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: 19

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 02/23/2026

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: Mr.
FIRST: Stephen R.
MI:
NICKNAME:
LAST: Walker
SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE
705 Brentwood Drive
Lufkin, TX 75901

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); APT / SUITE #; CITY; STATE; ZIP CODE
1517 West Frank Avenue
Lufkin, TX 75904

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(936) 675-0506

8 REPORT TYPE

- ☐ 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)

9 PERIOD COVERED

Month Day Year: 01/23/2026 THROUGH Month Day Year: 02/21/2026

10 ELECTION

ELECTION DATE
Month Day Year: 03/03/2026

ELECTION TYPE
- ☒ Primary
- ☐ Runoff
- ☐ Other
- ☐ General
- ☐ Special

11 OFFICE

OFFICE HELD (if any):

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

13 C / OH NAME	Walker, Stephen R. (Mr.)	**14** Filer ID 00090167	(Ethics Commission Filers)

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. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	
☐ SPECIFIC	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)	$ 5,167.66
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$ 27,111.35
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 9,698.94
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

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. Stephen R. 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.

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

18 FILER NAME	**19** Filer ID (Ethics Commission Filers)
Walker, Stephen R. (Mr.)	00090167

20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	[X] SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	$ 5,100.00
2.	[X] SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 67.66
3.	[ ] SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	$
4.	[ ] SCHEDULE E(J): LOANS (JUDICIAL)	$
5.	[X] SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 27,111.35
6.	[ ] SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7.	[ ] SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$
8.	[ ] SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.	[ ] SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	$
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	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 4/19

2 FILER NAME: Walker, Stephen R. (Mr.)

3 Filer ID (Ethics Commission Filers): 00090167

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	7 Amount of Contribution ($)
01/30/2026	BRADLEY, STEVEN 6 Contributor address; City; State; Zip Code LUFKIN, TX 75904	$1,000.00

8 Contributor's Principal Occupation	9 Contributor's Job Title
FORESTRY, MULCHING AND CONSTRUCTION	COMPANY EXECUTIVE
10 Contributor's employer/law firm	**11** Law firm of contributor's spouse (if any)
TTJ EQUIPMENT	

12 If contributor is a child, law firm of parent(s) (if any)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/30/2026	CLARK, PAUL Contributor address; City; State; Zip Code MONTGOMERY, TX 77316	$1,000.00

Contributor's Principal Occupation	Contributor's Job Title
RETIRED	RETIRED
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
RETIRED	

If contributor is a child, law firm of parent(s) (if any)

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/27/2026	JOHNSON, DOMINIQUE Contributor address; City; State; Zip Code ALLEN, TX 75013	$250.00

Contributor's Principal Occupation	Contributor's Job Title
ATTORNEY	ATTORNEY
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
COREBRIDGE FINANCIAL	

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: 2/3 Rpt: 5/19

2 FILER NAME: Walker, Stephen R. (Mr.)

3 Filer ID (Ethics Commission Filers): 00090167

4 Date: 02/05/2026

5 Full name of contributor: LAW OFFICES OF JIM SQUYRES ☐ out-of-state PAC (ID#:_____)

6 Contributor address; City; State; Zip Code: LUFKIN, TX 75901

7 Amount of Contribution ($): $1,000.00

8 Contributor's Principal Occupation:

9 Contributor's Job Title:

10 Contributor's employer/law firm:

11 Law firm of contributor's spouse (if any):

12 If contributor is a child, law firm of parent(s) (if any):

Date: 02/04/2026

Full name of contributor: MOORE, RODNEY ☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code: LUFKIN, TX 75901

Amount of Contribution ($): $250.00

Contributor's Principal Occupation: CONSTRUCTION

Contributor's Job Title: OWNER

Contributor's employer/law firm: RODNEY MOORE HOMES

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date: 01/29/2026

Full name of contributor: SHANDS, JAY ☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code: LUFKIN, TX 75901

Amount of Contribution ($): $500.00

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: 3/3 Rpt: 6/19

2 FILER NAME: Walker, Stephen R. (Mr.)

3 Filer ID (Ethics Commission Filers): 00090167

4 Date: 02/05/2026

5 Full name of contributor: SQUYRES, EMILY

☐ out-of-state PAC (ID#:_____)

6 Contributor address; City; State; Zip Code: GROVETON, TX 75845

7 Amount of Contribution ($): $1,000.00

8 Contributor's Principal Occupation: LEGAL

9 Contributor's Job Title: OFFICE MANAGER

10 Contributor's employer/law firm: LAW OFFICES OF JIM SQUYRES

11 Law firm of contributor's spouse (if any): LAW OFFICES OF JIM SQUYRES

12 If contributor is a child, law firm of parent(s) (if any):

Date: 02/19/2026

Full name of contributor: WINSTON, SIMON

☐ out-of-state PAC (ID#:_____)

Contributor address; City; State; Zip Code: LUFKIN, TX 75901

Amount of Contribution ($): $100.00

Contributor's Principal Occupation: LAND AND CATTLE SALES

Contributor's Job Title: OWNER

Contributor's employer/law firm: WINSTON LAND & CATTLE CO.

