

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

|   |  |   |  |
|---|--|---|--|
| <b>The JC/OH Instruction Guide explains how to complete this form.</b>                              |  | <b>1 Filer ID</b><br>(Ethics Commission Filers)<br>00089257 | <b>2 Total pages filed:</b><br><br>32  |
| <b>3 CANDIDATE / OFFICEHOLDER NAME</b>  | MS / MRS / MR FIRST MI<br>Jeneba H.  |   | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>01/15/2026   |
|   | NICKNAME LAST SUFFIX<br>Barrie   |   |  |
| <b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b><br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>P.O. Box 358<br><br>Rowlett, TX 75030   |   | Date Hand-delivered or Date Postmarked   |
|   |  |   | Receipt # Amount   |
|   |  |   | Date Processed   |
|   |  |   | Date Imaged  |
| <b>5 CAMPAIGN TREASURER NAME</b>  | MS / MRS / MR FIRST MI<br>Mr. Charles  |   |  |
|   | NICKNAME LAST SUFFIX<br>Bleil  |   |  |
| <b>6 CAMPAIGN TREASURER ADDRESS</b><br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>601 Haines Ave.<br><br>Dallas, TX 75208   |   |  |
|   |  |   |  |
| <b>7 CAMPAIGN TREASURER PHONE</b>   | AREA CODE PHONE NUMBER EXTENSION<br>(214) 280-0860   |   |  |
| <b>8 REPORT TYPE</b>  | <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded modified reporting limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH-FR)</div> </div> |   |  |
| <b>9 PERIOD COVERED</b>   | Month Day Year      Month Day Year<br>07/01/2025      THROUGH      12/31/2025  |   |  |
| <b>10 ELECTION</b>  | ELECTION DATE<br>Month Day Year<br>03/03/2026  |   | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |
|   |  |   |  |
| <b>11 OFFICE</b>  | OFFICE HELD (if any)   |   | <b>12 OFFICE SOUGHT (if known)</b><br>Criminal District Court Judge District 282nd Court   |

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 32

|   |   |
|---|---|
| <b>13 C / OH NAME</b> Barrie, Jeneba H. | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00089257 |
|---|---|

|   |  |                          |
|---|--|--------------------------|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><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. |                          |
|   | <b>COMMITTEE TYPE</b>  | <b>COMMITTEE NAME</b>    |
|   | <input type="checkbox"/> GENERAL   | <b>COMMITTEE ADDRESS</b> |
|   | <input type="checkbox"/> SPECIFIC  |                          |
|   | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>   |                          |
|   | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  |                          |

|                                |  |    |           |
|--------------------------------|--|----|-----------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00      |
|                                | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                       | \$ | 22,286.09 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   | \$ | 0.00      |
|                                | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   | \$ | 18,585.26 |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 11,435.00 |
| <b>OUTSTANDING LOAN TOTALS</b> | 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.

\_\_\_\_\_  
Jeneba H. Barrie  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

|  |   |  |
|--|---|--|
| _____<br>Signature of officer administering oath | _____<br>Printed name of officer administering oath | _____<br>Title of officer administering oath |
|--|---|--|

# SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

3 of 32

|  |   |                                |                            |
|--|---|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Barrie, Jeneba H.        |   | <b>19 Filer ID</b><br>00089257 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |   |                                | SUBTOTAL AMOUNT            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)             | \$                             | 14,569.31                  |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$                             | 7,716.78                   |
| 3.   | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)                                    | \$                             |                            |
| 4.   | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)  | \$                             |                            |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$                             | 16,286.77                  |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                             |                            |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$                             |                            |
| 8.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                           | \$                             | 2,298.49                   |
| 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 A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 1/15 Rpt: 4/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257    |
| <b>4</b> Date<br>09/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Abbot, Ben<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>TX               | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00        |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                            |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>10/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Akwuruoha Law Firm, LLC<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75247      | Amount of Contribution (\$)<br><br>\$150.00                 |
| Contributor's Principal Occupation                                  |   | 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>08/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ashmore & Ashmore Law Firm<br><hr/> Contributor address; City; State; Zip Code<br><br>Rockwall, TX 75087 | Amount of Contribution (\$)<br><br>\$250.00                 |
| Contributor's Principal Occupation                                  |   | 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)           |   |   |
|   |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 2/15 Rpt: 5/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257    |
| <b>4</b> Date<br>12/24/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>BLWLegal Group<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75204 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00        |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                            |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>07/09/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Beasley, Arlene<br><hr/> Contributor address; City; State; Zip Code<br><br>Rowlett, TX 75088                 | Amount of Contribution (\$)<br><br>\$10.00                  |
| Contributor's Principal Occupation<br>RET.                          |   | Contributor's Job Title<br>RET.                             |
| Contributor's employer/law firm<br>RET.                             |   | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)           |   |   |
| Date<br>12/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bellman, Mark (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>AUSTIN, TX 78702              | Amount of Contribution (\$)<br><br>\$100.00                 |
| Contributor's Principal Occupation<br>UNITED HEALTHCARE             |   | Contributor's Job Title<br>RVP OF SMALL BUSINESS            |
| 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)           |   |   |
|   |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                  |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 3/15 Rpt: 6/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257    |
| <b>4</b> Date<br>11/14/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bonilla, Ricardo (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75040 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Contributor's Principal Occupation<br>Attorney                           |   | <b>9</b> Contributor's Job Title<br>Principal Attorney      |
| <b>10</b> Contributor's employer/law firm   |   | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any)               |   |   |
| Date<br>10/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>CHINWE OKEKE, CHINWE (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>TX                            | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor's Principal Occupation  |   | 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>07/13/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Clark, Sarah (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75244                      | Amount of Contribution (\$)<br><br>\$250.00                 |
| Contributor's Principal Occupation<br>Attorney                                    |   | Contributor's Job Title<br>Attorney                         |
| Contributor's employer/law firm<br>Macdonald Devin Madden Kenefick & Harris, P.C. |   | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)                         |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 4/15 Rpt: 7/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257    |
| <b>4</b> Date<br>12/28/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dawes, Sia<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Palmdale, CA 93551 | <b>7</b> Amount of Contribution (\$)<br><br>\$150.00        |
| <b>8</b> Contributor's Principal Occupation<br>teacher              |   | <b>9</b> Contributor's Job Title                            |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)         |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Diana Bando LLC<br><hr/> Contributor address; City; State; Zip Code<br><br>TX                              | Amount of Contribution (\$)<br><br>\$200.00                 |
| Contributor's Principal Occupation                                  |   | 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>08/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>EKEH LAW FIRM<br><hr/> Contributor address; City; State; Zip Code<br><br>DALLAS, TX 75252                  | Amount of Contribution (\$)<br><br>\$500.00                 |
| Contributor's Principal Occupation                                  |   | 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)           |   |   |
|   |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 5/15 Rpt: 8/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                                       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257    |
| <b>4</b> Date<br>08/14/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Garcia, Salvador (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75207 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00        |
| <b>8</b> Contributor's Principal Occupation<br>Attorney                        |   | <b>9</b> Contributor's Job Title<br>APD                     |
| <b>10</b> Contributor's employer/law firm<br>Dallas Co. PD Office              |   | <b>11</b> Law firm of contributor's spouse (if any)<br>N/A  |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any)<br>N/A N/A |   |   |
| Date<br>10/14/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Glover, Emmanuel<br><hr/> Contributor address; City; State; Zip Code<br><br>TX                                       | Amount of Contribution (\$)<br><br>\$250.00                 |
| Contributor's Principal Occupation   |   | 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>08/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gravely, Jennifer<br><hr/> Contributor address; City; State; Zip Code<br><br>Forth Worth, TX 76102                   | Amount of Contribution (\$)<br><br>\$99.00                  |
| Contributor's Principal Occupation<br>Attorney                                 |   | Contributor's Job Title<br>Attorney                         |
| Contributor's employer/law firm<br>GM Financial                                |   | Law firm of contributor's spouse (if any)                   |
| If contributor is a child, law firm of parent(s) (if any)                      |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

