# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commission 00084408	on Filers)	2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	SE ONLY
OFFICEHOLDER NAME	The Honorable	James D.			Date Received	
					ELECTRONICA	I I Y FII FD
	NICKNAME			CLIEFIX	01/15/2025	
	NICKNAME	LAST Wright		SUFFIX	01/13/2023	
	Jim	Wright				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 11540					_
ADDRESS					Receipt #	Amount
X Change of Address	Austin, TX 78711				Date Processed	1
					Date Processed	
					Date Imaged	
					Date imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	<u> </u>	
TREASURER	Mr.	Daniel J.				
NAME	IVII.	Danier J.				
	NICKNAME			CUEEIV		
	NICKNAME	LAST Fiallos-Diaz		SUFFIX		
		Fiailus-Diaz				
2 0445404	070557 4000500 (410 0	0.000/.01.5405)	4.D.T. /	OLUTE " OLTY	07.4	715 0055
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	O BOX PLEASE);	API/	SUITE #; CITY;	STA	TE; ZIP CODE
ADDRESS	4723 FM 892					
(Residence or Business)						
	Robstown, TX 78380					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER		INE NUMBER E	KIENSION			
PHONE	(361) 387-9400					
8 REPORT						
TYPE	X January 15	30th day before	election  R	unoff	15th day after cam	ıpaian treasurer
			Ш .		appointment (office	
	July 15	8th day before 6		ceeded modified porting limit	Final Report (Attac	ch C/OH-FR)
			16	porting infint		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	IROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE	<u> </u>		ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
		│ □G	eneral	Special		
				—		
11 OFFICE	OFFICE HELD (if any)	<u> </u>	I <sub>1</sub>	2 OFFICE SOUGHT	(if known)	
	Railroad Commissioner				(**************************************	
		GO T	O PAGE 2			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 53

13 C / OH NAME	Wright, James D. (Th	e Honorable)	<b>14</b> Filer ID (00084408	Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a d officeholders are required to report this information	the candidate's or office	holder's kno	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION		ZED POLITICAL CONTRIBUTIONS (OTHER THA			
TOTALS	OR GUARANTE	ES OF LOANS, OR CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$	0.00
	5)	\$	186,420.66		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00	
		\$	211,057.74		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	351,232.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.			
		The Hono	rable James D. Wrig	ht	
		Signature of	Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
		aid	, this the		day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	er administering	Printed name of officer administering	Title of officer	administeri	ng oath

