; City; State; Zip Code GALVESTON, TX 77551	Amount of Contribution (\$) \$100.00												
Contributor's Principal Occupation ATTORNEY		Contributor's Job Title ATTORNEY												
Contributor's employer/law firm MILLS SHIRLEY LLP		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														
<table border="1"> <tr> <td>Date 12/12/2025</td> <td>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER MATHIS & ZIVLEY, PC Contributor address; City; State; Zip Code LUFKIN, TX 75901</td> <td>Amount of Contribution (\$) \$1,000.00</td> </tr> <tr> <td colspan="2">Contributor's Principal Occupation</td> <td>Contributor's Job Title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm</td> <td>Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER MATHIS & ZIVLEY, PC Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$1,000.00	Contributor's Principal Occupation		Contributor's Job Title	Contributor's employer/law firm		Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)		
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHANDLER MATHIS & ZIVLEY, PC Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$1,000.00												
Contributor's Principal Occupation		Contributor's Job Title												
Contributor's employer/law firm		Law firm of contributor's spouse (if any)												
If contributor is a child, law firm of parent(s) (if any)														

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/4 Rpt: 5/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COLWELL, CHARLES	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code LUFKIN, TX 75901	
8 Contributor's Principal Occupation RETIRED		9 Contributor's Job Title RETIRED
10 Contributor's employer/law firm RETIRED		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNCAN, RUFUS
		Contributor address; City; State; Zip Code LUFKIN, TX 75904
Contributor's Principal Occupation BUSINESSMAN		Contributor's Job Title OWNER
Contributor's employer/law firm DUNCAN-TWO, LTD.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/01/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGSTON, KEVIN
		Contributor address; City; State; Zip Code LUFKIN, TX 75901
Contributor's Principal Occupation BUSINESSMAN		Contributor's Job Title OWNER
Contributor's employer/law firm LANGSTON CONSTRUCTION		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/4 Rpt: 6/22	
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167	
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAWRENCE, WAYNE (Dr.)	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code LUFKIN, TX 75901		
8 Contributor's Principal Occupation RETIRED		9 Contributor's Job Title RETIRED	
10 Contributor's employer/law firm RETIRED		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 12/09/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RALEY, STEPHEN Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation RETIRED		Contributor's Job Title RETIRED	
Contributor's employer/law firm RETIRED		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 12/16/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHAFER, TY Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation FUNERAL SERVICES		Contributor's Job Title OWNER	
Contributor's employer/law firm Shafer Funeral Home		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A(J)1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/4 Rpt: 7/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEBBER, AUSTIN 6 Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation ATTORNEY		9 Contributor's Job Title ATTORNEY
10 Contributor's employer/law firm DREAM FINDERS HOMES		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/22</p>
<p>2 FILER NAME Walker, Stephen R. (Mr.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00090167</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 11/19/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOGGINS, BUBBA</p> <p>7 Contributor address; City; State; Zip Code LUFKIN, TX 75901</p>	<p>8 Amount of contribution (\$) \$1,000.00</p> <p>9 In-kind contribution description DONATION FOR PARTIAL REDUCTION IN BILLBOARD EXPENSE TO SAVVY THE</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL) LOGGING</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions) OWNER</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL) Allen Loggins & Sons</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 12/06/2025</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, HILARY</p> <p>Contributor address; City; State; Zip Code LUFKIN, TX 75901</p>		<p>Amount of contribution (\$) \$227.66</p> <p>In-kind contribution description PARADE CANDY, DECORATIONS</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL) ATTORNEY</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions) BANK EXECUTIVE</p>
<p>Contributor's employer/law firm (FOR JUDICIAL) SOUTHSIDE BANK</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/4 Rpt: 9/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/27/2025	7 Name of lender WALKER, STEPHEN	8 out-of-state PAC (ID#:)
6 Is lender a financial institution? No	9 Loan Amount (\$) \$25,000.00	10 Interest Rate
		11 Maturity Date 01/31/2027
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm COREBRIDGE FINANCIAL		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 <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	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)		

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 2/4 Rpt: 10/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/16/2025	7 Name of lender WALKER, STEPHEN	8 out-of-state PAC (ID#: 9 Loan Amount (\$) \$20,000.00
6 Is lender a financial institution? No	10 Interest Rate	11 Maturity Date 01/31/2027
12 Lender's Principal Occupation ATTORNEY	13 Lender's Job Title ATTORNEY	
14 Lender's Employer/Law Firm COREBRIDGE FINANCIAL	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 <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> 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)		

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 3/4 Rpt: 11/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/16/2025	7 Name of lender WALKER, STEPHEN	8 out-of-state PAC (ID#: 9 Loan Amount (\$) \$30,000.00
6 Is lender a financial institution? No	10 Interest Rate	11 Maturity Date 01/31/2027
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm COREBRIDGE FINANCIAL		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 <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> 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)		

