

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)

2 Total pages filed:

9

3 CANDIDATE /
OFFICEHOLDER
NAME

MS ☒ MRS ☐ MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Andrea
Townsend

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 107 Gainesville TX 76241

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

823-9786

6 CAMPAIGN
TREASURER
NAME

MS ☒ MRS ☐ MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Andrea
Townsend

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

767 CR 424

Muenster

TX

76252

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817)

823-9786

9 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)

10 PERIOD
COVERED

Month Day Year
9 / 9 / 25

THROUGH

Month Day Year
12 / 31 / 25

11 ELECTION

ELECTION DATE

Month Day Year

3 / 3 / 26

ELECTION TYPE

☒ Primary

☐ Runoff

☐ Other
Description

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Cooke County Court at Law Judge

14 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. 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

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME <u>Andrea Lee Townsend</u>		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)	\$ <u>Ø</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>3,655.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>Ø</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>1,788.47</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>2,758.53</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>Ø</u>

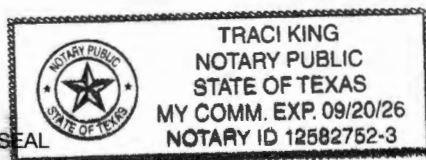
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Andrea Townsend

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Andrea Townsend this the 15th day of January.

20 26, to certify which, witness my hand and seal of office.

Traci King

Traci King

Legal Assistant

Signature of officer administering oath

Printed name of officer administering oath

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)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME <i>Andrea Lee Townsend</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>3,655.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>Ø</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>Ø</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>1,000.00</i>
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>1,788.47</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>Ø</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>Ø</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>Ø</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>Ø</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>Ø</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>Ø</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>Ø</i>

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Andrea Lee Townsend

3 Filer ID (Ethics Commission Filers)

4 Date

9-19-25

5 Full name of contributor

☐ out-of-state PAC ID#:

Steven G. Gebhardt

7 Amount of contribution (\$)

\$1000.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Member

10 Contributor's employer/law firm

Fulgham Hampton

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

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

Date

9-22-25

Full name of contributor

Sanjay Biswas

☐ out-of-state PAC ID#:

Amount of contribution (\$)

\$200.00

Contributor's principal occupation

Attorney

Contributor's job title

Member

Contributor's employer/law firm

Sanjay Biswas

Law firm of contributor's spouse (if any)

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

Date

9-22-25

Full name of contributor

Ryan Sims

☐ out-of-state PAC ID#:

Amount of contribution (\$)

\$350.00

Contributor's principal occupation

Attorney

Contributor's job title

Of Counsel

Contributor's employer/law firm

Palter Sims Martinez

Law firm of contributor's spouse (if any)

Palter Sims Martinez

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Andrea Lee Townsend

3 Filer ID (Ethics Commission Filers)

4 Date

11-9-25

5 Full name of contributor

☐ out-of-state PAC ID#:

Steve Gordon

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Member

10 Contributor's employer/law firm

Steve Gordon + Associates

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

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

Date

12-12-25

Full name of contributor

☐ out-of-state PAC ID#:

Eric Klein

Amount of contribution (\$)

\$1000.00

Contributor's principal occupation

Attorney

Contributor's job title

Member

Contributor's employer/law firm

Vinson + Elkins

Law firm of contributor's spouse (if any)

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

Date

9-19-25

Full name of contributor

☐ out-of-state PAC ID#:

Aaron Townsend

Amount of contribution (\$)

\$5.00

Contributor's principal occupation

Bank Senior Vice President

Contributor's job title

Senior Vice President

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Andrea Lee Townsend

3 Filer ID (Ethics Commission Filers)

4 Date

10-2-25

5 Full name of contributor

Josh Ross

☐ out-of-state PAC ID#:

7 Amount of contribution (\$)

\$1000.00

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Member

10 Contributor's employer/law firm

Cantey Hanger, LLP

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

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 (\$)

Contributor address;

City;

State; Zip Code

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

Full name of contributor

☐ out-of-state PAC ID#:

Amount of contribution (\$)

Contributor address;

City;

State; Zip Code

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)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS (JUDICIAL)**SCHEDULE E(J)**

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): <div style="text-align: center; font-size: 1.5em;">1</div>
2 FILER NAME <div style="text-align: center; font-size: 1.2em;">Andrea Lee Townsend</div>		3 Filer ID (Ethics Commission Filers) <div style="text-align: center; font-size: 1.5em;">—</div>
4 TOTAL OF UNITEMIZED LOANS		\$ <div style="text-align: center; font-size: 1.2em;">1000.00</div>
5 Date of loan <div style="text-align: center; font-size: 1.2em;">9-15-25</div>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center; font-size: 1.2em;">Andrea Townsend</div>	9 Loan Amount (\$)
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code <div style="background-color: black; height: 40px; width: 100%;"></div>	10 Interest rate <div style="text-align: center; font-size: 1.5em;">Ø</div>
		11 Maturity date <div style="text-align: center; font-size: 1.5em;">N/A</div>
12 Lender's Principal Occupation <div style="text-align: center; font-size: 1.2em;">Attorney</div>		13 Lender's Job Title <div style="text-align: center; font-size: 1.2em;">Assistant County Attorney</div>
14 Lender's Employer/Law Firm <div style="text-align: center; font-size: 1.2em;">Cooke County</div>		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> 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 a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 1		2 FILER NAME Andrea Lee Townsend		3 Filer ID (Ethics Commission Filers)	
4 Date 11-4-25		5 Payee name Deluxe Checks			
6 Amount (\$) \$33.61		7 Payee address; 801 S. Marquette Ave.		City; Minneapolis	State; MN
				Zip Code 55402	
		<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	8 (a) Category (See Categories listed at the top of this schedule) Accounting / Banking		(b) Description Checks / checkbooks to make campaign expenditure payments		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name		Office sought	Office held
Date 11-8-25		Payee name Cooke County Republican Party			
Amount (\$) \$1500.00		Payee address; 701 E. California St. #304		City; Gainesville TX	State; TX
				Zip Code 76240	
		<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Filing Fee to run for office		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name		Office sought	Office held
Date 11-26-25		Payee name First Graphic Services			
Amount (\$) \$254.86		Payee address; 229 Garvon St.		City; Garland	State; TX
				Zip Code 75040	
		<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Campaign signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2025, a candidate or officeholder who has accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name <u>Andrea Lee Townsend</u>	Filer ID #
--	------------

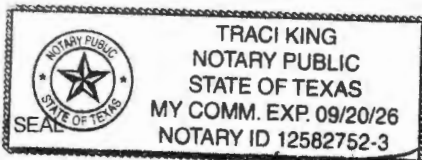
OFFICE USE ONLY	
Date Received	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

1. I swear or affirm that I have not accepted more than \$33,910 in political contributions or made more than \$33,910 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$33,910 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the TC/OH Campaign Finance report due on January 15, 2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

NOTARY STAMP



Andrea Townsend
Signature of Filer

Sworn to and subscribed before me by Andrea Townsend this the 15th day of January, 2026, to certify which, witness my hand and seal of office.

Traci King
Signature of officer administering oath

Traci King
Printed name of officer administering oath

Legal Assistant
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 Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**