

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) [REDACTED]	2 Total pages filed: 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Barry	OFFICE USE ONLY Date Received: 2025 JUL 15 PM 2:14 FILED JOHN F. WERNICK COUNTY CLERK DALLAS COUNTY TEXAS	
	NICKNAME LAST SUFFIX Wernick		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 13770 Noel Rd. #800646 Dallas, TX 75380		Date Hand Delivered or Date Postmarked
			Receipt / Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Barry NICKNAME LAST SUFFIX Wernick		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6544 Dykes Way Dallas TX 75230		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 972 503 5895		
8 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)		
9 PERIOD COVERED	Month Day Year Month Day Year 02/22/2026 THROUGH 06/30/2026		
10 ELECTION	ELECTION DATE Month Day Year 11/03/2026	ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☒ General ☐ Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Dallas County Commissioner District 2 Place 2 District 2	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Wernick, Barry (Mr.)	14 Filer ID 00000000 (Ethics Commission Filers)
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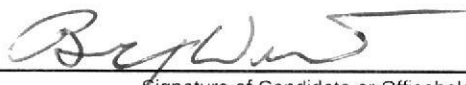
15 NOTICE FROM POLITICAL COMMITTEE(S) ☐ Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	☐ GENERAL	COMMITTEE ADDRESS
	☐ 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)	\$ 4,928.38
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,461.58
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,681.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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 under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Barry Wernick, this the 15th day of July, 2026, to certify which, witness my hand and seal of office.



 Signature of officer administering

Karen Martinez

 Printed name of officer administering

Cashier

 Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

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18 FILER NAME Wernick, Barry (Mr.)		19 Filer ID (Ethics Commission Filers) 000000000
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,928.38
2.	☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	☐ SCHEDULE E: LOANS	\$
5.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,461.58
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/18
2 FILER NAME Wernick, Barry (Mr.)		3 Filer ID (Ethics Commission Filers) 00000123
4 Date 06/30/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Acree, Richard	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 2060 SPUR CROSS RD Grand Junction, CO 81507	
8 Principal occupation / Job title (See Instructions) Emergency Services Sergeant		9 Employer (See Instructions) Mesa County
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Alhadeef, Joel	Amount of Contribution (\$) \$118.00
	Contributor address; City; State; Zip Code 6222 ROYAL CREST DR Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Archer, Ira	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 6119 Greenville #623 Dallas, TX 75206	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Blumin, Carolee	Amount of Contribution (\$) \$450.00
	Contributor address; City; State; Zip Code 8240 Manderville Lane Dallas, TX 75231	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/04/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Erickson, Donald	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 6554 Briarmeade Dallas, TX 75254	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/18
2 FILER NAME Wernick, Barry (Mr.)		3 Filer ID (Ethics Commission Filers) 00000125
4 Date 06/30/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Gorrod, Barry	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code 3 CAPE CT DALLAS, TX 75230	
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) SELF
Date 03/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Hopper, Michelle	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 3816 Miramar Ave Dallas, TX 75205	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kafka, Terry	Amount of Contribution (\$) \$187.38
	Contributor address; City; State; Zip Code 5927 Glendora Ave Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Self
Date 02/23/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Kafka, Terry	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 5927 Glendora Ave Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Self
Date 04/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Karcher, Connie	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code PO BOX 7025 Highland Park, TX 75209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/18
2 FILER NAME Wernick, Barry (Mr.)		3 Filer ID (Ethics Commission Filers) <u>00000125</u>
4 Date 03/02/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Karcher, Connie 6 Contributor address; City; State; Zip Code PO BOX 7025 Highland Park, TX 75209	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Lee, Amy Contributor address; City; State; Zip Code 2015 W. Colorado Blvd Dallas, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Baylor Scott White Health
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) MARGOLIES, MIKE Contributor address; City; State; Zip Code 6531 DYKES WAY DALLAS, TX 75230	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Mariani, Janet Contributor address; City; State; Zip Code 6904 Hill Forest Dr. Dallas, TX 75230	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Martinez, David Contributor address; City; State; Zip Code 4943 Thunder Rd Dallas, TX 75244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/18
2 FILER NAME Wernick, Barry (Mr.)		3 Filer ID (Ethics Commission Filers) 00000105
4 Date 06/30/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) McGrath, Hunter 6 Contributor address; City; State; Zip Code 4719 Cole Avenue Dallas, TX 75205	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 04/27/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) McGrue, Aaron Contributor address; City; State; Zip Code 135 Gilbert Circle Grand Prairie, TX 75050	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Miller, John Contributor address; City; State; Zip Code 4205 Purdue Ave. Dallas, TX 75225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ploss, Harry Contributor address; City; State; Zip Code 3736 Woodshadow Ln Addison, TX 75001	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/17/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Preston West Republican Women Contributor address; City; State; Zip Code 4407 Hallmark Dallas, TX 75229	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/18
2 FILER NAME Wernick, Barry (Mr.)		3 Filer ID (Ethics Commission Filers) 00000125
4 Date 06/30/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Silver, Kathi	7 Amount of Contribution (\$) \$36.00
	6 Contributor address; City; State; Zip Code 4705 Mira Vista Drive Frisco, TX 75034	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Stowe, Cindy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 5831 MeadowCrest Dr Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Insurance Broker		Employer (See Instructions) AmWins
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Ward, Linda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 6909 Helsem Way Dallas, TX 75230	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Zimmerman, Linda	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 4645 SUGAR MILL RD Dallas, TX 75244	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