|   |   |  |
|---|---|--|
| The Instruction Guide explains how to complete this form.             |   | 1 Total pages Schedule A(J)1:<br>Sch: 6/15 Rpt: 9/32 |
| 2 FILER NAME<br>Barrie, Jeneba H.                                     |   | 3 Filer ID (Ethics Commission Filers)<br>00089257    |
| 4 Date<br>11/04/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Haffner, Julian<br>6 Contributor address; City; State; Zip Code<br><br>San Antonio, TX 75217 | 7 Amount of Contribution (\$)<br><br>\$50.00         |
| 8 Contributor's Principal Occupation<br>Attorney                      |   | 9 Contributor's Job Title<br>Attorney                |
| 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>12/09/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Harrelson, Jr., Lloyd<br>Contributor address; City; State; Zip Code<br><br>Dallas, TX 75204    | Amount of Contribution (\$)<br><br>\$300.00          |
| Contributor's Principal Occupation<br>Attorney                        |   | Contributor's Job Title<br>Attorney                  |
| Contributor's employer/law firm<br>Law Office of Lloyd Harrelson, Jr. |   | Law firm of contributor's spouse (if any)            |
| If contributor is a child, law firm of parent(s) (if any)             |   |  |
| Date<br>07/25/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hindieh Law<br>Contributor address; City; State; Zip Code<br><br>Dallas, TX 75208              | Amount of Contribution (\$)<br><br>\$412.41          |
| Contributor's Principal Occupation                                    |   | 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)             |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 7/15 Rpt: 10/32                               |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257                                   |
| <b>4</b> Date<br>10/17/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jackson, Patrick<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Rowlett, TX 75089  | <b>7</b> Amount of Contribution (\$)<br><br><div style="text-align: right;">\$150.00</div> |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title   |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)  |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |  |
| Date<br>10/12/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kenney, LaVerne<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Hill, TX 75104                  | Amount of Contribution (\$)<br><br><div style="text-align: right;">\$5.00</div>            |
| Contributor's Principal Occupation<br>ON FMLA                       |   | 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>10/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>LAW OFFICE OF CHARLES U. MADUKA PLLC<br><hr/> Contributor address; City; State; Zip Code<br><br>DALLAS, TX 75201 | Amount of Contribution (\$)<br><br><div style="text-align: right;">\$1,000.00</div>        |
| Contributor's Principal Occupation                                  |   | 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)           |   |  |
|   |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 8/15 Rpt: 11/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257     |
| <b>4</b> Date<br>11/04/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lassiter, Lawrence (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dalals, TX | <b>7</b> Amount of Contribution (\$)<br><br>\$103.48         |
| <b>8</b> Contributor's Principal Occupation<br>Attorney             |   | <b>9</b> Contributor's Job Title<br>Attorney                 |
| <b>10</b> Contributor's employer/law firm<br>Miller Weisbrod Olesky |   | <b>11</b> Law firm of contributor's spouse (if any)          |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |  |
| Date<br>10/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Alan D. Perez<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75220          | Amount of Contribution (\$)<br><br>\$500.00                  |
| Contributor's Principal Occupation                                  |   | 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>07/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Danielle Uher<br><hr/> Contributor address; City; State; Zip Code<br><br>Rowlett, TX 75088         | Amount of Contribution (\$)<br><br>\$50.00                   |
| Contributor's Principal Occupation                                  |   | 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)           |   |  |
|   |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 9/15 Rpt: 12/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257     |
| <b>4</b> Date<br>08/02/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Ebony M. Turner<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75202 | <b>7</b> Amount of Contribution (\$)<br><br>\$51.99          |
| <b>8</b> Contributor's Principal Occupation                         |  | <b>9</b> Contributor's Job Title                             |
| <b>10</b> Contributor's employer/law firm                           |  | <b>11</b> Law firm of contributor's spouse (if any)          |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |  |  |
| Date<br>09/11/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Kenneth Onyenah<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75247                   | Amount of Contribution (\$)<br><br>\$150.00                  |
| Contributor's Principal Occupation                                  |  | 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>09/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law Office of Olegario Estrada, P.C.<br><hr/> Contributor address; City; State; Zip Code<br><br>DALLAS, TX 75211            | Amount of Contribution (\$)<br><br>\$500.00                  |
| Contributor's Principal Occupation                                  |  | 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)           |  |  |
|   |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

