

# 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: **2**

|   |  |   |
|---|--|---|
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>            | MS / MRS / MR<br>FIRST Omar MI<br>NICKNAME LAST Narvaez SUFFIX   | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>FILED</b><br>2026 FEB - 2 PM 4:44<br>JOHN F. HANSEN<br>COUNTY CLERK<br>DALLAS COUNTY<br>REPUTY                      |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br><input type="checkbox"/> Change of Address<br>411 Broadway Ave #5320 Dallas TX 75212   |   |
| <b>5 CANDIDATE / OFFICEHOLDER PHONE</b>           | AREA CODE PHONE NUMBER EXTENSION<br>(214) 9260172  |   |
| <b>6 CAMPAIGN TREASURER NAME</b>                  | MS / MRS / MR FIRST Norma MI<br>NICKNAME LAST Minnis SUFFIX  |   |
| <b>7 CAMPAIGN TREASURER ADDRESS</b>               | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>6219 Prospectb Dallas TX 75214<br>(Residence or Business)   |   |
| <b>8 CAMPAIGN TREASURER PHONE</b>                 | AREA CODE PHONE NUMBER EXTENSION<br>(214) 2889544  |   |
| <b>9 REPORT TYPE</b>                              | <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)<br><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) |   |
| <b>10 PERIOD COVERED</b>                          | Month Day Year    Month Day Year<br>01 / 01 / 2026    THROUGH    01 / 22 / 2026  |   |
| <b>11 ELECTION</b>                                | ELECTION DATE: Month Day Year: 03 / 03 / 2026<br>ELECTION TYPE: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description<br><input type="checkbox"/> General <input type="checkbox"/> Special  |   |
| <b>12 OFFICE</b>                                  | OFFICE HELD (if any)   | <b>13 OFFICE SOUGHT (if known)</b><br>Justice of the Peace Precinct 5 Place 2   |
| <b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>      | 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.  |   |
| <input type="checkbox"/> Additional Pages         | <input type="checkbox"/> GENERAL<br><input type="checkbox"/> SPECIFIC  | COMMITTEE TYPE: _____<br>COMMITTEE NAME: _____<br>COMMITTEE ADDRESS: _____<br>COMMITTEE CAMPAIGN TREASURER NAME: _____<br>COMMITTEE CAMPAIGN TREASURER ADDRESS: _____ |

**GO TO PAGE 2**



# SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

|   |  |   |
|---|--|---|
| <b>19</b> FILER NAME  |  | <b>20</b> Filer ID (Ethics Commission Filers) |
| Omar Narvaez  |  |   |
| <b>21</b> SCHEDULE SUBTOTALS  |  | SUBTOTAL AMOUNT                               |
| NAME OF SCHEDULE  |  |   |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                            |  | \$ 3435.00                                    |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS              |  | \$ 206..00                                    |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   |  | \$  |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS   |  | \$  |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS    |  | \$ 3862.93                                    |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  |  | \$  |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS              |  | \$  |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                       |  | \$  |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                         |  | \$  |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        |  | \$  |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           |  | \$  |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER |  | \$  |