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/19

2 FILER NAME: Walker, Stephen R. (Mr.)

3 Filer ID (Ethics Commission Filers): 00090167

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS: $

5 Date: 01/24/2026

6 Full name of contributor: WALKER, HILARY

☐ out-of-state PAC (ID#:_____)

7 Contributor address; City; State; Zip Code: LUFIN, TX 75901

8 Amount of contribution ($): $67.66

9 In-kind contribution description: EVENT FOOD

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

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions):

11 Employer (FOR NON-JUDICIAL) (See instructions):

12 Contributor's principal occupation (FOR JUDICIAL): ATTORNEY

13 Contributor's job title (FOR JUDICIAL) (See instructions): BANK EXECUTIVE

14 Contributor's employer/law firm (FOR JUDICIAL): SOUTHSIDE BANK

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL):

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL):

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: 1/11 Rpt: 8/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 01/30/2026

5 Payee name ANEDOT INC

6 Amount ($) $10.30

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

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Date 02/03/2026

Payee name ANEDOT INC

Amount ($) $40.30

Payee address; City; State; Zip Code
3723 Greenville Ave
Ste 41002
DALLAS, TX 75206

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONATION PLATFORM PROCESSING EXPENSE/FEE

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 01/30/2026

Payee name DONUT PALACE

Amount ($) $10.35

Payee address; City; State; Zip Code
601 NORTH TEMPLE DRIVE

DIBOLL, TX 75941

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 2/11 Rpt: 9/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 01/23/2026

5 Payee name DONUT PALACE

6 Amount ($) $27.95

7 Payee address; City; State; Zip Code
601 NORTH TEMPLE DRIVE

DIBOLL, TX 75941

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date 02/06/2026

Payee name DONUT PALACE

Amount ($) $27.95

Payee address; City; State; Zip Code
601 NORTH TEMPLE DRIVE

DIBOLL, TX 75941

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/19/2026

Payee name EAGLE'S NEST CAFE

Amount ($) $14.25

Payee address; City; State; Zip Code
594 EAST MAIN STREET

ZAVALLA, TX 75980

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
BREAKFAST/COFFEE

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: 3/11 Rpt: 10/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/18/2026

5 Payee name LUFKIN VFW

6 Amount ($) $52.50

7 Payee address; City; State; Zip Code
1800 FORD CHAPEL ROAD
LFUKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
FOOD BEVERAGE RAFFLE DONATION

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/20/2026

Payee name PAPA'S PIT & MORE

Amount ($) $2,712.39

Payee address; City; State; Zip Code
501 NORTH MAIN STREET
HUNTINGTON, TX 75949

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
BBQ FOOD

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/17/2026

Payee name POINT A MEDIA

Amount ($) $8,052.00

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
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
CAMPAIGN DESIGNS, SOCIAL MEDIA, NEWSPAPER, 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: 4/11 Rpt: 11/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/04/2026

5 Payee name POINT A MEDIA

6 Amount ($) $4,893.75

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
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
CAMPAIGN SIGNS, SOCIAL MEDIA, PROFESSIONAL SERVICES

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 01/29/2026

Payee name POINT A MEDIA

Amount ($) $9,188.00

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
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
CAMPAIGN DESIGNS, SOCIAL MEDIA, NEWSPAPER, PROFESSIONAL SERVICES

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/09/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $49.90

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 5/11 Rpt: 12/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/11/2026

5 Payee name SHIPLEY'S DONUTS

6 Amount ($) $149.70

7 Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/19/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $99.80

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/18/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $249.50

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 6/11 Rpt: 13/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/20/2026

5 Payee name SHIPLEY'S DONUTS

6 Amount ($) $32.20

7 Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/13/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $32.20

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/12/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $199.60

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 7/11 Rpt: 14/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/06/2026

5 Payee name SHIPLEY'S DONUTS

6 Amount ($) $49.90

7 Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/12/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $199.60

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 01/23/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $32.20

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 8/11 Rpt: 15/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/03/2026

5 Payee name SHIPLEY'S DONUTS

6 Amount ($) $49.90

7 Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/09/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $99.80

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 01/30/2026

Payee name SHIPLEY'S DONUTS

Amount ($) $49.90

Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE

LUFKIN, TX 75901

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

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: 9/11 Rpt: 16/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/17/2026

5 Payee name SHIPLEY'S DONUTS

6 Amount ($) $299.40

7 Payee address; City; State; Zip Code
609 SOUTH TIMBERLAND DRIVE
LUFKIN, TX 75901

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
DONUTS

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 01/31/2026

Payee name TRACTOR SUPPLY

Amount ($) $32.44

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

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Date 01/28/2026

Payee name TRACTOR SUPPLY

Amount ($) $16.22

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
☐ Check if travel outside of Texas. Complete Schedule T.
☐ 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 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: 10/11 Rpt: 17/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167

4 Date 02/18/2026

5 Payee name TRACTOR SUPPLY

6 Amount ($) $8.65

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
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
ZIP TIES

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

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Date 02/18/2026

Payee name TRACTOR SUPPLY

Amount ($) $23.76

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

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Date 01/24/2026

Payee name WALMART

Amount ($) $26.94

Payee address; City; State; Zip Code
2500 DANIEL MCCALL DRIVE
LUFKIN, TX 75904

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
FRUIT

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: 11/11 Rpt: 18/19	**2** FILER NAME Walker, Stephen R. (Mr.)	**3** Filer ID (Ethics Commission Filers) 00090167
4 Date 02/07/2026	**5** Payee name ZAVALLA VFD	
6 Amount ($) $380.00	**7** Payee address; City; State; Zip Code 253 NORTH 2ND STREET ZAVALLA, TX 75980	
8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule) Event Expense	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense DONATION FOR BAKE SALE FOR ZAVALLA VFD

9 Complete ONLY 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: 19/19

2 FILER NAME
Walker, Stephen R. (Mr.)

3 Filer ID (Ethics Commission Filers)
00090167

LENDER INFORMATION

4 Name of lender
WALKER, STEPHEN

5 Lender address; City; State; Zip Code

LUFKIN, TX 75901

GUARANTOR INFORMATION

[X] not applicable

6 Name of guarantor

7 Guarantor address; City; State; Zip Code