

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID (Ethics Commission Filers) 00089437		2 Total pages filed: 17		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME Mrs. Sherri L. Wagner		FIRST MI Sherri L.		Date Received ELECTRONICALLY FILED 01/09/2026	
NICKNAME Wagner		LAST SUFFIX		Date Hand-delivered or Date Postmarked	
4 ORIGINAL REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> Final Report (Attach C/OH-FR)		Receipt # _____ Amount _____	
5 ORIGINAL PERIOD COVERED Month Day Year 07/01/2025		Month Day Year THROUGH 12/31/2025		Date Processed Date Imaged	

6 EXPLANATION OF CORRECTION

I failed to add the outstanding loan to cash on hand in my original filing. The cash on hand line now reflects outstanding loan plus contributions minus campaign expenditures for the reporting period.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mrs. Sherri L. Wagner

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.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**JUDICIAL CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM JC/OH
COVER SHEET PG 1**

The JC/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00089437	2 Total pages filed: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs. Sherri L.			OFFICE USE ONLY
	NICKNAME LAST SUFFIX Wagner			Date Received ELECTRONICALLY FILED 01/09/2026
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2701 Kimbo Rd			Date Hand-delivered or Date Postmarked
	Fort Worth , TX 76111			Receipt # <input type="text"/> Amount <input type="text"/>
				Date Processed <input type="text"/>
				Date Imaged <input type="text"/>
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. James			MI
	NICKNAME LAST SUFFIX JJ Wagner			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 2701 Kimbo Rd Fort Worth , TX 76111			APT / SUITE #; CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (817) 319-5168			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month Day Year THROUGH 12/31/2025
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None Tarrant		12 OFFICE SOUGHT (if known) Criminal District Court Judge, Tarrant Co. District 1	

GO TO PAGE 2

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM JC/OH
COVER SHEET PG 2**

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13 C / OH NAME	Wagner , Sherri L. (Mrs.)		14 Filer ID (Ethics Commission Filers) 00089437												
15 NOTICE FROM POLITICAL COMMITTEE(S)	<p>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.</p> <table border="1"> <tr> <td><input type="checkbox"/> Additional Pages</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td></td> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>			<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME													
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS													
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME													
		COMMITTEE CAMPAIGN TREASURER ADDRESS													
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00												
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 10,803.10												
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00												
	4. TOTAL POLITICAL EXPENDITURES		\$ 3,933.08												
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 26,870.02												
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 20,000.00												
17 AFFIDAVIT															
<p>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.</p>															
<p>Mrs. Sherri L. Wagner _____ Signature of Candidate or Officeholder</p>															
AFFIX NOTARY STAMP / SEAL ABOVE															
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>															
Signature of officer administering oath		Printed name of officer administering oath													
		Title of officer administering oath													

SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME	19 Filer ID (Ethics Commission Filers) 00089437
Wagner , Sherri L. (Mrs.)	
20 SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A(J): MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 10,803.10
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 3,933.08
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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/9 Rpt: 5/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adeniji, Lateph 6 Contributor address; City; State; Zip Code Arlington, TX 76010	7 Amount of Contribution (\$) \$239.70
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Owner
10 Contributor's employer/law firm self employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/14/2025 Contributor address; City; State; Zip Code Arlington, TX 76006		Amount of Contribution (\$) \$239.70
Contributor's Principal Occupation attorney		Contributor's Job Title Owner
Contributor's employer/law firm self employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2025 Contributor address; City; State; Zip Code Crowley, TX 76036		Amount of Contribution (\$) \$191.70
Contributor's Principal Occupation cook		Contributor's Job Title
Contributor's employer/law firm Our Place Restaurant		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: Sch: 2/9 Rpt: 6/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 08/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Mona	7 Amount of Contribution (\$) \$479.70
	6 Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Mike	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code North Richland Hills, TX 76182	
Contributor's Principal Occupation lawyer		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bottom, Renee	Amount of Contribution (\$) \$95.70
	Contributor address; City; State; Zip Code Southlake, TX 76092	
Contributor's Principal Occupation pharmaceuticals		Contributor's Job Title Account Manager
Contributor's employer/law firm Takeda Pharmaceuticals		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: Sch: 3/9 Rpt: 7/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Committee for Public Safety 6 Contributor address; City; State; Zip Code Fort Worth, TX 76102	7 Amount of Contribution (\$) \$5,000.00
	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 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Kenneth Contributor address; City; State; Zip Code Denton, TX 76207	Amount of Contribution (\$) \$47.70
	Contributor's Principal Occupation retired	Contributor's Job Title
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Richard Contributor address; City; State; Zip Code Joshua, TX 76058	Amount of Contribution (\$) \$959.70
	Contributor's Principal Occupation lawyer	Contributor's Job Title retired
Contributor's employer/law firm Richard De Los Santos		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: Sch: 4/9 Rpt: 8/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Richard 6 Contributor address; City; State; Zip Code Joshua, TX 76058	7 Amount of Contribution (\$) \$959.70
8 Contributor's Principal Occupation lawyer		9 Contributor's Job Title retired
10 Contributor's employer/law firm Richard De Los Santos		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/18/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Elsa Contributor address; City; State; Zip Code Fort Worth, TX 76108		Amount of Contribution (\$) \$47.70
Contributor's Principal Occupation Admin Asst		Contributor's Job Title Admin Asst Sr Spec
Contributor's employer/law firm Lockheed Martin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/12/2025		
Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Chris Contributor address; City; State; Zip Code Burleson, TX 76028		Amount of Contribution (\$) \$479.70
Contributor's Principal Occupation mayor		Contributor's Job Title
Contributor's employer/law firm retired		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: Sch: 5/9 Rpt: 9/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallagher, David	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76117	
8 Contributor's Principal Occupation Bondsman		9 Contributor's Job Title Owner
10 Contributor's employer/law firm self employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy	Amount of Contribution (\$) \$18.90
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Contributor's Principal Occupation publishing		Contributor's Job Title Team Leader
Contributor's employer/law firm Thompson Reuters		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy	Amount of Contribution (\$) \$18.90
	Contributor address; City; State; Zip Code Fort Worth, TX 76179	
Contributor's Principal Occupation publishing		Contributor's Job Title Team leader
Contributor's employer/law firm Thomson Reuters		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: Sch: 6/9 Rpt: 10/17	
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437	
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	7 Amount of Contribution (\$) \$18.90	
8 Contributor's Principal Occupation publishing		9 Contributor's Job Title Team Leader	
10 Contributor's employer/law firm Thomson Reuters		11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)			
Date 09/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy Contributor address; City; State; Zip Code Fort Worrth, TX 76179	Amount of Contribution (\$) \$18.90
Contributor's Principal Occupation publishing		Contributor's Job Title Team Leader	
Contributor's employer/law firm Thomson Reuters		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 08/07/2025		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy Contributor address; City; State; Zip Code Fort Worth, TX 76179	Amount of Contribution (\$) \$18.90
Contributor's Principal Occupation publishing		Contributor's Job Title Team Leader	
