

**APPOINTMENT OF A CAMPAIGN
TREASURER BY A JUDICIAL CANDIDATE**

FORM JCTA

PG 1

See JCTA Instruction Guide for detailed instructions.

1 Total pages filed:

2

| | | | | | |
|---|--|---|--------------------------|-----------------------------------|-----------------|
| 2 JUDICIAL CANDIDATE NAME | | MS/MRS/MR | FIRST Mr. Timothy | MI A | OFFICE USE ONLY |
| | | NICKNAME | LAST Tim Lapham | SUFFIX | Filer ID # |
| 3 JUDICIAL CANDIDATE MAILING ADDRESS | | ADDRESS / PO BOX; | APT / SUITE #; | CITY; | STATE; ZIP CODE |
| | | 7067 FM 2187 Sealy, Texas 77474 | | | |
| 4 JUDICIAL CANDIDATE PHONE | | AREA CODE (979) | PHONE NUMBER 885-8729 | EXTENSION | Receipt # |
| | | | | | |
| 5 OFFICE HELD (if any) | | Date Hand-delivered or Postmarked | | | |
| | | RECEIVED DEC 05 2025 AUSTIN CO. TAX ASSESSOR-COLLECTOR | | | |
| 6 OFFICE SOUGHT (if known) | | Date Processed | | | |
| | | Date Imaged | | | |
| 7 CAMPAIGN TREASURER NAME | | MS/MRS/MR Mr. | FIRST Timothy | MI A | NICKNAME Tim |
| | | LAST Lapham | | | |
| 8 CAMPAIGN TREASURER STREET ADDRESS (Residence or business) | | STREET ADDRESS; 7067 FM 2187 | APT / SUITE #; | CITY; | STATE; ZIP CODE |
| | | Sealy, Texas 77474 | | | |
| 9 CAMPAIGN TREASURER PHONE | | AREA CODE (979) | PHONE NUMBER 885-8729 | EXTENSION | |
| 10 CANDIDATE SIGNATURE | | <p>I am aware of the Nepotism Law, Chapter 573 of the Texas Government Code.</p> <p>I am aware of my responsibility to file timely reports as required by Title 15 of the Election Code.</p> <p>I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.</p> | | | |
| | |  | | <p>12-4-25</p> <p>Date Signed</p> | |
| <p>Signature of Candidate</p> <p>GO TO PAGE 2</p> | | | | | |

JUDICIAL CANDIDATE MODIFIED REPORTING DECLARATION

FORM JCTA

PG 2

| | |
|-----------------------------------|---|
| 11 JUDICIAL CANDIDATE NAME | Timothy A Lapham |
| 12 MODIFIED REPORTING DECLARATION | <p>COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING. PLEASE READ THE EXPLANATION OF MODIFIED REPORTING IN THE INSTRUCTIONS TO THIS FORM.</p> <p>•• This declaration must be filed no later than the 30th day before the first election to which the declaration applies. ••</p> <p>•• The modified reporting option is valid for one election cycle only. •• (An election cycle includes a primary election, a general election, and any related runoffs.)</p> <p>I do not intend to accept more than \$1,110 in political contributions or make more than \$1,110 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. I understand that if either one of those limits is exceeded, I will be required to file pre-election reports and, if necessary, a runoff report.</p> |

2026

Year of election(s) or election cycle to which declaration applies


Signature of Candidate

TEC Filers may send this form to the TEC electronically at treasappoint@ethics.state.tx.us or mail to
Texas Ethics Commission
P.O. Box 12070
Austin, TX 78711-2070

Non-TEC Filers must file this form with the local filing authority
DO NOT SEND TO TEC

For more information about where to file go to:
<https://www.ethics.state.tx.us/filinginfo/QuickFileAReport.php>

