

**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) 00090418	2 Total pages filed: 5		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Mark	MI	<b>OFFICE USE ONLY</b>		
	NICKNAME	LAST Goldberg	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; 2520 Robinhood #609			Date Hand-delivered or Date Postmarked		
	Houston, TX 77005			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Alan	MI			
	NICKNAME	LAST Helfman	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4807 Kirby Dr.		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Houston, TX 77098					
7 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE NUMBER      EXTENSION (713) 524-3801					
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
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) None Harris			12 OFFICE SOUGHT (if known) District Judge District 185		

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

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

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13 C / OH NAME	Goldberg, Mark (Mr.)	14 Filer ID (Ethics Commission Filers) 00090418																		
15 NOTICE FROM POLITICAL COMMITTEE(S)	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.																			
<table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td colspan="3"><input checked="" type="checkbox"/> GENERAL Houston Region Business Coalition</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> SPECIFIC</td> </tr> <tr> <td colspan="3">COMMITTEE ADDRESS 4500 Bissonnet St. Suite #370 Bellaire, TX 77401</td> </tr> <tr> <td colspan="3">COMMITTEE CAMPAIGN TREASURER NAME Rothfelder , Richard</td> </tr> <tr> <td colspan="3">COMMITTEE CAMPAIGN TREASURER ADDRESS 3739 Jardin St.  Houston, TX 77005</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	<input checked="" type="checkbox"/> GENERAL Houston Region Business Coalition			<input type="checkbox"/> SPECIFIC			COMMITTEE ADDRESS 4500 Bissonnet St. Suite #370 Bellaire, TX 77401			COMMITTEE CAMPAIGN TREASURER NAME Rothfelder , Richard			COMMITTEE CAMPAIGN TREASURER ADDRESS 3739 Jardin St.  Houston, TX 77005		
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COMMITTEE CAMPAIGN TREASURER ADDRESS 3739 Jardin St.  Houston, TX 77005																				
16 CONTRIBUTION TOTALS	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)	\$ 2,500.00																		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00																		
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 2,500.00																		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00																		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00																		
17 AFFIDAVIT																				
<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. Mark Goldberg _____ Signature of Candidate or Officeholder</p>																				
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</b> FILER NAME Goldberg, Mark (Mr.)	<b>19</b> Filer ID (Ethics Commission Filers) 00090418
<b>20</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ 2,500.00	
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 \$ 2,500.00	
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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/5
<b>2</b> FILER NAME Goldberg, Mark (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00090418
<b>4</b> Date 12/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Houston Region Business Coalition ..... <b>6</b> Contributor address; City; State; Zip Code  Bellaire, TX 77401	<b>7</b> Amount of Contribution (\$) \$2,500.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a 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: 1/1 Rpt: 5/5	2 FILER NAME Goldberg, Mark (Mr.)	3 Filer ID (Ethics Commission Filers) 00090418	
4 Date 12/08/2025	5 Payee name Harris County Republican Party		
6 Amount (\$) \$2,500.00	7 Payee address; City; 8588 Katy Freeway Suite 445 Houston, TX 77024		
8 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 Candidate Filing fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held