

# 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: 7		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Robert	MI	OFFICE USE ONLY		
	NICKNAME	LAST Fling	SUFFIX	Date Received <b>Waller Co. Elections</b> <b>FEB 02 2026</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 411 5518 Fifth Street Katy, TX 77492			ZIP CODE		
				Date Hand-delivered or Date Postmarked <b>RECEIVED</b>		
				Receipt #	Amount	
				Date Processed		
			Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI			
	NICKNAME	LAST	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE):		APT / SUITE #;	CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION!			
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" 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 01/01/2026	Day	Year	Month 01/22/2026	Day	Year
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)		

GO TO PAGE 2

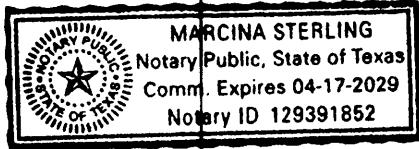
# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

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13 C / OH NAME	Fling, Robert		14 Filer ID
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>This box is for notice of political contributions accepted - 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.</p>		
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE	COMMITTEE NAME
		<input type="checkbox"/> GENERAL	
		<input type="checkbox"/> 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)		\$ 650.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 3,558.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 758.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 258.89

## 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 in accordance with the Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said S. Robert Fling, this the 2<sup>nd</sup> day of February, 2021, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Marcina Sterling  
Printed name of officer administering oath

Title of officer administering oath

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

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<b>18 FILER NAME</b> Fling, Robert	<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b>	
NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 500.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 150.00
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 258.89
5. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 3,558.51
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: 1/1 Rpt: 4/7
2 FILER NAME Fling, Robert		3 Filer ID
4 Date 01/22/2026	5 Full name of contributor George , George & Beverly (Mr.) ..... 6 Contributor address; City; State; Zip Code P.O. Box 640  Katy, TX 77492	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Retired Accountant		9 Contributor's Job Title Retired Accountant
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 5/7
<b>2</b> FILER NAME Fling, Robert		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
<b>5</b> Date 01/17/2026	<b>6</b> Full name of contributor Nin9 Silversmiths  <b>7</b> Contributor address; City, State, Zip Code 32508 Morrison Road  Brookshire, TX 77423	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$150.00 Buckle donated to Royal ISD Friends of FFA Chili Supper Auction  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

**LOANS (JUDICIAL)****SCHEDULE E(J)****The Instruction Guide explains how to complete this form.****1 Total pages Schedule E(J):**  
Sch: 1/1 Rpt: 6/7**2 FILER NAME**  
Fling, Robert**3 Filer ID****4 TOTAL OF UNITEMIZED LOANS****\$****5 Date of loan** 01/02/2026 **7 Name of lender**  out-of-state (check if applicable) **8** Fling, Robert (Mr.) **9 Loan Amount (\$)** \$258.89**6 Is lender a financial institution?** No **8** Lender address: City: P.O. Box 411 State: Zip Code 77492 **10 Interest Rate**  
**11 Maturity Date****12 Lender's Principal Occupation** Attorney **13 Lender's Job Title** Attorney**14 Lender's Employer/Law Firm** S. Robert Fling, Attorney at Law **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 PERSONAL FUNDS

## SCHEDULE G

### 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/Memorabilia  
Legal Services

Equipment/Rent/Bursement  
Hotel/Meal/Travel Expense  
Meals/Entertainment  
Professional/Consultant

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 G: Sch: 1/1 Rpt: 7/7	2 FILER NAME Fling, Robert	3 Filer ID
4 Date 01/13/2026	5 Payee name Fling, Robert (Mr.)	
6 Amount (\$) \$2,500.00	7 Payee address; City: P.O. Box 411  Katy, TX 77492	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this section) Event 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 Waller County Republican Party - Lincoln Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit Candidate/Officeholder name C/OH		Office sought      Office held
Date 01/20/2026	Payee name Friends of Royal FFA Chili Dinner	
Amount (\$) \$20.00	Payee address; City: 2950 FM 359 Rd. N.  Pattison, TX 77423	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this section) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Friends of Royal FFA Chili Dinner
Complete <u>ONLY</u> if direct expenditure to benefit Candidate/Officeholder name C/OH		Office sought      Office held
Date 01/08/2026	Payee name UZ Marketing	
Amount (\$) \$1,038.51	Payee address; City 5900 Bingle Rd.  Houston, TX 77092	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this section) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political signs and door hangers
Complete <u>ONLY</u> if direct expenditure to benefit Candidate/Officeholder name C/OH		Office sought      Office held