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

| | | | | | | | | | | |
|--|--|---|--|--|-------------|---------|-----------|----------|-----------|----------|
| <p>(1) The JC/OH Instruction Guide explains how to complete this form.</p> | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: <i>3</i> | | | | | | | |
| <p>3 CANDIDATE / OFFICEHOLDER NAME</p> <p>MS / MRS / MR <i>Mr.</i> FIRST <i>Timothy</i> MI <i>A</i> NICKNAME <i>Tim</i> LAST <i>Lapham</i> SUFFIX</p> | <p>OFFICE USE ONLY</p> | | | | | | | | | |
| | <p>Date Received</p> | | | | | | | | | |
| <p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p><input type="checkbox"/> Change of Address</p> | <p>ADDRESS / PO BOX: <i>7067 FM 2187</i> APT / SUITE #: <i>Sealy</i> CITY: <i>TX</i> STATE: <i>77474</i> ZIP CODE</p> | | | | | | | | | |
| | <p>RECEIVED <i>DEC 30 2025</i></p> | | | | | | | | | |
| <p>5 CANDIDATE/ OFFICEHOLDER PHONE</p> | <p>AREA CODE <i>(979)</i> PHONE NUMBER <i>885-8729</i></p> | | <p>AUSTIN CO. TAX ASSESSOR-COLLECTOR</p> <p>Date Hand delivered, or Date Postmarked</p> | | | | | | | |
| | <p>6 CAMPAIGN TREASURER NAME</p> <p>MS / MRS / MR <i>Mr.</i> FIRST <i>Timothy</i> MI <i>A</i> NICKNAME <i>Tim</i> LAST <i>Lapham</i> SUFFIX</p> | | <p>Receipt # <input type="text"/> Amount \$ <input type="text"/></p> | | | | | | | |
| <p>7 CAMPAIGN TREASURER ADDRESS (Residence or Business)</p> | <p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: <i>7067 FM 2187</i> CITY: <i>Sealy</i> STATE: <i>TX</i> ZIP CODE <i>77474</i></p> | | <p>Date Processed <input type="text"/></p> | | | | | | | |
| | <p>8 CAMPAIGN TREASURER PHONE</p> <p>AREA CODE <i>(979)</i> PHONE NUMBER <i>885-8729</i></p> | | <p>Date Imaged <input type="text"/></p> | | | | | | | |
| <p>9 REPORT TYPE</p> | <p><input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit</p> | | | | | | | | | |
| | <p><input checked="" type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> Final Report (Attach C/OH - FR)</p> | | | | | | | | | |
| <p>10 PERIOD COVERED</p> | Month | Day | Year | Month | Day | Year | | | | |
| | <i>12</i> | <i>/</i> | <i>4</i> | <i>/</i> | <i>2025</i> | THROUGH | <i>12</i> | <i>/</i> | <i>30</i> | <i>/</i> |
| <p>11 ELECTION</p> | <p>ELECTION DATE Month <input type="text"/> Day <input type="text"/> Year <input type="text"/></p> | | | <p>ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special <input type="text"/></p> | | | | | | |
| | <p><i>3 / 3 / 2026</i></p> | | | <p><i>County Judge</i></p> | | | | | | |
| <p>12 OFFICE</p> <p><input type="checkbox"/> Additional Pages</p> | <p>OFFICE HELD (if any) <i>County Judge</i></p> | | | <p>13 OFFICE SOUGHT (if known) <i>County Judge</i></p> | | | | | | |
| | <p>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.</p> | | | | | | | | | |
| <p>14 NOTICE FROM POLITICAL COMMITTEE(S)</p> | <p><input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC</p> | <p>COMMITTEE TYPE COMMITTEE NAME</p> | | | | | | | | |
| | | <p>COMMITTEE ADDRESS</p> | | | | | | | | |
| | | <p>COMMITTEE CAMPAIGN TREASURER NAME</p> | | | | | | | | |
| | | <p>COMMITTEE CAMPAIGN TREASURER ADDRESS</p> | | | | | | | | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

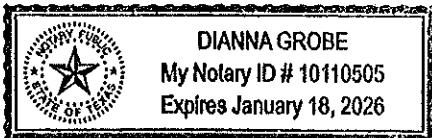
| | | |
|---------------------------------|---|--|
| JC/OH NAME <i>Tim Lapham</i> | | 16 Filer ID (Ethics Commission Filers) |
| 17 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 0 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ 0 |
| | 4. TOTAL POLITICAL EXPENDITURES <i>Filing Fee</i> | \$ 750 ⁰⁰ |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 0 |
| | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0 |
| OUTSTANDING LOAN TOTALS | | |

18 SIGNATURE 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.



Signature of Candidate/Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Tim Lapham this the 30th day of December,
2025, to certify which, witness my hand and seal of office.

Dianna Grobe
Signature of officer administering oath

Dianna Grobe
Printed name of officer administering oath

Notary Public
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.

(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.

• Complete only if "Report Type" on page 1 is marked "Final Report" •

1 C/OH NAME

Tim Lapham

2 Filer ID (Ethics Commission Filers)

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

• Complete A & B below only if you are not an officeholder. •

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

• Complete this section only if you are an officeholder •

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.



Signature of Officeholder