

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) 00088479	2 Total pages filed: 7								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. David Glenn		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026								
	<hr/> NICKNAME LAST SUFFIX Williams										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1919 Trinity Street Suite B Liberty, TX 77575		Date Hand-delivered or Date Postmarked								
			Receipt # Amount								
			Date Processed								
			Date Imaged								
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Keri Desiree										
	<hr/> NICKNAME LAST SUFFIX Brown										
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5011 North Travis Street Liberty, TX 77575										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 599-3740										
8 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)								
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2025 THROUGH 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 Place n/a District 75								

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 7

13 C / OH NAME Williams, David Glenn (Mr.)	14 Filer ID (Ethics Commission Filers) 00088479
---	---

15 NOTICE FROM POLITICAL COMMITTEE(S) <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.	
	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)	\$ 14,100.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,510.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,590.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

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

Mr. David Glenn Williams

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

3 of 7

18 FILER NAME Williams, David Glenn (Mr.)		19 Filer ID 00088479	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	14,100.00
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	\$	7,510.00
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: Sch: 1/2 Rpt: 4/7
2 FILER NAME Williams, David Glenn (Mr.)		3 Filer ID (Ethics Commission Filers) 00088479
4 Date 07/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Robert <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77373	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Private Security Officer		9 Contributor's Job Title Private Security Officer
10 Contributor's employer/law firm Self-employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Jim Squyres PLLC <hr/> 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 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speights, Paulette <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$1,000.00
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)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/2 Rpt: 5/7
2 FILER NAME Williams, David Glenn (Mr.)		3 Filer ID (Ethics Commission Filers) 00088479
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speights, Robert <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$1,000.00
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 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vore, Amanda <hr/> Contributor address; City; State; Zip Code Liberty, TX 77575	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation contract paralegal		Contributor's Job Title paralegal
Contributor's employer/law firm none		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, David <hr/> Contributor address; City; State; Zip Code Liberty, TX 77575	Amount of Contribution (\$) \$10,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm David Glenn Williams, Attorney At Law, PLLC		Law firm of contributor's spouse (if any)
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
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.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 6/7	2 FILER NAME Williams, David Glenn (Mr.)	3 Filer ID (Ethics Commission Filers) 00088479
4 Date 12/03/2025	5 Payee name David Glenn Williams, Attorney At Law, PLLC	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 538 Main Street Liberty, TX 77575	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Improper Political Contribution Returned to Contributor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense I mistakenly believed that my PLLC could contribute to my campaign. Refunded in full.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2025	Payee name First Liberty National Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 1900 Sam Houston Street Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense banking fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2025	Payee name First Liberty National Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 1900 Sam Houston Street Liberty, TX 77575	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense banking fee
Complete <u>ONLY</u> 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
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.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 7/7	2 FILER NAME Williams, David Glenn (Mr.)	3 Filer ID (Ethics Commission Filers) 00088479
4 Date 11/20/2025	5 Payee name Republican Party of Liberty County Texas	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1808 Sam Houston Street suite 309 Liberty, TX 77575	
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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2025	Payee name Trinity Valley Exposition	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 321 Wallisville Road Liberty, TX 77575	
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 Sponsorship of the local livestock show and rodeo. Received a political advertising banner.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held