

**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)  
~~00000000~~

2 Total pages filed:  
8

**FILED**  
2026 MAR 12 AM 11:59  
OFFICE USE ONLY  
Date Received  
Date Hand Delivered or Date Postmarked  
Receipt # Amount  
Date Processed  
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
Mr. Barry

NICKNAME LAST SUFFIX  
Wernick

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE  
13770 Noel Rd.  
#800646  
Dallas, TX 75380

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
Mr. Barry

NICKNAME LAST SUFFIX  
Wernick

6 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
6544 Dykes Way Dallas TX 75230

(Residence or Business)

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  
01/23/2026 THROUGH 02/21/2026

10 ELECTION

ELECTION DATE Month Day Year ELECTION TYPE  
03/03/2026  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

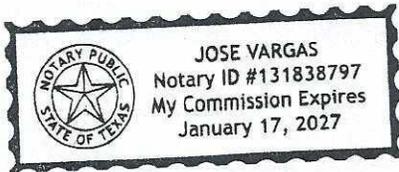
2 of 8

13 C / OH NAME Wernick, Barry (Mr.)	14 Filer ID <del>XXXXXXXXXX</del> (Ethics Commission Filers)
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15 NOTICE FROM POLITICAL COMMITTEE(S)  <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.	
	<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME 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)	\$ 1,295.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 289.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,417.60
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.

Barry Wernick  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Barry Wernick, this the 12<sup>th</sup> day of March, 2026, to certify which, witness my hand and seal of office.

Jose Vargas  
Signature of officer administering

Jose Vargas  
Printed name of officer administering

Notary Public  
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)

~~XXXXXXXXXX~~

**20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE

SUBTOTAL AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,295.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	289.48
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 A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 1/2 Rpt: 4/8

2 FILER NAME

Wernick, Barry (Mr.)

3 Filer ID (Ethics Commission Filers)  
~~XXXXXXXXXX~~

4 Date  
02/17/2026

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Blumin, Carolee

7 Amount of Contribution (\$) \$500.00

6 Contributor address; City; State; Zip Code  
8240 Manderville Lane  
Dallas, TX 75231

8 Principal occupation / Job title (See Instructions)  
Retired

9 Employer (See Instructions)  
Retired

Date  
02/17/2026

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Canion, Judith

Amount of Contribution (\$) \$75.00

Contributor address; City; State; Zip Code  
9715 Windham Dr  
Dallas, TX 75243

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
02/17/2026

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

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
6507 MEADOW RD  
Dallas, TX 75230

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
02/18/2026

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Fratia, Margarita

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
4226 Wycliff Ave  
Apt 7  
Dallas, TX 75219

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
02/17/2026

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Frye, Angela

Amount of Contribution (\$) \$500.00

Contributor address; City; State; Zip Code  
56 FAWN WOOD DR  
Dallas, TX 75248

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: 2/2 Rpt: 5/8

2 FILER NAME

Wernick, Barry (Mr.)

3 Filer ID (Ethics Commission Filers)

~~XXXXXXXXXX~~

4 Date

02/19/2026

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Stairs, Cynthia

7 Amount of Contribution (\$)

\$20.00

6 Contributor address; City; State; Zip Code

1201 N Cedar Hill Rd

Cedar Hill, TX 75104

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

# 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: 1/3 Rpt: 6/8	<b>2</b> FILER NAME Wernick, Barry (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) <del>0000000000</del>
<b>4</b> Date 02/19/2026	<b>5</b> Payee name Anedot	
<b>6</b> Amount (\$) \$1.10	<b>7</b> Payee address; City; State; Zip Code 1340 Poydras Street  New Orleans, LA 70112	
<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 Processing fees
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/26/2026	Payee name Constant Contact	
Amount (\$) \$184.41	Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
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 Email Service
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/19/2026	Payee name Constant Contact	
Amount (\$) \$2.41	Payee address; City; State; Zip Code 1601 Trapelo Road  Waltham, MA 02451	
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 Email Service
	<b>9</b> 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: 2/3 Rpt: 7/8	<b>2</b> FILER NAME Wernick, Barry (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) <del>999999</del>
<b>4</b> Date 02/06/2026	<b>5</b> Payee name Dallas County Treasurer	
<b>6</b> Amount (\$) \$28.10	<b>7</b> Payee address; City; State; Zip Code 509 Main Street  Dallas, TX 75202	
<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 Fees
	<b>9</b> Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 01/29/2026	Payee name Dallas County Young Republicans	
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO BOX 600256  Dallas, TX 75201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 Donation
	<b>9</b> Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/17/2026	Payee name George Allen Garage	
Amount (\$) \$3.00	Payee address; City; State; Zip Code 601 Commerce St  Dallas, TX 75202	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Parking	<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 County Clerk
	<b>9</b> 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.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 8/8	<b>2</b> FILER NAME Wernick, Barry (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) <del>XXXXXXXXXX</del>
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<b>4</b> Date 02/11/2026	<b>5</b> Payee name GoDaddy
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<b>6</b> Amount (\$) \$3.19	<b>7</b> Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284
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<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 Web Services
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/13/2026	Payee name GoDaddy
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Amount (\$) \$36.57	Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284
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<b>PURPOSE OF EXPENDITURE</b>	<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 Web Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/06/2026	Payee name Paymentus
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Amount (\$) \$5.70	Payee address; City; State; Zip Code 13024 Ballantyne Corporate Place Suite 400 Charlotte, NC 28277
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<b>PURPOSE OF EXPENDITURE</b>	<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 Processing Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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