|  |   |  |
|--|---|--|
| The Instruction Guide explains how to complete this form.    |   | 1 Total pages Schedule A(J)1:<br>Sch: 10/15 Rpt: 13/32 |
| 2 FILER NAME<br>Barrie, Jeneba H.                            |   | 3 Filer ID (Ethics Commission Filers)<br>00089257      |
| 4 Date<br>09/16/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law office of Ramon Ricon<br>6 Contributor address; City; State; Zip Code<br><br>Dallas, TX 75206  | 7 Amount of Contribution (\$)<br><br>\$250.00          |
| 8 Contributor's Principal Occupation                         |   | 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>09/30/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Law office of Tom C. Barron<br>Contributor address; City; State; Zip Code<br><br>Dallas, TX 75201    | Amount of Contribution (\$)<br><br>\$250.00            |
| Contributor's Principal Occupation                           |   | 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>07/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Macauley, Molley (Mrs.)<br>Contributor address; City; State; Zip Code<br><br>Moreno Valley, CA 92557 | Amount of Contribution (\$)<br><br>\$600.00            |
| Contributor's Principal Occupation<br>Educator               |   | Contributor's Job Title<br>Principal                   |
| Contributor's employer/law firm<br>Moreno Valley ISD         |   | Law firm of contributor's spouse (if any)              |
| If contributor is a child, law firm of parent(s) (if any)    |   |  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 11/15 Rpt: 14/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257      |
| <b>4</b> Date<br>12/27/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McClinton, James<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>TX | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00          |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                              |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>10/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ndomahina, Reuben (Dr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>TX 75043      | Amount of Contribution (\$)<br><br>\$50.00                    |
| Contributor's Principal Occupation<br>Doctor                        |   | 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>10/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>OKIKE, DORIS SAMBO<br><hr/> Contributor address; City; State; Zip Code<br><br>TX                 | Amount of Contribution (\$)<br><br>\$200.00                   |
| Contributor's Principal Occupation                                  |   | Contributor's Job Title<br>RETIRED                            |
| 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)           |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

|  |  |  |
|--|--|--|
| The Instruction Guide explains how to complete this form.    |  | 1 Total pages Schedule A(J)1:<br>Sch: 12/15 Rpt: 15/32 |
| 2 FILER NAME<br>Barrie, Jeneba H.                            |  | 3 Filer ID (Ethics Commission Filers)<br>00089257      |
| 4 Date<br>10/31/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ogueri & Associates, P.C.<br>6 Contributor address; City; State; Zip Code<br><br>Dallas, TX 75243 | 7 Amount of Contribution (\$)<br><br>\$250.00          |
| 8 Contributor's Principal Occupation                         |  | 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>09/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Olivarez, Javier<br>Contributor address; City; State; Zip Code<br><br>TX                            | Amount of Contribution (\$)<br><br>\$26.25             |
| Contributor's Principal Occupation                           |  | 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>08/21/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Reyna, David<br>Contributor address; City; State; Zip Code<br><br>Arlington, TX                     | Amount of Contribution (\$)<br><br>\$500.00            |
| Contributor's Principal Occupation<br>Attorney               |  | Contributor's Job Title<br>Attorney                    |
| 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)    |  |  |
|  |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

