

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 10

## OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

FILED  
2026 JAN 14 4:10:03  
JOHN F. WARREN  
COUNTY CLERK  
DALLAS COUNTY  
DEPUTY

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR FIRST MI  
Mr. John F  
NICKNAME LAST SUFFIX  
Warren

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 972 ) 523-0793

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Mr. Karl F  
NICKNAME LAST SUFFIX  
Warren

7 CAMPAIGN  
TREASURER  
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

(Residence or Business)

1304 Boardwalk St., Arlington, TX 76011

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
( 817 ) 800-5016

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 Month Day Year  
7 / 1 / 25 THROUGH 12 / 31 / 25

11 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year ☐ Primary ☐ Runoff ☐ Other  
Description  
☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any)

Dallas County Clerk

13 OFFICE SOUGHT (if known)

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

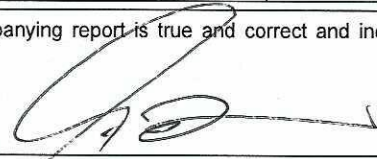
GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME		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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,496.62
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,463.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,900.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

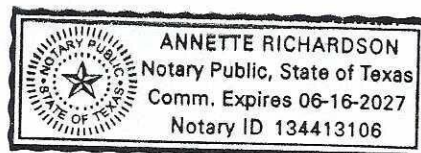
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by John F. Warren this the 13 day of January, 2025, to certify which, witness my hand and seal of office.

Annette Richardson Signature of officer administering oath  
Annette Richardson Printed name of officer administering oath  
Notary Public Title of officer administering oath

OR

(2) Unsworn Declaration

My name is John F. Warren, 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 - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,496.62
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 3,463.72
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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 A1: 4
2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)
4 Date 09/26/2025	5 Full name of contributor out-of-state PAC (ID#: Jeff Tillotson 6 Contributor address; City; State; Zip Code 1201 Main Street, Suite 1300 Dallas, Texas 75202	7 Amount of contribution (\$)  1,456.16
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 09/26/2025	Full name of contributor out-of-state PAC (ID#: Peter Malouf Contributor address; City; State; Zip Code 4824 Nashwood Ln., Dallas TX 75244	Amount of contribution (\$)  242.28
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/27/2025	Full name of contributor out-of-state PAC (ID#: Paul Malouf Contributor address; City; State; Zip Code 3127 Boedecker Cir., Dallas, TX 75225	Amount of contribution (\$)  96.62
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/27/2025	Full name of contributor out-of-state PAC (ID#: Michael Cole Contributor address; City; State; Zip Code 2600 State St., Dallas TX 75204	Amount of contribution (\$)  96.62
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
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****SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1:
<b>2</b> FILER NAME John F. Warren		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 09/29/2025	<b>5</b> Full name of contributor out-of-state PAC (ID#: _____) Lisa Baron <b>6</b> Contributor address; City; State; Zip Code 4047 Cochran Chapel Rd. Dallas, TX 75209-1501	<b>7</b> Amount of contribution (\$)  <b>2,427.26</b>
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions)
Date 09/29/2025	Full name of contributor out-of-state PAC (ID#: _____) Rob Miller Contributor address; City; State; Zip Code 400 S. Ervay St. Dallas, TX 75201	Amount of contribution (\$)  <b>484.06</b>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/29/2025	Full name of contributor out-of-state PAC (ID#: _____) Simon Greenstone Contributor address; City; State; Zip Code Simon Greenstone Panatier, PC 901 Main St. Suite 5900 Dallas, TX 75202	Amount of contribution (\$)  <b>970.61</b>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/29/2025	Full name of contributor out-of-state PAC (ID#: _____) Eleanor Aldous Contributor address; City; State; Zip Code 4311 Oak Lawn Ave., Suite 150 Dallas, TX 75219	Amount of contribution (\$)  <b>242.28</b>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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 A1:
2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)
4 Date 09/30/2025	5 Full name of contributor out-of-state PAC (ID#: Carmen Mitchell 6 Contributor address; City; State; Zip Code 6333 E Mockingbird Ln., Ste 147 PMB 495 Dallas, TX 75214-2672	7 Amount of contribution (\$)  485.06
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor out-of-state PAC (ID#: Allie Lamb Contributor address; City; State; Zip Code 6623 Del Norte Lane Dallas TX 75225	Amount of contribution (\$)  4,855.01
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/06/2025	Full name of contributor out-of-state PAC (ID#: Bruce Steckler Contributor address; City; State; Zip Code 12720 Hillcrest Suite 1045 Dallas, Texas 75230	Amount of contribution (\$)  485.06
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/06/2025	Full name of contributor out-of-state PAC (ID#: David Paillet Contributor address; City; State; Zip Code 5715 Melshire Dr. Dallas Texas 75230	Amount of contribution (\$)  242.28
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
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

## SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2025	5 Full name of contributor out-of-state PAC (ID#: David Price 6 Contributor address; City; State; Zip Code 4619 Chantilly Circle Houston, Texas 77018	7 Amount of contribution (\$)  485.06
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 10/17/2025	Full name of contributor out-of-state PAC (ID#: Terumi Fausto Contributor address; City; State; Zip Code 6815 CREST PL LIVE OAK, TX 78233	Amount of contribution (\$)  485.06
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/09/2025	Full name of contributor out-of-state PAC (ID#: Patrick Bond Contributor address; City; State; Zip Code 1423 N. Charles Ave., Naperville, IL 60563	Amount of contribution (\$)  2,427.26
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/05/2025	Full name of contributor out-of-state PAC (ID#: Stephen Malouf Contributor address; City; State; Zip Code 5868 Elderwood Dr., Dallas, TX 75230	Amount of contribution (\$)  2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
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

## SCHEDULE A1

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 A1: 5
2 FILER NAME John F. Warren		3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2025	5 Full name of contributor out-of-state PAC (ID#: Reese Marketos LLP 6 Contributor address; City; State; Zip Code 750 N. St. Paul St., Suite 600, Dallas, TX 75201	7 Amount of contribution (\$)  1,000.00
8 Principal occupation / Job title (See Instructions) Attorney/Law Firm		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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: 1	<b>2</b> FILER NAME John F. Warren	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 11/03/2025	<b>5</b> Payee name Wix.com	
<b>6</b> Amount (\$) 363.72	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Hosting Fees	<b>(b)</b> Description Campaign website
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought Office held County Clerk
Date 11/04/2025	Payee name Bank of America	
Amount (\$) 50.00	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Banking Fee	Description Campaign Account
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name John F. Warren	Office sought Office held County Clerk
Date 11/06/2025	Payee name Desmond Cook	
Amount (\$) 200.00	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description Campaign Contribution
	Check if travel outside of Texas. Complete Schedule T. 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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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.

<b>1</b> Total pages Schedule F1: 2		<b>2</b> FILER NAME John F. Warren		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 11/12/2025		<b>5</b> Payee name Brandon Vance Campaign			
<b>6</b> Amount (\$) 400.00		<b>7</b> Payee address; City; State; Zip Code P.O. Box 397657, Dallas, TX 75339			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)		<b>(b)</b> Description Campaign Contribution		
	<b>(c)</b> Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/12/2025		Payee name Dallas County Democratic Party			
Amount (\$) 1,250.00		Payee address; City; State; Zip Code 1414 N Washington Ave, Dallas, TX 75204			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Filing Fee		Description Application for Place on Ballot		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name John F. Warren		Office sought		Office held County Clerk	
Date 12/01/2025		Payee name 23rd Senatorial District Tejano Democrats			
Amount (\$) 200.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description Campaign Contribution		
	Check if travel outside of Texas. Complete Schedule T.		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