

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) 00084408	2 Total pages filed: 46	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST James D.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2024
	NICKNAME Jim	LAST Wright	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 41964 Houston, TX 77241		ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Daniel J.	MI	
	NICKNAME	LAST Fiallos-Diaz	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4723 FM 892 Robstown, TX 78380		APT / SUITE #;	CITY; STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 387-9400	EXTENSION	
8 REPORT TYPE	<input 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 checked="" 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 Day Year 01/01/2024	THROUGH		Month Day Year 06/30/2024
10 ELECTION	ELECTION DATE Month Day Year 03/03/2024		ELECTION TYPE <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) Railroad Commissioner		12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Wright, James D. (The Honorable)	14 Filer ID (Ethics Commission Filers) 00084408
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:25%;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	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)	\$	191,100.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	84,059.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	375,859.27
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

 The Honorable James D. Wright
 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 Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME Wright, James D. (The Honorable)		19 Filer ID 00084408	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	191,100.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	84,059.29
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angelo Jr, Ernest <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Petroleum Engineer		9 Employer (See Instructions) Self Employed
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnwell, Robert <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Universal Natural Gas (Centric Gas)
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brumley, Jonny <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Presta Petroleum
Date 05/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burluson, Steven <hr/> Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President-HMFIC		Employer (See Instructions) Burluson Petroleum
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buttermore, James <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Centric Services, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Jack <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79701	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Business Owwner		9 Employer (See Instructions) BYRD OPERATING COMPANY
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Scott, Douglass & McConnico
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Cody <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) Double Eagle
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Cody <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) Double Eagle
Date 03/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, David <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President & COO		Employer (See Instructions) Waste Control Specialists

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, James <hr/> 6 Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Self
Date 06/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Chris <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Owl Investments
Date 06/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Seth <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Vice President - Land		Employer (See Instructions) Black Mountain Energy Storage
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, D. Kirk <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Latigo Petroleum
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fasken Management LLC <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$5,000.00
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: 4/11 Rpt: 7/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenoglio, Stephen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Stephen Fenoglio Attorney
Date 05/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Dan <hr/> Contributor address; City; State; Zip Code Houston, TX 77066	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Jodie <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79124	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) North Country Energy
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmour, Terry <hr/> Contributor address; City; State; Zip Code Midland, TX 79704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Midland College
Date 05/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Cole <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Fiesta Energy LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, William <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79702	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) oil and gas		9 Employer (See Instructions) Self Employed
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, William <hr/> Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) oil and gas		Employer (See Instructions) Self Employed
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard Energy Partners <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78256	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Clay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) energy		Employer (See Instructions) Atropos
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Hart PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$5,000.00
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: 6/11 Rpt: 9/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Dee <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Kelly Hart
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Max <hr/> Contributor address; City; State; Zip Code Midland, TX 79708	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) VP Drilling		Employer (See Instructions) Hibernia Resources IV
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mabee, John W. <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) Mabee Ranch
Date 04/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Carol H <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76123	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Piano Teacher		Employer (See Instructions) Self
Date 04/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marathon Oil Company Employees PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$5,000.00
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: 7/11 Rpt: 10/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nomad Drilling <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79702	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NuStar PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78278	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pefanis, Harry <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Plains All American Pipeline
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purvis, Margaret <hr/> Contributor address; City; State; Zip Code Midland, TX 79710	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) oil and gas		Employer (See Instructions) Self
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Ellen <hr/> Contributor address; City; State; Zip Code Midland, TX 79707	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Permian Road Safety Coalition

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rathbone, Monroe <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79707	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Self
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, John <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) Double Eagle
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, John <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Co-CEO		Employer (See Instructions) Double Eagle
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Bryan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Marbella Interests
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Clark <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Currie <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79110	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) oil and gas and cattle		9 Employer (See Instructions) Self
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Dan <hr/> Contributor address; City; State; Zip Code Andrews, TX 79714	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) SOXGI
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Don <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Petroleum Engineer		Employer (See Instructions) Discovery Operating
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stallings, Kyle <hr/> Contributor address; City; State; Zip Code Midland, TX 79702	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Desert Royalty Company
Date 06/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Autry <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Endeavor Energy