Contributor's employer/law firm Thomson Reuters		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: Sch: 7/9 Rpt: 11/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 07/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Cyndy	7 Amount of Contribution (\$) \$18.90
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Contributor's Principal Occupation publishing		9 Contributor's Job Title Team Leader
10 Contributor's employer/law firm Thomson Reuters		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layfield, Angela Contributor address; City; State; Zip Code Boyd, TX 76023		Amount of Contribution (\$) \$95.70
Contributor's Principal Occupation Deputy Sheriff		Contributor's Job Title Deputy Sheriff
Contributor's employer/law firm Tarrant County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Kim Contributor address; City; State; Zip Code Lubbock, TX 79424		Amount of Contribution (\$) \$95.70
Contributor's Principal Occupation Counselor		Contributor's Job Title Counselor
Contributor's employer/law firm 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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/9 Rpt: 12/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Michelle	7 Amount of Contribution (\$) \$47.70
	6 Contributor address; City; State; Zip Code Amarillo, TX 79109	
8 Contributor's Principal Occupation medical		9 Contributor's Job Title Physical Therapist
10 Contributor's employer/law firm Centerwell Home Health		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Ryan	Amount of Contribution (\$) \$95.70
	Contributor address; City; State; Zip Code Grand Prairie, TX 75052	
Contributor's Principal Occupation medical		Contributor's Job Title Doctor
Contributor's employer/law firm Prestige		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prickett, Phil	Amount of Contribution (\$) \$28.50
	Contributor address; City; State; Zip Code Cleburne, TX 76033	
Contributor's Principal Occupation law enforcement		Contributor's Job Title Deputy Sheriff
Contributor's employer/law firm Johnson County		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: Sch: 9/9 Rpt: 13/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, Ravivian	7 Amount of Contribution (\$) \$95.70
	6 Contributor address; City; State; Zip Code Evansville, IN 47720	
8 Contributor's Principal Occupation Pharmacy		9 Contributor's Job Title Pharmacy Tech
10 Contributor's employer/law firm CVS		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Charles	Amount of Contribution (\$) \$239.70
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Contributor's Principal Occupation retired		Contributor's Job Title 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)		
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Nick	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Graham, TX 76450	
Contributor's Principal Occupation retired		Contributor's Job Title
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 14/17	2 FILER NAME Wagner , Sherri L. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089437
4 Date 08/25/2025	5 Payee name Amazon	
6 Amount (\$) \$84.33	7 Payee address; City; 410 Terry Avenue North Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table decor.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Cowtown Republican Women	
Amount (\$) \$26.35	Payee address; City; 1501 Western Avenue Fort Worth, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense candidate forum
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Dynamic Graphics	
Amount (\$) \$22.35	Payee address; City; 300 Boone Rd, Ste A9 Burleson, TX 76028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name badge
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 15/17	2 FILER NAME Wagner , Sherri L. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089437
4 Date 11/04/2025	5 Payee name Dynamic Graphics	
6 Amount (\$) \$92.91	7 Payee address; City; 300 Boone Rd, Ste A9 Burleson, TX 76028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign website mngt
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Houchin, Becky	Office sought Office held
Date 08/19/2025	Payee name Houchin, Becky	
Amount (\$) \$65.00	Payee address; City; REDACTED PER 254.0401, ELEC. CODE Breckenridge, TX 76424	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense table decor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Kim, Alex	Office sought Office held
Date 12/15/2025	Payee name Kim, Alex	
Amount (\$) \$100.00	Payee address; City; 2701 Kimbo Rd Fort Worth, TX 76111	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies of opponent petitions.
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 16/17	2 FILER NAME Wagner , Sherri L. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00089437	
4 Date 08/11/2025	5 Payee name Republican Women of Arlington		
6 Amount (\$) \$781.56	7 Payee address; City; P.O. Box 14317 Arlington, TX 76094	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table for event	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/03/2025	Payee name Sorrells, Lee		
Amount (\$) \$260.58	Payee address; City; 2701 Kimbo Rd Fort Worth, TX 76111	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 1/2 table expense at event	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/08/2025	Payee name Tarrant County GOP		
Amount (\$) \$2,500.00	Payee address; City; 201 N Rupert, Ste 117 Fort Worth, TX 76107	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ballot filing fee.	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 17/17
2 FILER NAME Wagner , Sherri L. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00089437
LENDER INFORMATION	4 Name of lender Wagner, Sherri	
	5 Lent address; City; State; Zip Code Fort Worth, TX 76111	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	6 Name of guarantor	
	7 Guarantor address; City; State; Zip Code