|  |  |  |
|--|--|--|
| The Instruction Guide explains how to complete this form.    |  | 1 Total pages Schedule A(J)1:<br>Sch: 13/15 Rpt: 16/32 |
| 2 FILER NAME<br>Barrie, Jeneba H.                            |  | 3 Filer ID (Ethics Commission Filers)<br>00089257      |
| 4 Date<br>08/01/2025   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sellers Law Firm<br>6 Contributor address; City; State; Zip Code<br><br>Forth Worth, TX 76102 | 7 Amount of Contribution (\$)<br><br>\$51.99           |
| 8 Contributor's Principal Occupation                         |  | 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>10/20/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shamieh Law<br>Contributor address; City; State; Zip Code<br><br>TX 75204                       | Amount of Contribution (\$)<br><br>\$500.00            |
| Contributor's Principal Occupation                           |  | 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>07/07/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Simes, David (Mr.)<br>Contributor address; City; State; Zip Code<br><br>FLOWER MOUND, TX 75022  | Amount of Contribution (\$)<br><br>\$1,175.00          |
| Contributor's Principal Occupation<br>Entrepreneur           |  | Contributor's Job Title<br>Owner                       |
| Contributor's employer/law firm<br>Self                      |  | Law firm of contributor's spouse (if any)              |
| If contributor is a child, law firm of parent(s) (if any)    |  |  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 14/15 Rpt: 17/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257      |
| <b>4</b> Date<br>08/17/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Skruch, Brian (Mr.)<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Francisco, CA 94107 | <b>7</b> Amount of Contribution (\$)<br><br>\$26.25           |
| <b>8</b> Contributor's Principal Occupation<br>Engineer             |   | <b>9</b> Contributor's Job Title<br>Sales engineer            |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>07/25/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Spangler Law<br><hr/> Contributor address; City; State; Zip Code<br><br>DALLAS, TX 75201                                 | Amount of Contribution (\$)<br><br>\$257.94                   |
| Contributor's Principal Occupation                                  |   | 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>10/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>The Barrie Law Firm<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75240                          | Amount of Contribution (\$)<br><br>\$2,500.00                 |
| Contributor's Principal Occupation                                  |   | 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)           |   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A(J)1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A(J)1:<br>Sch: 15/15 Rpt: 18/32 |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.                            |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257      |
| <b>4</b> Date<br>10/14/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>The Farmer Law Group<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>DALLAS, TX 75202 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00          |
| <b>8</b> Contributor's Principal Occupation                         |   | <b>9</b> Contributor's Job Title                              |
| <b>10</b> Contributor's employer/law firm                           |   | <b>11</b> Law firm of contributor's spouse (if any)           |
| <b>12</b> If contributor is a child, law firm of parent(s) (if any) |   |   |
| Date<br>09/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>The Tyson Law Firm<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75224                     | Amount of Contribution (\$)<br><br>\$300.00                   |
| Contributor's Principal Occupation                                  |   | 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>07/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Thomas, Jennifer<br><hr/> Contributor address; City; State; Zip Code<br><br>Southlake, TX 76092                    | Amount of Contribution (\$)<br><br>\$100.00                   |
| Contributor's Principal Occupation<br>Attorney                      |   | Contributor's Job Title<br>Attorney                           |
| Contributor's employer/law firm<br>Phelps Dunbar LLP                |   | Law firm of contributor's spouse (if any)                     |
| 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:<br>Sch: 1/3 Rpt: 19/32                                |  |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.   |   |  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257                                |  |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   |  |   | <b>\$</b>   |  |
| <b>5</b> Date<br>11/10/2025  | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>411 Agency<br><hr/> <b>7</b> Contributor address; City; State; Zip Code<br><br>Forney, TX 75126 |  | <b>8</b> Amount of contribution (\$)<br>\$145.00                      | <b>9</b> In-kind contribution description<br>30% discount on banner artwork and install |  |
| <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) |   |  |   |   |  |
| Date<br>09/18/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Bleil, Charles (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75208         |  | Amount of contribution (\$)<br>\$3,881.84                             | In-kind contribution description<br>Campaign car wrap and pole replacement              |  |
| <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)<br>ATTY                          |   |  | Contributor's job title (FOR JUDICIAL) (See instructions)<br>Attorney |   |  |
| 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)           |   |  |   |   |  |
| Date<br>09/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>EV Designs<br><hr/> Contributor address; City; State; Zip Code<br><br>Grand Prairie, TX 75050            |  | Amount of contribution (\$)<br>\$180.00                               | In-kind contribution description<br>6 White Pressed Polos                               |  |
| <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)           |   |  |   |   |  |

# 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:<br>Sch: 2/3 Rpt: 20/32            |   |
| <b>2</b> FILER NAME<br>Barrie, Jeneba H.   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257            |   |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   | <b>\$</b>   |   |
| <b>5</b> Date<br>08/07/2025  | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Precision Reprographics<br><hr/> <b>7</b> Contributor address; City; State; Zip Code<br><br>Garland, TX 75042 | <b>8</b> Amount of contribution (\$)<br>\$69.94                     | <b>9</b> In-kind contribution description<br>20% discount on updated banner and waiver of design fee<br><br><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) |   |   |   |
| Date<br>07/02/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Printed Union<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75247                              | Amount of contribution (\$)<br>\$240.00                             | In-kind contribution description<br>Campaign business/push cards<br><br><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)           |   |   |   |
| Date<br>09/18/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>SigmaGrafix<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78727                                | Amount of contribution (\$)<br>\$200.00                             | In-kind contribution description<br>Wrap removal<br><br><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)           |   |   |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