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Brian	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Engineer/Lawyer		9 Employer (See Instructions) McElroy Sullivan & The University of Texas
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Hollis	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76308		
Principal occupation / Job title (See Instructions) Veritas Energy		Employer (See Instructions) CEO
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villela, Steven	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Midland, TX 79702		
Principal occupation / Job title (See Instructions) landman		Employer (See Instructions) Na
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks, Linda	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code Premont, TX 78375		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) Weeks Environmental
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wight, Schuyler	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Goldsmith, TX 79741		
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wygant, Thomas 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) oil and gas		9 Employer (See Instructions) self
Date 06/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, George 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Pegasus Resources		Employer (See Instructions) CEO

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 15/46

2 FILER NAME
Wright, James D. (The Honorable)

3 Filer ID (Ethics Commission Filers)
00084408

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 16/46
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 1/30 Rpt: 17/46	2	FILER NAME Wright, James D. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00084408	
4	Date 04/01/2024	5	Payee name Amazon			
6	Amount (\$) \$1,298.99	7	Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 computer			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 06/30/2024		Payee name Anedot			
	Amount (\$) \$2,291.80		Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution fees for reporting period			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 01/03/2024		Payee name Aristotle			
	Amount (\$) \$550.00		Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software			
		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: 2/30 Rpt: 18/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/01/2024	5 Payee name Aristotle	
6 Amount (\$) \$550.00	7 Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name Aristotle	
Amount (\$) \$550.00	Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2024	Payee name Aristotle	
Amount (\$) \$550.00	Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software
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: 3/30 Rpt: 19/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/01/2024	5 Payee name Aristotle	
6 Amount (\$) \$550.00	7 Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2024	Payee name Aristotle	
Amount (\$) \$550.00	Payee address; City; State; Zip Code P.O. Box 716045 Philadelphia, PA 19171	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 compliance software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Bush IAH Parking	
Amount (\$) \$31.75	Payee address; City; State; Zip Code 2800 N Terminal Rd Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/30 Rpt: 20/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/12/2024	5 Payee name Bush IAH Parking	
6 Amount (\$) \$64.95	7 Payee address; City; State; Zip Code 2800 N Terminal Rd Houston, TX 77032	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/21/2024	Payee name Campaign Monitor	
Amount (\$) \$52.76	Payee address; City; State; Zip Code 9 Lea Ave Nashville, TN 37210	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 eblasts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/25/2024	Payee name Cipollina	
Amount (\$) \$70.00	Payee address; City; State; Zip Code 1213 W Lynn St Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/30 Rpt: 21/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/26/2024	5 Payee name Cipollina	
6 Amount (\$) \$70.00	7 Payee address; City; State; Zip Code 1213 W Lynn St Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Doubletree	
Amount (\$) \$610.69	Payee address; City; State; Zip Code 117 W Wall St Midland, TX 79701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff hotel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Doubletree	
Amount (\$) \$610.69	Payee address; City; State; Zip Code 117 W Wall St Midland, TX 79701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff hotel
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/30 Rpt: 22/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/25/2024	5 Payee name Down On Grayson	
6 Amount (\$) \$199.14	7 Payee address; City; State; Zip Code 303 E Grayson St San Antonio, TX 78215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at a meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Drew Pearson Sports	
Amount (\$) \$60.06	Payee address; City; State; Zip Code 2040 N International Pkwy Dallas, TX 75261	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2 meals DFW
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Fort Worth Club	
Amount (\$) \$747.81	Payee address; City; State; Zip Code 306 W 7th St Fort Worth, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hotel rooms for staff and principal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 7/30 Rpt: 23/46	2	FILER NAME Wright, James D. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00084408	
4	Date 02/01/2024	5	Payee name HEB			
6	Amount (\$) \$102.39	7	Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies			
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 03/15/2024		Payee name HEB			
	Amount (\$) \$107.72		Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 03/18/2024		Payee name HEB			
	Amount (\$) \$7.40		Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies			
		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: 8/30 Rpt: 24/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/09/2024	5 Payee name HEB	
6 Amount (\$) \$94.99	7 Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2024	Payee name IAH Food Court	
Amount (\$) \$27.17	Payee address; City; State; Zip Code 2800 N Terminal Rd Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name IAH Food Court	
Amount (\$) \$41.31	Payee address; City; State; Zip Code 2800 N Terminal Rd Houston, TX 77032	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/30 Rpt: 25/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 03/27/2024	5 Payee name Jason's Deli	