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.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 9/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 00000125
4 Date 06/30/2026	5 Payee name Anedot	
6 Amount (\$) \$2.30	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/24/2026	Candidate/Officeholder name Payee name Campaign Command	
Amount (\$) \$519.60	Office sought Payee address; City; State; Zip Code 1143 Rockingham Dr Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/04/2026	Candidate/Officeholder name Payee name City of Dallas Parks and recreation	
Amount (\$) \$2.75	Office sought Payee address; City; State; Zip Code 1500 Marilla Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Parking
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.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 10/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 00000125
4 Date 02/26/2026	5 Payee name Constant Contact	
6 Amount (\$) \$195.07	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/20/2026	Candidate/Officeholder name Payee name Constant Contact	
Amount (\$) \$195.07	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/27/2026	Candidate/Officeholder name Payee name Constant Contact	
Amount (\$) \$390.14	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email Service
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.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 11/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 90000125
4 Date 05/26/2026	5 Payee name Constant Contact	
6 Amount (\$) \$195.07	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email Service
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 06/26/2026	Candidate/Officeholder name Payee name Constant Contact	
Amount (\$) \$195.07	Office sought Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Email Service
Complete ONLY if direct expenditure to benefit C/OH		
Date 03/03/2026	Candidate/Officeholder name Payee name Dallas County Republican Party	
Amount (\$) \$281.49	Office sought Payee address; City; State; Zip Code 1617 N Central Expy Suite 240 Dallas, TX 75243	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Texting Campaign
Complete ONLY 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.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 12/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 99999125
4 Date 05/14/2026	5 Payee name Dropbox	
6 Amount (\$) \$127.80	7 Payee address; City; State; Zip Code 1800 Owens St San Francisco, TX 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Office Expense Online
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/16/2026	Candidate/Officeholder name George Allen Garage	Office sought Office held
Amount (\$) \$3.00	Payee address; City; State; Zip Code 601 Commerce St Dallas, TX 75202	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Parking
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/30/2026	Candidate/Officeholder name GiveSendGo LLC	Office sought Office held
Amount (\$) \$78.74	Payee address; City; State; Zip Code 8 The Green, STE A Dover, DE 19901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing Fees
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.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 13/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 90600123
4 Date 03/11/2026	5 Payee name GoDaddy	
6 Amount (\$) \$3.19	7 Payee address; City; State; Zip Code 2155 E. GoDaddy Way Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Web Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/12/2026	Candidate/Officeholder name Payee name GoDaddy	
Amount (\$) \$294.09	Office sought Payee address; City; State; Zip Code 2155 E. GoDaddy Way Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Web Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/13/2026	Candidate/Officeholder name Payee name GoDaddy	
Amount (\$) \$3.19	Office sought Payee address; City; State; Zip Code 2155 E. GoDaddy Way Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Web Services
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.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 14/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 0000000000
4 Date 05/11/2026	5 Payee name GoDaddy	
6 Amount (\$) \$3.19	7 Payee address; City; State; Zip Code 2155 E. GoDaddy Way Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Web Services
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 06/11/2026	Candidate/Officeholder name Payee name GoDaddy	
Amount (\$) \$3.19	Office sought Office held Payee address; City; State; Zip Code 2155 E. GoDaddy Way Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Web Services
Complete ONLY if direct expenditure to benefit C/OH		
Date 06/23/2026	Candidate/Officeholder name Payee name HP	
Amount (\$) \$36.78	Office sought Office held Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
Complete ONLY 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.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 15/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 05289425
4 Date 03/27/2026	5 Payee name HP	
6 Amount (\$) \$36.78	7 Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/24/2026	Candidate/Officeholder name	Office sought Office held
Payee name HP		
Amount (\$) \$36.78	Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2026	Candidate/Officeholder name	Office sought Office held
Payee name HP		
Amount (\$) \$36.78	Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/22/2026	Candidate/Officeholder name	Office sought Office held
Payee name HP		
Amount (\$) \$36.78	Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
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.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 16/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 00000125
4 Date 06/22/2026	5 Payee name HP	
6 Amount (\$) \$36.78	7 Payee address; City; State; Zip Code 3001 Dallas Pkwy Frisco, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/12/2026	Candidate/Officeholder name Payee name Precision Reprographics	Office sought Office held
Amount (\$) \$1,986.07	Payee address; City; State; Zip Code 3102 Benton St Garland, TX 75042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/13/2026	Candidate/Officeholder name Payee name Precision Reprographics	Office sought Office held
Amount (\$) \$167.79	Payee address; City; State; Zip Code 3102 Benton St Garland, TX 75042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Flyers
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.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 17/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 0000125
4 Date 05/08/2026	5 Payee name Republican Party of Texas	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 807 Brazos St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/29/2026	Candidate/Officeholder name TicketLeap.com	
Amount (\$) \$22.07	Office sought 1314 Summerhill Dr Malvern, PA 19355	
Office held		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Event Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/16/2026	Candidate/Officeholder name White Hat Institute	
Amount (\$) \$500.00	Office sought 515 E Border St Arlington, TX 76010-7402	
Office held		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Legal Services
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.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 18/18	2 FILER NAME Wernick, Barry (Mr.)	3 Filer ID (Ethics Commission Filers) 000001225
4 Date 06/30/2026	5 Payee name WinRed Technical Services LLC	
6 Amount (\$) \$8.80	7 Payee address; City; State; Zip Code 1776 WILSON BLVD Suite 530 ARLINGTON, VA 22219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought		
Office held		