|   |   |   |   |
|---|---|---|---|
| The Instruction Guide explains how to complete this form.                   |   | 1 Total pages Schedule A2:<br>Sch: 3/3 Rpt: 21/32                               |   |
| 2 FILER NAME<br>Barrie, Jeneba H.   |   | 3 Filer ID (Ethics Commission Filers)<br>00089257                               |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   | \$  |   |
| 5 Date<br>11/01/2025  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Siren Consulting | 8 Amount of contribution (\$)<br>\$3,000.00                                     | 9 In-kind contribution description<br>In-Kind Campaign consultation for November & December |
| 7 Contributor address; City; State; Zip Code<br><br>TX                      |   | <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)                        |   | 13 Contributor's job title (FOR JUDICIAL) (See instructions)                    |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |   | 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) |   |   |   |
|   |   |   |   |

# 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:<br>Sch: 1/8 Rpt: 22/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257   |
| <b>4</b> Date<br>07/16/2025   | <b>5</b> Payee name<br>Councilmember  |  |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>300 W Main Street, TX<br><br>Grand Prairie, TX 75050 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Councilman Ezeonu's back to school supply drive bronze sponsorship |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>12/03/2025  | Payee name<br>Dallas County Democratic Party  |  |
| Amount (\$)<br>\$2,500.00   | Payee address; City; State; Zip Code<br>1414 N Washington<br><br>Dallas, TX                           |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Filing Fee   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/06/2025  | Payee name<br>Dallas Young Dems   |  |
| Amount (\$)<br>\$29.00  | Payee address; City; State; Zip Code<br><br>Dallas, TX  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Membership                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership expense   |
| 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:<br>Sch: 2/8 Rpt: 23/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257  |
| <b>4</b> Date<br>11/21/2025   | <b>5</b> Payee name<br>Double Diamonds Charity Foundation   |   |
| <b>6</b> Amount (\$)<br>\$125.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>5495 Belt Line Rd.,<br>Ste., 200<br>Dallas, TX 75254         |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Quarter page Ad for Cir. Ex. Leadership Award |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/21/2025  | Payee name<br>ELITE NEWS  |   |
| Amount (\$)<br>\$1,338.00   | Payee address; City; State; Zip Code<br>3155 S Lancaster Rd ste.240, Dallas, TX 75216<br><br>DALLAS, TX 75216 |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>AD space from Sept 2025-March 2025            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/02/2025  | Payee name<br>EV Designs  |   |
| Amount (\$)<br>\$779.40   | Payee address; City; State; Zip Code<br>806 N Beltline Road<br><br>Grand Prairie, TX 75050                    |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>6 Embroidered Pieces                          |
| 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:<br>Sch: 3/8 Rpt: 24/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257   |
| <b>4</b> Date<br>11/26/2025   | <b>5</b> Payee name<br>FEDDS  |  |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address; City; State; Zip Code<br><br>Old East Dallas, TX  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>9th Annual FEDDS holiday party sponsorship |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/07/2025  | Payee name<br>Lambda Legal  |  |
| Amount (\$)<br>\$300.00   | Payee address; City; State; Zip Code<br>3500 Oak Lawn Avenue, Suite 500 Dallas, TX 75219-6722<br><br>Dallas, TX 75219 |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Gala Tickets                               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/29/2025  | Payee name<br>Mail House inc.   |  |
| Amount (\$)<br>\$203.18   | Payee address; City; State; Zip Code<br>2730 n stemmons fwy<br>#740<br>Dallas, TX 75207                               |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign push cards                        |
| 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:<br>Sch: 4/8 Rpt: 25/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257  |
| <b>4</b> Date<br>12/19/2025   | <b>5</b> Payee name<br>McKee, Kenneth   |   |
| <b>6</b> Amount (\$)<br>\$260.00                                    | <b>7</b> Payee address; City; State; Zip Code<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b><br>Cedar Hill, TX 75104 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment for literature drops/distribution |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/06/2025  | Payee name<br>NAACP 6169  |   |
| Amount (\$)<br>\$30.00  | Payee address; City; State; Zip Code<br>5150 Mark Trail Way<br><br>Dallas, TX 75232                                   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership Fees                           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>07/25/2025  | Payee name<br>PAYPAL  |   |
| Amount (\$)<br>\$45.30  | Payee address; City; State; Zip Code<br>2211 N 1st St,<br><br>San Jose, CA 95131                                      |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>FEE FROM DONATION                         |
| 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:<br>Sch: 5/8 Rpt: 26/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257   |
| <b>4</b> Date<br>07/16/2025   | <b>5</b> Payee name<br>Siren Consulting LLC   |  |
| <b>6</b> Amount (\$)<br>\$1,500.00                                  | <b>7</b> Payee address; City; State; Zip Code<br><br>TX                                       |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Expenses for campaign consultation |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>08/01/2025  | Payee name<br>Siren Consulting LLC  |  |