**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:<br><b>2</b>       |
| 2 FILER NAME<br><b>Omar Narvaez</b>  |   | 3 Filer ID (Ethics Commission Filers)           |
| 4 Date<br><b>01/04/2026</b>  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____<br><b>Elsa Cadena</b>   | 7 Amount of contribution (\$)<br><b>1100.00</b> |
| 6 Contributor address; City; State; Zip Code<br><b>6915 American Way Dallas TX 75237</b> |   |   |
| 8 Contributor's principal occupation<br><b>Retired</b>                                   |   | 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<br><b>01/04/2026</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____<br><b>Rick Cadena</b>     | Amount of contribution (\$)<br><b>100.00</b>    |
| Contributor address; City; State; Zip Code<br><b>6915 American Way Dallas TX 75237</b>   |   |   |
| Contributor's principal occupation<br><b>Retired</b>                                     |   | 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<br><b>01/04/2026</b>  | Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____<br><b>Pauline Medrano</b> | Amount of contribution (\$)<br><b>500.00</b>    |
| Contributor address; City; State; Zip Code<br><b>TX 75216</b>                            |   |   |
| Contributor's principal occupation<br><b>Treasurer</b>                                   |   | Contributor's job title<br><b>Treasurer</b>     |
| Contributor's employer/law firm<br><b>Dallas County</b>                                  |   | 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.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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 A2:  |                                    |
| 2 FILER NAME<br>Omar Narvaez  |   | 3 Filer ID (Ethics Commission Filers)   |                                    |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   | \$ 175.00   |                                    |
| 5 Date  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Angela Medrano                           | 8 Amount of Contribution \$   | 9 In-kind contribution description |
| 01/10/26  | 7 Contributor address; City; State; Zip Code<br>2331 Douglas Dallas TX 75216  | 126.00  | Supplies & storage                 |
|   |   | <input type="checkbox"/> 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)<br>medical<br>Medical  |   | 13 Contributor's job title (FOR JUDICIAL)(See Instructions)<br>Nurse            |                                    |
| 14 Contributor's employer/law firm (FOR JUDICIAL)<br>Home Health            |   | 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) |   |   |                                    |
| Date  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Contributor address; City; State; Zip Code | Amount of Contribution \$   | In-kind contribution description   |
|   |   |   |                                    |
|   |   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |                                    |
| Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)       |   | Employer (FOR NON-JUDICIAL)(See Instructions)                                   |                                    |
| Contributor's principal occupation (FOR JUDICIAL)                           |   | Contributor's job title (FOR JUDICIAL)(See Instructions)                        |                                    |
| Contributor's employer/law firm (FOR JUDICIAL)                              |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)                        |                                    |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |   |   |                                    |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor 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                        | 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            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:                                   | <b>2</b> FILER NAME<br>Omar Narvaez  | <b>3</b> Filer ID (Ethics Commission Filers) |
| <b>4</b> Date<br>01/02/2026   | <b>5</b> Payee name<br>Versa Printing  |  |
| <b>6</b> Amount (\$)<br>130.69                                      | <b>7</b> Payee address; City; State; Zip Code<br>2631 Brenner Dallas TX 75220<br><input type="checkbox"/> Check if individual's residence address.                   |  |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>                           | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense  | <b>(b)</b> Description<br>Shirts             |
|   | <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name<br>Omar Narvaez  | Office sought<br>Justice of the Peace 5-2    |
| Date<br>01/22/2026  | Payee name<br>Versa Printing   |  |
| Amount (\$)<br>2197.28  | Payee address; City; State; Zip Code<br>2631 Brenner Dallas TX 75220<br><input type="checkbox"/> Check if individual's residence address.                            |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | Description<br>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<br>Omar Narvaez  | Office held<br>Justice of tthe Peace 5-2     |
| Date<br>01/05/2026  | Payee name<br>Mail House   |  |
| Amount (\$)<br>1352.43  | Payee address; City; State; Zip Code<br>1737 E Levee St Dallas TX 75207<br><input type="checkbox"/> Check if individual's residence address.                         |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | Category (See Categories listed at the top of this schedule)<br>Printing expense   | Description<br>Printing Campaign materials   |
|   | <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<br>Omar Narvaez  | Office sought<br>Justice of the Peace 5-2    |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

| Date    | Amou | Name     | Last Name     | Address           | City    | State | ZIP   | Occupation       |
|---------|------|----------|---------------|-------------------|---------|-------|-------|------------------|
| 1/2/200 | 100  | Patricia | Dunne         | 4134 PARK LN      | Dallas  | TX    | 75220 | Not Employed     |
| 1/3/260 | 100  | Erin     | Moore         | 324 Easton Rd     | Dallas  | TX    | 75218 | Executive Admin  |
| 1/4/260 | 10   | Diana    | Alexander     | 10238 Rothbury St | Houston | TX    | 77043 | Educator         |
| 1/4/260 | 500  | Pauline  | Medrano       | 2346 Douglas Ave. | Dallas  | TX    | 75219 | Elected Official |
| 1/14/26 | 50   | Keith    | Pomykal       | P O Box 192723    | Dallas  | TX    | 75219 | Real estate      |
| 1/17/26 | 250  | Adam     | Bazaldua      | 6926 Belteau Lane | Dallas  | TX    | 75227 | Councilmember    |
| 1/18/26 | 150  | Veletta  | Forsythe Lill | 622 Blair Blvd.   | Dallas  | TX    | 75223 | Not Employed     |
| 1/18/26 | 500  | Philip   | Kingston      | 5901 Palo Pinto   | Dallas  | TX    | 75206 | Lawyer           |
|         |      |          |               |                   |         |       |       |                  |
|         |      |          |               |                   |         |       |       |                  |
| TOTAL   | 1660 |          |               |                   |         |       |       |                  |

|                 |
|-----------------|
| Donor Employer  |
| Not Employed    |
| Dallas County   |
| CFISD           |
| Dallas County   |
| Pomykal LLC     |
| City of Dallas  |
| Not Employed    |
| Sheils Winnubst |
|                 |
|                 |
|                 |