6 Amount (\$) \$24.95	7 Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for a meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/09/2024	Payee name Jason's Deli	
Amount (\$) \$35.13	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for a meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2024	Payee name Jason's Deli	
Amount (\$) \$451.87	Payee address; City; State; Zip Code 1000 E 41st St Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for a meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/30 Rpt: 26/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 04/18/2024	5 Payee name Jennifer Naedler Consulting	
6 Amount (\$) \$4,000.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2024	Payee name Jennifer Naedler Consulting	
Amount (\$) \$4,496.63	Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2024	Payee name Jennifer Naedler Consulting	
Amount (\$) \$7,825.20	Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/30 Rpt: 27/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/21/2024	5 Payee name Jennifer Naedler Consulting	
6 Amount (\$) \$15,715.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/20/2024	Payee name Kesos Tacos	
Amount (\$) \$51.40	Payee address; City; State; Zip Code 600 W Martin Luther King Jr Blvd Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2024	Payee name Krejci, Aaron	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/30 Rpt: 28/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/01/2024	5 Payee name Krejci, Aaron	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name Krejci, Aaron	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2024	Payee name Krejci, Aaron	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
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: 13/30 Rpt: 29/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
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4 Date 05/29/2024	5 Payee name Krejci, Aaron
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6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/21/2024	Payee name Krejci, Aaron
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5207 Purple Sage Dr Unit A Austin, TX 78724
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/10/2024	Payee name Las Palomas
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Amount (\$) \$29.06	Payee address; City; State; Zip Code 3201 Bee Cave Rd Austin, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 14/30 Rpt: 30/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/10/2024	5 Payee name Little Bohemian	
6 Amount (\$) \$36.82	7 Payee address; City; State; Zip Code 201 W Wall St Midland, TX 79701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff meal
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2024	Payee name Look Ahead Strategies	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1500 Wilson Blvd FI 5 Arlington, VA 22209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 strategy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2024	Payee name Look Ahead Strategies	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 1500 Wilson Blvd FI 5 Arlington, VA 22209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 strategy & research
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/30 Rpt: 31/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/12/2024	5 Payee name MFA Food Court	
6 Amount (\$) \$10.28	7 Payee address; City; State; Zip Code 9506 La Force Blvd Midland, TX 79706	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/11/2024	Payee name Main Street Dinner	
Amount (\$) \$62.12	Payee address; City; State; Zip Code 611 S Main St Midland, TX 79701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at a meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2024	Payee name Moore, Megan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(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 work
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: 16/30 Rpt: 32/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/01/2024	5 Payee name Moore, Megan	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/29/2024	Payee name Moore, Megan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2024	Payee name Moore, Megan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/30 Rpt: 33/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/01/2024	5 Payee name Moore, Megan	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2024	Payee name Moore, Megan	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2024	Payee name Pappasitos	
Amount (\$) \$154.09	Payee address; City; State; Zip Code 6513 I-35 Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/30 Rpt: 34/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
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4 Date 06/07/2024	5 Payee name QuickTime
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6 Amount (\$) \$64.63	7 Payee address; City; State; Zip Code 109 E Northside Dr Fort Worth, TX 76164
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fuel
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2024	Payee name Randall's
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Amount (\$) \$69.33	Payee address; City; State; Zip Code 3300 Bee Caves Rd West Lake Hills, TX 78746
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/20/2024	Payee name Ready Refresh By Nestle
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Amount (\$) \$56.96	Payee address; City; State; Zip Code PO Box 856192 Louisville, KY 40285
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 water service
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 19/30 Rpt: 35/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/13/2024	5 Payee name Ready Refresh By Nestle	
6 Amount (\$) \$56.96	7 Payee address; City; State; Zip Code PO Box 856192 Louisville, KY 40285	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 water service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Ready Refresh By Nestle	
Amount (\$) \$59.96	Payee address; City; State; Zip Code PO Box 856192 Louisville, KY 40285	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 water service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2024	Payee name Spectrum	
Amount (\$) \$111.40	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/30 Rpt: 36/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/29/2024	5 Payee name Spectrum	
