

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) 00086218	2 Total pages filed: 19	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Teresa S.	MI	OFFICE USE ONLY
	NICKNAME Terri	LAST Wilson	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 29 Pirates Bch W Galveston, TX 77554			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST David M.	MI	
	NICKNAME Dave	LAST Wilson	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4219 Silver Reef 29 Pirates Bch W Galveston, TX 77554			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(580)	749-9020		
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 type="checkbox"/> July 15 <input checked="" 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		THROUGH	Month Day Year
	09/27/2024			10/26/2024
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE	
	11/05/2024		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)
	State Representative District 23 Galveston			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Wilson, Teresa S. (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00086218

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input checked="" type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> SPECIFIC		Texas Alliance for Life PAC
	COMMITTEE ADDRESS	8000 Centre Park Drive Suite 380 Austin, TX 78754
	COMMITTEE CAMPAIGN TREASURER NAME	Shaw, James
	COMMITTEE CAMPAIGN TREASURER ADDRESS	4505 Corazon Cv Round Rock, TX 78681

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)	\$ 40,988.75
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,355.40
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 78,615.45
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 70,000.00

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 Teresa S. Wilson

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 Wilson, Teresa S. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00086218
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 38,813.35
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,175.40
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 15,355.40
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 1.81

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BTLA Realty Partners, LLC	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Waxahachie, TX 75165-6209		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bary, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Galveston, TX 77554-2909		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollich, Susan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Hankamer, TX 77560		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broiles, Kirk	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Texas City, TX 77590		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrom, Tim	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Beaumont, TX 77706		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Daniel <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77523	7 Amount of Contribution (\$) \$260.25
8 Principal occupation / Job title (See Instructions) Sales Manager		9 Employer (See Instructions) Pulte
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers County Republican Party <hr/> Contributor address; City; State; Zip Code Mont Belvieu, TX 77580	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Bambi <hr/> Contributor address; City; State; Zip Code Crystal Beach, TX 77650	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Retired		Retired
Date 10/05/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00035006</u>) Chevron Employees PAC <hr/> Contributor address; City; State; Zip Code San Ramon, CA 94583	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clear Creek Republican Women <hr/> Contributor address; City; State; Zip Code League City, TX 77574	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coastal Outdoors Group LLC <hr/> 6 Contributor address; City; State; Zip Code Crystal Beach, TX 77650-2621	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) EnSite USA Inc
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dagley, Isis <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVine, Gaylyn <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) DeVine Promotions Printing
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmons, Loretta <hr/> Contributor address; City; State; Zip Code Anahuac, TX 77514	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Member		Employer (See Instructions) Rapid Waste Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ExxonMobil PAC of Texas <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75039	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Kevin D. <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hibbard, Robert <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillman, Darla S. <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hisler, Rachael <hr/> Contributor address; City; State; Zip Code Anahuac, TX 77514	Amount of Contribution (\$) \$500.00
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: 5/11 Rpt: 8/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Homan, Nick <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77523	7 Amount of Contribution (\$) \$520.51
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Pardo Homan, PC
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hooper, Don <hr/> Contributor address; City; State; Zip Code Houston, TX 77010	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Scott C. Lannie, PC <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieck, Ed <hr/> Contributor address; City; State; Zip Code Anahuac, TX 77514	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Ed D Lieck
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh Dority & Allen, LLP <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$1,000.00
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: 9/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh, Daniel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Linebaugh Law Firm
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lofton, Justin <hr/> Contributor address; City; State; Zip Code Beach City, TX 77523	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Randy <hr/> Contributor address; City; State; Zip Code Crystal Beach, TX 77650	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Josue <hr/> Contributor address; City; State; Zip Code Beach City, TX 77523	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Premier Outdoor Living and Construction LLC
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jerry <hr/> Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$104.10
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: 7/11 Rpt: 10/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Don	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Texas City, TX 77590	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Bill R.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Baytown, TX 77522	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Nicholas R.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Baytown, TX 77521-5035	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricketts, Connie	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Four Oaks, NC 27524	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CASA of Galveston County
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Melinda K.	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Baytown, TX 77521	
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: 8/11 Rpt: 11/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schroeder, Suana <hr/> 6 Contributor address; City; State; Zip Code Port Bolivar, TX 77650	7 Amount of Contribution (\$) \$260.25
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) The salty mermaid
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott II, James M. <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705-9628	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Trans-Global Solutions, Inc.
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, Jeanne <hr/> Contributor address; City; State; Zip Code Baytown, TX 77521	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Dwayne <hr/> Contributor address; City; State; Zip Code Anahuac, TX 77514	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Assistant County Attorney		Employer (See Instructions) Chambers County
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, John <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	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: 12/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78768-2246	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taft, Ray	Amount of Contribution (\$) \$20.82
	Contributor address; City; State; Zip Code Baycliff, TX 77518	
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Target
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$12,500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Cornerstone Credit Union League PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75265-5147	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher Kambhu, JaLene	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Director of Membership		Employer (See Instructions) Galveston Regional Chamber of Commerce

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Donald G. Floyd Trust	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Austin, TX 78755		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, William	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Mont Belvieu, TX 77580		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Nathan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Baytown, TX 77523-8428		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Way, Gloria G.	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Stowell, TX 77661		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, David	Amount of Contribution (\$) \$220.00
Contributor address; City; State; Zip Code Galveston, TX 77554		
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: 11/11 Rpt: 14/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Michael 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$104.10
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Michael L. Wilson P.C.
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahar, Keith 6 Contributor address; City; State; Zip Code Crystal Beach, TX 77650	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/19	
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/08/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh Dority & Allen, LLP	8 Amount of contribution (\$) \$2,175.40	9 In-kind contribution description Fundraising Event Expenses
	7 Contributor address; City; State; Zip Code Baytown, TX 77521	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 16/19	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/14/2024	5 Payee name Propeller Club No. 10	
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code P.O. Box 1115 Galveston, TX 77553	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Rotary Club of Galveston Island	
Amount (\$) \$40.00	Payee address; City; State; Zip Code PO Box 3104 Galveston, TX 77552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2024	Payee name Rotary Club of Galveston Island	
Amount (\$) \$40.00	Payee address; City; State; Zip Code PO Box 3104 Galveston, TX 77552	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
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: 2/3 Rpt: 17/19	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/03/2024	5 Payee name Walmart	
6 Amount (\$) \$43.80	7 Payee address; City; State; Zip Code 6702 Seawall Blvd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stamps	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/08/2024	Payee name Walmart	
Amount (\$) \$9.72	Payee address; City; State; Zip Code 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Thank you cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Wilson, David	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 29 Pirates Bch W 4219 Silver Reef Galveston, TX 77554-8085	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Repayment/Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 18/19	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/23/2024	5 Payee name WinRed	
6 Amount (\$) \$186.88	7 Payee address; City; State; Zip Code 1776 Wilson Blvd Arlington, VA 22209	
8 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 Solicitation/Fundraising Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 19/19
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/06/2024	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$1.81
	6 Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551	
	7 Purpose for which amount is received Account Interest	<input type="checkbox"/> Check if political contribution returned to filer