| Amount (\$)<br>\$1,500.00   | Payee address; City; State; Zip Code<br><br>TX  |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Expenses for campaign consultation        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/01/2025  | Payee name<br>Siren Consulting LLC  |  |
| Amount (\$)<br>\$1,500.00   | Payee address; City; State; Zip Code<br><br>TX  |  |
| PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign consulting                       |
| 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:<br>Sch: 6/8 Rpt: 27/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257  |
| <b>4</b> Date<br>10/21/2025   | <b>5</b> Payee name<br>Siren Consulting LLC   |   |
| <b>6</b> Amount (\$)<br>\$350.00                                    | <b>7</b> Payee address; City; State; Zip Code<br><br>TX   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Literature drop               |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>08/31/2025  | Payee name<br>Stonewall Democrats   |   |
| Amount (\$)<br>\$166.00   | Payee address; City; State; Zip Code<br><br>Dallas, TX  |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Drag out the vote sponsorship |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/21/2025  | Payee name<br>Texas Democratic Party  |   |
| Amount (\$)<br>\$2,697.00   | Payee address; City; State; Zip Code<br>314 Highland Blvd<br><br>AUSTIN, TX 78752                           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>VAN ACCESS                    |
| 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:<br>Sch: 7/8 Rpt: 28/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257   |
| <b>4</b> Date<br>11/30/2025   | <b>5</b> Payee name<br>The 23rd Senatorial District Tejano Democrats                           |  |
| <b>6</b> Amount (\$)<br>\$25.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>PO BOX 226534<br><br>Dallas, TX 75222         |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Membership Fee                         |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/26/2025  | Payee name<br>The 23rd Senatorial District Tejano Democrats                                    |  |
| Amount (\$)<br>\$50.00  | Payee address; City; State; Zip Code<br>PO BOX 226534<br><br>Dallas, TX 75222                  |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Tejano Dems Holiday Soiree Sponsorship |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/19/2025  | Payee name<br>The 411 Agency   |  |
| Amount (\$)<br>\$325.94   | Payee address; City; State; Zip Code<br>12021 Currency Cir<br><br>Forney, TX 75126             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Banner design and printing             |
| 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:<br>Sch: 8/8 Rpt: 29/32            | <b>2</b> FILER NAME<br>Barrie, Jeneba H.   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257   |
| <b>4</b> Date<br>10/10/2025   | <b>5</b> Payee name<br>Tony Grimes Photography   |  |
| <b>6</b> Amount (\$)<br>\$175.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>PO BOX<br>166176<br>IRVING, TX 75016          |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PHOTOGRAPHY SERVICE                  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>11/05/2025  | Payee name<br>Trivix Media   |  |
| Amount (\$)<br>\$1,000.00   | Payee address; City; State; Zip Code<br><br>Dallas, TX   |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Ads                          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/14/2025  | Payee name<br>Winsome Prime  |  |
| Amount (\$)<br>\$1,037.95   | Payee address; City; State; Zip Code<br>331 Singleton Blvd<br><br>DALLAS, TX 75212             |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Food & drinks for campaign reception |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F4:<br>Sch: 1/3 Rpt: 30/32   | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  |                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257                              |
| <b>4</b> CREDIT CARD ISSUER  | Name of financial institution<br>AMEX   |                                  | <b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$              |
| <b>6</b> PAYMENT   | (a) Amount Charged<br>\$694.78  | (b) Date of Charge<br>12/24/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>7</b> PAYEE   | (a) Payee name<br>FACEBOOK  |                                  | (b) Payee address; City, State, Zip Code<br>TX  |
| <b>8</b> PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense  |                                  | (b) Description<br>Digital Ads  |
|  | (c) <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 Office sought Office held   |                                  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$200.00  | (b) Date of Charge<br>08/06/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>PAYEE</b>   | (a) Payee name<br>DCDP  |                                  | (b) Payee address; City, State, Zip Code<br>1414 N WASHINGTON AVE<br>DALLAS, TX 75204 |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense  |                                  | (b) Description<br>2025 Labor Day Candidate Vendor Table                              |
|  | (c) <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 Office sought Office held   |                                  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$86.33   | (b) Date of Charge<br>08/14/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>PAYEE</b>   | (a) Payee name<br>PRECISIO REPROGRAPHICS  |                                  | (b) Payee address; City, State, Zip Code<br>3102 BENTON ST<br>GARLAND, TX 75042       |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense  |                                  | (b) Description<br>BANNER   |
|  | (c) <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 Office sought Office held   |                                  |   |