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 4/4 Rpt: 12/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 12/29/2025	7 Name of lender WALKER, STEPHEN	9 Loan Amount (\$) \$20,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code LUFKIN, TX 75901	10 Interest Rate
		11 Maturity Date 01/31/2027
12 Lender's Principal Occupation ATTORNEY		13 Lender's Job Title ATTORNEY
14 Lender's Employer/Law Firm COREBRIDGE FINANCIAL		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 <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor <input checked="" type="checkbox"/> not applicable	22 Amount Guaranteed (\$)
21 Guarantor address; City; State; Zip Code		
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)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/8 Rpt: 13/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/23/2025	5 Payee name ANEDOT INC	
6 Amount (\$) \$24.60	7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 DALLAS, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION PLATFORM PROCESSING EXPENSE/FEE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name ANGELINA COUNTY GOP	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2951 S. John Redditt Dr. Ste. 40 LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FILING FEE FOR JUDICIAL CANDIDATE APPLICATION FOR A PLACE ON THE GENERAL
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name GRANDOUGH BAKING CO.	
Amount (\$) \$45.47	Payee address; City; State; Zip Code 1705 FEAGIN DRIVE SUITE C LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense BAKED GOODS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/8 Rpt: 14/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/17/2025	5 Payee name JM BILLBOARD ADVERTISING	
6 Amount (\$) \$3,750.00	7 Payee address; City; 207 East Frank Ave. LUFKIN, TX 75901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN BILLBOARD
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name JM BILLBOARD ADVERTISING	Office sought Office held
Date 11/20/2025	Payee name JM BILLBOARD ADVERTISING	
Amount (\$) \$6,150.00	Payee address; City; 207 East Frank Ave. LUFKIN, TX 75901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN BILLBOARDS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LUFKIN ROTARY CLUB	Office sought Office held
Date 11/19/2025	Payee name LUFKIN ROTARY CLUB	
Amount (\$) \$350.00	Payee address; City; 1302 N. John Redditt LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION TO SPONSOR LUFKIN ROTARY CLUB'S 2025 WAFFLE BAKE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name LUFKIN ROTARY CLUB	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 3/8 Rpt: 15/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/30/2025	5 Payee name POINT A MEDIA	
6 Amount (\$) \$11,778.44	7 Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS, CARDS, DESIGNS, BADGES, CUPS, KOOZIES, NAIL FILES, PROFESSIONAL
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/17/2025	Payee name POINT A MEDIA	
Amount (\$) \$15,676.22	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS, CARDS, DESIGNS, NEWSPAPER, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name POINT A MEDIA	
Amount (\$) \$6,779.01	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS, PHOTOS, SOCIAL MEDIA, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 4/8 Rpt: 16/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 11/24/2025	5 Payee name POINT A MEDIA	
6 Amount (\$) \$2,598.00	7 Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHOTOS, DESIGNS, SOCIAL MEDIA, PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name POINT A MEDIA	
Amount (\$) \$10,307.99	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name POINT A MEDIA	
Amount (\$) \$960.00	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN DESIGN, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 5/8 Rpt: 17/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 11/17/2025	5 Payee name POINT A MEDIA	
6 Amount (\$) \$1,986.20	7 Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN DESIGN, PHOTOS, SOCIAL MEDIA, PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name POINT A MEDIA	
Amount (\$) \$1,300.50	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CARDS, DESIGN, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name POINT A MEDIA	
Amount (\$) \$2,099.53	Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHOTOS, DESIGN, PROFESSIONAL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 6/8 Rpt: 18/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 11/06/2025	5 Payee name POINT A MEDIA	
6 Amount (\$) \$1,570.31	7 Payee address; City; State; Zip Code 2908 WESTWARD DRIVE NACOGDOCHES, TX 75964	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN SIGNS, DESIGN, PROFESSIONAL SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/19/2025	Payee name SAVVY THE AGENCY	
Amount (\$) \$1,175.00	Payee address; City; State; Zip Code 317 E. FRANK AVE. LUFKIN, TX 75901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN BILLBOARD
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	Payee name TOYS FOR TOTS	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1778 RICHARDSON ROAD LUKFIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION/ENTRY FEE FOR HUNTINGTON, TEXAS VETERAN'S DAY PARADE
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 7/8 Rpt: 19/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/26/2025	5 Payee name TRACTOR SUPPLY	
6 Amount (\$) \$410.28	7 Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/18/2025	Payee name TRACTOR SUPPLY	
Amount (\$) \$240.29	Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS AND ZIP TIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name TRACTOR SUPPLY	
Amount (\$) \$46.43	Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 8/8 Rpt: 20/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167
4 Date 12/12/2025	5 Payee name TRACTOR SUPPLY	
6 Amount (\$) \$141.54	7 Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS AND ZIP TIES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name TRACTOR SUPPLY	
Amount (\$) \$343.52	Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS AND ZIP TIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/29/2025	Payee name TRACTOR SUPPLY	
Amount (\$) \$10.81	Payee address; City; State; Zip Code 511 NORTH BRENTWOOD DRIVE LUFKIN, TX 75904	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ZIP TIES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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 G: Sch: 1/1 Rpt: 21/22	2 FILER NAME Walker, Stephen R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090167	
4 Date 11/23/2025	5 Payee name WALKER, STEPHEN		
6 Amount (\$) \$86.39 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE LUFKIN, TX 75901		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS FROM TRACTOR SUPPLY	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/22/2025	Payee name WALKER, STEPHEN		
Amount (\$) \$189.25 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE LUFKIN, TX 75901		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-POSTS, ZIP TIES, WIRE FROM TRACTOR SUPPLY	
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: 22/22
2 FILER NAME Walker, Stephen R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090167
LENDER INFORMATION	4 Name of lender WALKER, STEPHEN	
	5 Lent address; City; State; Zip Code LUFKIN, TX 75901	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor	
	7 Guarantor address; City; State; Zip Code	