

# 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	2 Total pages filed: 13	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI William III	Guadalupe County Elections Date Received JAN 15 2026 Received Tina Robinson		
	NICKNAME LAST SUFFIX Squires	Date Hand-delivered or Date Postmarked		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 211 W Court St # 330 Seguin, TX 78155-2545		ZIP CODE	
	Receipt #		Amount	
	Date Processed			
	Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI William			
	NICKNAME LAST SUFFIX Squires Jr			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE Seguin Texas 7 78155			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION			
8 REPORT TYPE	<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) Guadalupe County Court at Law, Judge		12 OFFICE SOUGHT (if known) Guadalupe County Court at Law, Judge	

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# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

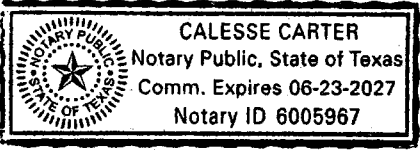
2 of 13

13 C / OH NAME Squires, William	14 Filer ID
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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

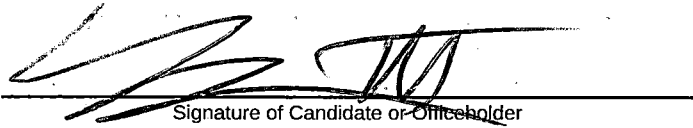
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,600.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	6,361.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,238.39

**17 AFFIDAVIT**




AFFIX NOTARY STAMP / SEAL ABOVE

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 or Officeholder

Sworn to and subscribed before me, by the said William G. Squires, this the 14 day of JANUARY, 2026, to certify which, witness my hand and seal of office.

  
 Signature of officer administering oath

CALESSE CARTER

 Printed name of officer administering oath

NOTARY

 Title of officer administering oath

**SUBTOTALS - JC/OH****FORM JC/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Squires, William		<b>19 Filer ID</b>	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	4,600.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	4,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	6,361.61
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: 4/13

2 FILER NAME  
Squires, William

3 Filer ID

4 Date  
12/08/2025

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Barger, Jason

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

6 Contributor address; City; State; Zip Code  
433 Kitty Hawk

Universal City, TX 78148

8 Contributor's Principal Occupation  
Attorney

9 Contributor's Job Title

10 Contributor's employer/law firm  
Jason Barger PLLC

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

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

Date  
12/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Carlsson, John

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
8001 Coral Way

Seguin, TX 78155

Contributor's Principal Occupation  
Consultant

Contributor's Job Title

Contributor's employer/law firm  
District Manager and Seguin City Council

Law firm of contributor's spouse (if any)

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

Date  
12/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Gaytan, Paul

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code  
3045 S. Camp

Seguin, TX 78155

Contributor's Principal Occupation  
Attorney

Contributor's Job Title

Contributor's employer/law firm  
Paul Gaytan PLLC

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: 5/13

**2** FILER NAME

Squires, William

**3** Filer ID

**4** Date  
12/29/2025

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Langley and Banack

**7** Amount of Contribution (\$)  
\$1,000.00

**6** Contributor address; City; State; Zip Code  
745 E. Mulberry  
Suite 700  
San Antonio, TX 78212

**8** Contributor's Principal Occupation  
Attorneys

**9** Contributor's Job Title

**10** Contributor's employer/law firm  
Langley and Banack

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

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

Date  
12/08/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Thomas, Ray

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
4900 N. 10th

McAllen, TX 78504

Contributor's Principal Occupation  
Attorney

Contributor's Job Title

Contributor's employer/law firm  
Ray Thomas Law Group

Law firm of contributor's spouse (if any)

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

Date  
11/10/2025

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Wilkinson, Elaine Wilkenson

Amount of Contribution (\$)  
\$1,000.00

Contributor address; City; State; Zip Code

San Marcos, TX

Contributor's Principal Occupation  
Retired

Contributor's Job Title  
Retired

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)