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F4:<br>Sch: 2/3 Rpt: 31/32   | <b>2</b> FILER NAME<br>Barrie, Jeneba H.  |                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257                                    |
| <b>4</b> CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | <b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                    |
| <b>6</b> PAYMENT   | (a) Amount Charged<br>\$125.00  | (b) Date of Charge<br>08/06/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>7</b> PAYEE   | (a) Payee name<br>MABA-Dallas   |                                  | (b) Payee address; City, State, Zip Code<br>Dallas, TX                                      |
| <b>8</b> PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Fees   |                                  | (b) Description<br>Membership Fees  |
|  | (c) <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 Office sought Office held   |                                  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$328.13  | (b) Date of Charge<br>10/01/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>PAYEE</b>   | (a) Payee name<br>Winsome Prime   |                                  | (b) Payee address; City, State, Zip Code<br>331 Singleton Blvd<br>DALLAS, TX 75212          |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Event Expense  |                                  | (b) Description<br>Venue deposit for Fall Reception   |
|  | (c) <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 Office sought Office held   |                                  |   |
| <b>PAYMENT</b>   | (a) Amount Charged<br>\$714.25  | (b) Date of Charge<br>10/03/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>PAYEE</b>   | (a) Payee name<br>Mail House inc.   |                                  | (b) Payee address; City, State, Zip Code<br>2730 n stemmons fwy<br>#740<br>Dallas, TX 75207 |
| <b>PURPOSE OF EXPENDITURE</b><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense  |                                  | (b) Description<br>Push cards   |
|  | (c) <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 Office sought Office held   |                                  |   |

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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 F4:<br>Sch: 3/3 Rpt: 32/32  | <b>2</b> FILER NAME<br>Barrie, Jeneba H.   |                                  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00089257                          |
| <b>4</b> CREDIT CARD<br>ISSUER  | Name of financial institution<br>see previous  |                                  | <b>5</b> TOTAL OF UNITEMIZED<br>EXPENDITURES<br>CHARGED TO A CREDIT<br>CARD<br>\$ |
| <b>6</b> PAYMENT  | (a) Amount Charged<br>\$150.00   | (b) Date of Charge<br>10/13/2025 | (c) Date(s) Credit Card Issuer Paid   |
| <b>7</b> PAYEE  | (a) Payee name<br>Alpha Phi Alpha Fraternity   |                                  | (b) Payee address; City, State, Zip Code<br>PO Box<br>150303<br>Dallas, TX 75215  |
| <b>8</b> PURPOSE OF<br>EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political                                 | (a) Category<br>(See Categories listed at the top of this schedule)<br>Advertising Expense |                                  | (b) Description<br>Sponsorship for Black & Gold Scholarship Gala                  |
| (c) <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<br>expenditure to benefit C/OH  | Candidate/Officeholder name Office sought Office held                                      |                                  |   |