



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>12</b>
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR FIRST MI <b>Mr. William</b>		<b>OFFICE USE ONLY</b>  Date Received  <i>8:45 am Jan</i>  <b>FILED</b>  <b>FEB - 2 2026</b>  Date Hand-delivered or Date Postmarked  Receipt #  Amount \$  Date Filed <b>CO-ELECTIONS ADMINISTRATOR</b>  Date Imaged
	NICKNAME LAST SUFFIX <b>Bernsen</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>PO Box 37 Plum, TX 78952</b>			
5 CANDIDATE / OFFICEHOLDER PHONE AREA CODE PHONE NUMBER EXTENSION <b>(979 ) 242-2824</b>			
6 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI <b>Mrs. Kimberley</b>			
NICKNAME LAST SUFFIX <b>Rutledge</b>			
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>2720 Reinsch Rd, Smithville, TX 78957</b>			
8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION <b>(214 ) 507-9922</b>			
9 REPORT TYPE			
<input type="checkbox"/> January 15 <input checked="" 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)			
10 PERIOD COVERED			
Month Day Year    Month Day Year <b>1 / 1 / 26</b> THROUGH <b>1 / 22 / 26</b>			
11 ELECTION			
ELECTION DATE    ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <b>3 / 3 / 26</b> <input type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE			
OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) <b>Fayette County Judge</b>	
14 NOTICE FROM POLITICAL COMMITTEE(S)			
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
COMMITTEE TYPE		COMMITTEE NAME	
<input type="checkbox"/> GENERAL		COMMITTEE ADDRESS	
<input type="checkbox"/> SPECIFIC		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
Additional Pages			

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME  
Bernsen, William

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION  
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR  
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 6,218.95

EXPENDITURE  
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 421.00

4. TOTAL POLITICAL EXPENDITURES

\$ 4,456.75

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$ 4,067.47

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 14,369.29

18 SIGNATURE

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

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ 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

OR

(2) Unsworn Declaration

My name is William Bernsen, and my date of birth is 4/25/1976

My address is PO Box 37, Plum, TX, 78952, USA

Executed in Fayette County, State of Texas, on the 2nd day of February, 2026

Signature of Candidate/Officeholder (Declarant)

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

<b>19 FILER NAME</b> Bernsen, William		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,378.03
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 840.92
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,456.75
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 1/4 Rpt: 4/12

2 FILER NAME

Bernsen, William

3 Filer ID

4 Date  
01/20/2026

5 Full name of contributor

Aswad, Jacob

☐ out-of-state PAC (ID#:

7 Amount of Contribution (\$)

\$208.65

6 Contributor address; City; State; Zip Code

24706 Sahalle Dr

Katy, TX 77494

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
01/05/2026

Full name of contributor

Denham, Loretta

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

803 Drisdale Rd

La Grange, TX 78945

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/05/2026

Full name of contributor

Denham, Ronnie

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

803 Drisdale Rd

La Grange, TX 78945

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/16/2026

Full name of contributor

Dernehl, Rita

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$200.00

Contributor address; City; State; Zip Code

1018 Konetzke

La Grange, TX 78945

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/06/2026

Full name of contributor

Forestier, Frank

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

3040 Jurica Rd

Schulenburg, TX 78956

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/12
<b>2</b> FILER NAME Bernsen, William		<b>3</b> Filer ID
<b>4</b> Date 01/05/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joost, Darryl <hr/> <b>6</b> Contributor address; City; State; Zip Code PO Box 16  Plum, TX 78952	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leffler, Leonard <hr/> Contributor address; City; State; Zip Code 1515 Makinson Road  West Point, TX 78963	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaugherty, Patrick <hr/> Contributor address; City; State; Zip Code 2343 FM 609  La Grange, TX 78945	Amount of Contribution (\$)  \$208.65
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muras, Stephen <hr/> Contributor address; City; State; Zip Code 5548 FM 609  La Grange, TX 78945	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musick, Lisa <hr/> Contributor address; City; State; Zip Code 618 W Newport Bend  Katy, TX 77494	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 3/4 Rpt: 6/12

2 FILER NAME

Bernsen, William

3 Filer ID

4 Date  
01/17/2026

5 Full name of contributor  
Sacco, Connie

☐ out-of-state PAC (ID#:

7 Amount of Contribution (\$)

\$260.73

6 Contributor address; City; State; Zip Code  
3600 FM 155

La Grange, TX 78945

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
01/06/2026

Full name of contributor  
Sheffield, Pamela

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code  
2510 E Parker Rd

Muldoon, TX 78945

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/13/2026

Full name of contributor  
Smyth, Audrey

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$2,000.00

Contributor address; City; State; Zip Code  
905 Anderson St

Schulenburg, TX 78956

Principal occupation / Job title (See Instructions)  
RETIRED

Employer (See Instructions)  
RETIRED

Date  
01/06/2026

Full name of contributor  
Thompson, LaMorris

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code  
6741 Wolters Rd

Schulenburg, TX 78956

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
01/13/2026

Full name of contributor  
Wennermark, Jeremiah

☐ out-of-state PAC (ID#:

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code  
202 Rolling Hills Dr

La Grange, TX 78945

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
<b>2</b> FILER NAME Bernsen, William		<b>3</b> Filer ID
<b>4</b> Date 01/13/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wennermark, Melissa <b>6</b> Contributor address; City; State; Zip Code 202 Rolling Hills Dr La Grange, TX 78945	<b>7</b> Amount of Contribution (\$) \$60.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitten, Andrea Contributor address; City; State; Zip Code PO Box 331 Flatonia, TX 78941	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Cory Contributor address; City; State; Zip Code 122 Gloria Blvd Smithville, TX 78957	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Shafter Contributor address; City; State; Zip Code 122 Gloria Blvd Smithville, TX 78957	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Anne Contributor address; City; State; Zip Code 2685 Young Ln Flatonia, TX 78941	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

Sch: 1/1 Rpt: 8/12

2 FILER NAME

Bernsen, William

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
01/09/2026

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Adams, Billie

7 Contributor address; City; State; Zip Code  
3852 Leslie Rd

Fayetteville, TX 78940

8 Amount of contribution (\$)  
\$630.00

9 In-kind contribution description  
Advertising - newspaper

☐ 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)

Date  
01/14/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Adams, Jodie

Contributor address; City; State; Zip Code  
3852 Leslie Rd

Fayetteville, TX 78940

Amount of contribution (\$)  
\$210.92

In-kind contribution description  
Food/beverage

☐ 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)



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/4 Rpt: 9/12	<b>2</b> FILER NAME Bernsen, William	<b>3</b> Filer ID
<b>4</b> Date 01/12/2026	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$162.34	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Way  Menso Park, CA 94025	
<b>8</b> 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 social media advertising
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/02/2026	Candidate/Officeholder name Payee name Facebook	
Amount (\$) \$216.00	Payee address; City; State; Zip Code 1 Hacker Way  Menso Park, CA 94025	
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 social media advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/20/2026	Candidate/Officeholder name Payee name Facebook	
Amount (\$) \$227.00	Payee address; City; State; Zip Code 1 Hacker Way  Menso Park, CA 94025	
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 social media advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 10/12		2 FILER NAME Bernsen, William		3 Filer ID
4 Date 01/12/2026		5 Payee name Fayette County Record		
6 Amount (\$) \$247.00		7 Payee address; City; State; Zip Code PO Box 400  La Grange, TX 78945		
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 newspaper advertising		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 01/13/2026		Payee name Fayette County Record		
Amount (\$) \$492.00		Payee address; City; State; Zip Code PO Box 400  La Grange, TX 78945		
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 newspaper advertising		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 01/20/2026		Payee name Fayette County Record		
Amount (\$) \$519.00		Payee address; City; State; Zip Code PO Box 400  La Grange, TX 78945		
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 newspaper advertising		
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 11/12		<b>2</b> FILER NAME Bernsen, William		<b>3</b> Filer ID	
<b>4</b> Date 01/21/2026		<b>5</b> Payee name Fayette County Record			
<b>6</b> Amount (\$) \$546.00		<b>7</b> Payee address; City; State; Zip Code PO Box 400  La Grange, TX 78945			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newspaper advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/19/2026		Payee name Flatonia Argus, Inc.			
Amount (\$) \$400.00		Payee address; City; State; Zip Code PO Box 468  Flatonia, TX 78941			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newspaper advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/14/2026		Payee name Schulenburg Sticker			
Amount (\$) \$276.00		Payee address; City; State; Zip Code PO Box 160  Schulenburg, TX 78956			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newspaper advertising	
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

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

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 12/12	2 FILER NAME Bernsen, William	3 Filer ID
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4 Date 01/20/2026	5 Payee name Schulenburg Sticker
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6 Amount (\$) \$294.00	7 Payee address; City; State; Zip Code PO Box 160
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Schulenburg, TX 78956	
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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 newspaper advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/08/2026	Payee name Schulenburg Sticker
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Amount (\$) \$315.00	Payee address; City; State; Zip Code PO Box 160
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Schulenburg, TX 78956	
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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 newspaper advertising
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/13/2026	Payee name Tractor Supply
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Amount (\$) \$341.41	Payee address; City; State; Zip Code 2005 West State Hwy 71
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La Grange, TX 78945	
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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 sign supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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