6 Amount (\$) \$410.75	7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/02/2024	Payee name Spectrum	
Amount (\$) \$144.67	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/04/2024	Payee name Spectrum	
Amount (\$) \$151.47	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
	9 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: 21/30 Rpt: 37/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 03/29/2024	5 Payee name Spectrum	
6 Amount (\$) \$210.94	7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2024	Payee name Spectrum	
Amount (\$) \$232.37	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2024	Payee name Spectrum	
Amount (\$) \$151.47	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
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: 22/30 Rpt: 38/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/03/2024	5 Payee name Spectrum	
6 Amount (\$) \$151.47	7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2024	Payee name Spectrum	
Amount (\$) \$455.79	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Spectrum	
Amount (\$) \$151.47	Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/30 Rpt: 39/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/21/2024	5 Payee name Spectrum	
6 Amount (\$) \$223.42	7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2024	Payee name Starbucks	
Amount (\$) \$21.65	Payee address; City; State; Zip Code 501 W 15th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2024	Payee name Strategic Partners	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7815 Woodmont Ave Bethesda, MD 20814	
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
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: 24/30 Rpt: 40/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 05/09/2024	5 Payee name Sushi Junai	
6 Amount (\$) \$93.99	7 Payee address; City; State; Zip Code 1612 Lavaca St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 meal at meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2024	Payee name Tankersley, Kate	
Amount (\$) \$4,760.00	Payee address; City; State; Zip Code 14810 Bramblewood Drive Houston, TX 77079	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance/strategy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/01/2024	Payee name Tankersley, Kate	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code 14810 Bramblewood Drive Houston, TX 77079	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance/strategy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/30 Rpt: 41/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/29/2024	5 Payee name Tankersley, Kate	
6 Amount (\$) \$3,500.00	7 Payee address; City; State; Zip Code 14810 Bramblewood Drive Houston, TX 77079	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 fundraising/compliance/strategy
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2024	Payee name Tea 2 Go	
Amount (\$) \$1.29	Payee address; City; State; Zip Code 3211 W Wadley Ave Midland, TX 79705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 drink at a meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2024	Payee name UT Club	
Amount (\$) \$75.78	Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 membership, food/bev
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: 26/30 Rpt: 42/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
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4 Date 04/16/2024	5 Payee name UT Club
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6 Amount (\$) \$75.78	7 Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 membership, food/bev
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/29/2024	Payee name UT Parking
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Amount (\$) \$12.00	Payee address; City; State; Zip Code 210 E Martin Luther King Jr Blvd Austin, TX 78712
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2024	Payee name Uber
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Amount (\$) \$46.68	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car service
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 27/30 Rpt: 43/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/06/2024	5 Payee name Uber	
6 Amount (\$) \$19.31	7 Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/07/2024	Payee name Uber	
Amount (\$) \$53.68	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2024	Payee name Uber	
Amount (\$) \$27.16	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense car service
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: 28/30 Rpt: 44/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
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4 Date 01/16/2024	5 Payee name University Of Texas Club
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6 Amount (\$) \$184.27	7 Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 club membership and food/bev at meetings
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2024	Payee name University Of Texas Club
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Amount (\$) \$75.78	Payee address; City; State; Zip Code 2108 Robert Dedman Dr Austin, TX 78712
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 club membership and food/bev at meetings
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/21/2024	Payee name Verizon
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Amount (\$) \$113.30	Payee address; City; State; Zip Code PO Box 660108 Dallas, TX 75266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 phone
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 29/30 Rpt: 45/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 06/21/2024	5 Payee name Verizon	
6 Amount (\$) \$42.61	7 Payee address; City; State; Zip Code PO Box 660108 Dallas, TX 75266	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/08/2024	Payee name Walgreens	
Amount (\$) \$19.45	Payee address; City; State; Zip Code 3700 Bee Caves Rd West Lake Hills, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2024	Payee name Walgreens	
Amount (\$) \$19.45	Payee address; City; State; Zip Code 3700 Bee Caves Rd West Lake Hills, TX 78746	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 supplies
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: 30/30 Rpt: 46/46	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408	
4 Date 06/06/2024	5 Payee name Wow Donuts		
6 Amount (\$) \$31.88	7 Payee address; City; State; Zip Code 3267 Bee Caves Rd Austin, TX 78746		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for meeting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held