

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) 00057332	2 Total pages filed: 5								
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST DeLinda L.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR The Honorable	FIRST DeLinda L.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/04/2026					
	MS / MRS / MR The Honorable	FIRST DeLinda L.	MI								
<table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Gibbs-Walker</td> <td style="width: 40%;">SUFFIX</td> </tr> </table>		NICKNAME	LAST Gibbs-Walker	SUFFIX							
NICKNAME	LAST Gibbs-Walker	SUFFIX									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE REDACTED PER 254.0313, GOV'T CODE		Date Hand-delivered or Date Postmarked <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount</td> </tr> </table> Date Processed Date Imaged	Receipt #	Amount						
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	<table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR Mrs.</td> <td style="width: 30%;">FIRST Terry L.</td> <td style="width: 40%;">MI</td> </tr> </table>		MS / MRS / MR Mrs.	FIRST Terry L.	MI						
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STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOV'T CODE											
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE REDACTED PER 254.0313, GOV'T CODE										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (409) 200-5656										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td>☐ January 15</td> <td>☒ 30th day before election</td> <td>☐ Runoff</td> <td>☐ 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td>☐ July 15</td> <td>☐ 8th day before election</td> <td>☐ Exceeded modified reporting limit</td> <td>☐ Final Report (Attach C/OH-FR)</td> </tr> </table>			☐ January 15	☒ 30th day before election	☐ Runoff	☐ 15th day after campaign treasurer appointment (officeholder only)	☐ July 15	☐ 8th day before election	☐ Exceeded modified reporting limit	☐ Final Report (Attach C/OH-FR)
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9 PERIOD COVERED	<table style="width: 100%;"> <tr> <td style="width: 30%;">Month Day Year</td> <td style="width: 40%; text-align: center;">THROUGH</td> <td style="width: 30%;">Month Day Year</td> </tr> <tr> <td>01/01/2026</td> <td></td> <td>01/22/2026</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	01/01/2026		01/22/2026		
Month Day Year	THROUGH	Month Day Year									
01/01/2026		01/22/2026									
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <table style="width: 100%;"> <tr> <td>☒ Primary</td> <td>☐ Runoff</td> <td>☐ Other</td> </tr> <tr> <td>☐ General</td> <td>☐ Special</td> <td></td> </tr> </table>		☒ Primary	☐ Runoff	☐ Other	☐ General	☐ Special			
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☐ General	☐ Special										
11 OFFICE	OFFICE HELD (if any) District Judge (Multi-county) District 1A Jasper, Newton, Tyler		12 OFFICE SOUGHT (if known) District Judge District NaN								

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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 Gibbs-Walker, DeLinda L. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00057332
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15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ 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 ☐ GENERAL ☐ SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		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)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,500.00
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. The Honorable DeLinda L. Gibbs-Walker _____ 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. <table style="width:100%"><tr><td style="width:33%; border-top: 1px solid black;">Signature of officer administering oath</td><td style="width:33%; border-top: 1px solid black;">Printed name of officer administering oath</td><td style="width:33%; border-top: 1px solid black;">Title of officer administering oath</td></tr></table>			Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
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SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Gibbs-Walker, DeLinda L. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00057332	
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	☒ SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	0.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	☒ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	0.00
4.	☒ SCHEDULE E(J): LOANS (JUDICIAL)	\$	0.00
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	0.00
6.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	☒ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):
Sch: 1/1 Rpt: 4/5

2 FILER NAME
Gibbs-Walker, DeLinda L. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00057332

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a 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: 1/1 Rpt: 5/5

2 FILER NAME
Gibbs-Walker, DeLinda L. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00057332

4 TOTAL OF UNITEMIZED LOANS

\$ 0.00

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest Rate

11 Maturity Date

12 Lender's Principal Occupation

13 Lender's Job Title

14 Lender's Employer/Law Firm

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
☐ None

18 Check if personal funds were deposited into political account
(See Instructions)
☐

19 GUARANTOR
INFORMATION
☐ 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)