# LOANS (JUDICIAL)

## SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/3 Rpt: 6/13	
<b>2</b> FILER NAME Squires, William		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$	
<b>5</b> Date of loan 11/08/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Squires III, William (Judge)		<b>9</b> Loan Amount (\$) \$1,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 211 W Court St # 330  Seguin, TX 78155		<b>10</b> Interest Rate 0.0
			<b>11</b> Maturity Date 05/31/2026
<b>12</b> Lender's Principal Occupation Judge		<b>13</b> Lender's Job Title Judge	
<b>14</b> Lender's Employer/Law Firm Guadalupe County		<b>15</b> Law Firm of lender's spouse (if any)	
<b>16</b> If lender is child, law firm of parent(s) (if any)			
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)	
<b>19</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor		<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code		
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title	
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)	
<b>27</b> If guarantor is child, law firm of parent(s) (if any)			

# LOANS (JUDICIAL)

## SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 2/3 Rpt: 7/13
<b>2</b> FILER NAME Squires, William		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 12/01/2025	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Squires III, William (Judge)	<b>9</b> Loan Amount (\$) \$1,500.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 211 W Court St # 330  Seguin, TX 78155	<b>10</b> Interest Rate 0.00
		<b>11</b> Maturity Date 05/31/2026
<b>12</b> Lender's Principal Occupation Judge		<b>13</b> Lender's Job Title Judge
<b>14</b> Lender's Employer/Law Firm Guadalupe County		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor	<b>22</b> Amount Guaranteed (\$)
	<b>21</b> Guarantor address; City; State; Zip Code	
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is 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: 3/3 Rpt: 8/13

2 FILER NAME  
Squires, William

3 Filer ID

4 TOTAL OF UNITEMIZED LOANS

\$

5 Date of loan  
12/08/2025

7 Name of lender ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Squires III, William (Judge)

9 Loan Amount (\$)  
\$1,500.00

6 Is lender a  
financial  
institution?  
No

8 Lender address; City; State; Zip Code  
211 W Court St # 330  
Seguin, TX 78155

10 Interest Rate  
0.00

11 Maturity Date  
05/31/2026

12 Lender's Principal Occupation  
Judge

13 Lender's Job Title  
Judge

14 Lender's Employer/Law Firm  
Guadalupe County

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)



# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 9/13	<b>2</b> FILER NAME Squires, William	<b>3</b> Filer ID
<b>4</b> Date 11/08/2025	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) \$485.48	<b>7</b> Payee address; City; State; Zip Code On-line	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banners/T-Shirts
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2025	Payee name Amazon	
Amount (\$) \$280.28	Payee address; City; State; Zip Code On-line	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Signs/Banner/T-Shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2025	Payee name Amazon	
Amount (\$) \$121.02	Payee address; City; State; Zip Code On-line  WA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Signs
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.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 10/13	<b>2</b> FILER NAME Squires, William	<b>3</b> Filer ID
<b>4</b> Date 11/12/2025	<b>5</b> Payee name De La Garza, Jordan	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code  McAllen, TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2025	Candidate/Officeholder name De La Garza, Jordan	
Amount (\$) \$1,500.00	Office sought Office held	
Payee address; City; State; Zip Code  McAllen, TX		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2025	Candidate/Officeholder name Direct Texas Marketing	
Amount (\$) \$573.73	Office sought Office held	
Payee address; City; State; Zip Code 1260 S. Bus IH-35  New Braunfels , TX 78130		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Signs
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.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 11/13	<b>2</b> FILER NAME Squires, William	<b>3</b> Filer ID
<b>4</b> Date 11/10/2025	<b>5</b> Payee name Meta	
<b>6</b> Amount (\$) \$6.89	<b>7</b> Payee address; City; State; Zip Code On-Line  CA	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/17/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$257.00	Payee name Meta  Payee address; City; State; Zip Code On-Line  CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/10/2025	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$137.21	Payee name Meta  Payee address; City; State; Zip Code On-Line  CA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 4/4 Rpt: 12/13	<b>2</b> FILER NAME Squires, William	<b>3</b> Filer ID
<b>4</b> Date 12/01/2025	<b>5</b> Payee name Republican Party	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code Guadalupe County  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing Fee
<b>9</b> 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: 13/13

2 FILER NAME  
Squires, William

3 Filer ID

### LENDER INFORMATION

4 Name of lender  
Squires III, William (Judge)

5 Lender address; City; State; Zip Code  
211 W Court St # 330

Seguin, TX 78155

### GUARANTOR INFORMATION

☒ not applicable

6 Name of guarantor

7 Guarantor address; City; State; Zip Code