### SUBTOTALS - C/OH

### FORM C/OH COVER SHEET PG 3

			OVER OTILET	3 of 53
18 FILER NA Wright, 3	AME James D. (The Honorable)	<b>19</b> Filer ID 00084408	(Ethics Commission	า Filers)
	LE SUBTOTALS = SCHEDULE		SUBTOTAL A	MOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	186,420.66
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	4. SCHEDULE E: LOANS			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	211,057.74
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete	e this forr	n.	1	Total pages Schedule A1: Sch: 1/19 Rpt: 4/53	
2	FILER NAME	oc D. (The Henerable)			3	Filer ID (Ethics Commission 00084408	n Filers)
_		es D. (The Honorable)			L		
4	Date 10/23/2024	<ul> <li>Full name of contributor  out-of-state F         Ahuja, Avinash     </li> <li>Contributor address; City; State; Zip Code</li> </ul>	PAC (ID#:	)	7	Amount of Contribution (\$)	\$1,000.00
Q	Principal occu	Corpus Christi, TX 78401 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0	Executive	pation / Job title (See Instructions)		Magnum Producing	•)		
	Date 12/11/2024	Full name of contributor out-of-state F Ballantyne, Robert Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
		Grand Junction, CO 81505			<u> </u>		
		pation / Job title (See Instructions)		Employer (See Instructions		2	
	Engineer wa	astewater, Produced water		RWI Enhanced Evapora	uio		
	Date 09/03/2024	Full name of contributor out-of-state F Beyea, Richard Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00
		Perryton, TX 79070					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	President			Remnant Energy			
	Date 10/03/2024	Full name of contributor out-of-state F Blair, Robert Contributor address; City; State; Zip Code  Corpus Christi, TX 78412	PAC (ID#:	)		Amount of Contribution (\$)	\$100.00
	Principal occu VP	pation / Job title (See Instructions)		Employer (See Instructions Bay Ltd.	5)		
	Date 09/09/2024	Full name of contributor out-of-state F Blumberg, Catherine Contributor address; City; State; Zip Code San Antonio, TX 78210	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this forn	1.	1	Total pages Schedule A1: Sch: 2/19 Rpt: 5/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)			3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 09/17/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$100.00
_	Dringing! goog	Austin, TX 78727	lo.	Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	Date 08/30/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$250.00
	Dringing agg	Amarillo, TX 79119		Employer (See Instructions			
	Entrepreneu	pation / Job title (See Instructions) r		Employer (See Instructions Self	)		
	Date 08/21/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
		Amarillo, TX 79109					
	Principal occu OWNER	pation / Job title (See Instructions)		Employer (See Instructions Carson Buckles Explora		ı LLC	
	Date 07/30/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Scott, Douglass & McCo		ico	
	Date 09/19/2024	Full name of contributor Cantrell, Mike  Contributor address; City; State; 2	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu investor	pation / Job title (See Instructions)		Employer (See Instructions Self	)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/53
2	FILER NAME Wright, Jame	es D. (The Honorable)			Filer ID (Ethics Commission Filers) 00084408
4	Date 09/09/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$25.00
_		Stephenville, TX 76401	1		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date 09/20/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$10,000.00
	Principal occu	Houston, TX 77210 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	•				
	Date 10/03/2024	Full name of contributor out-of-state PAC (ID#: Chiu, Peter  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.00
	Dringing agg	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions	<u>e)</u>	
	Fillicipal occu	Janott 7 Job tille (See Instructions)	Employer (See Instructions	5)	
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#: Coffin Renner LL  Contributor address; City; State; Zip Code  Austin, TX 78711			Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#: Cook, John Contributor address; City; State; Zip Code The Woodlands, TX 77381			Amount of Contribution (\$) \$1,000.00
	Principal occu OWNER	pation / Job title (See Instructions)	Employer (See Instructions Petroleum Wholesale	s)	
			•		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/19 Rpt: 7/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)			3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 12/10/2024	<ul><li>5 Full name of contributor Coterra Energy Inc. PAC</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$1,000.00
•	Dringing ogg	Houston, TX 77024	lo.	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	·)		
	Date 09/09/2024	Full name of contributor  Courson, Harold  Contributor address; City; Sta				Amount of Contribution (\$)	\$2,000.00
		Perryton, TX 79070	1		<u> </u>		
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Courson Oil & Gas	5)		
	Date 09/09/2024	Full name of contributor Craver, Steele Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Arlington, TX 76006					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/05/2024	Full name of contributor Cunningham, Brad Contributor address; City; Sta Hudson Oaks, TX 76087		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu oil and gas	pation / Job title (See Instructions)		Employer (See Instructions 4 Sevens Oil Company	5)		
	Date 08/26/2024	Full name of contributor  Davis, Gordon  Contributor address; City; Sta  Austin, TX 78744	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) ulations Programmer		Employer (See Instructions Internal Revenue Service			
	9	2 2 29.55					

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 5/19 Rpt: 8/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)				3	Filer ID (Ethics Commission 00084408	n Filers)
4	Date 08/09/2024	<ul><li>5 Full name of contributor DiCosimo, Vincent</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$250.00
0	Dringing oggu	Houston, TX 77007			Employer (See Instructions	<u></u>		
8	SVP	pation / Job title (See Instructions	5)	9	Employer (See Instructions Targa Resources Corp	5)		
	Date 09/17/2024	Full name of contributor Dolezalek Sr., Donald Contributor address; City; Si					Amount of Contribution (\$)	\$25.00
		Texarkana, TX 75503	,			<u></u>		
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 09/17/2024	Full name of contributor Edwards, Elizabeth Contributor address; City; Si	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$75.00
		Houston, TX 77005						
	Principal occu	pation / Job title (See Instructions	(3)		Employer (See Instructions	5)		
	Date 08/21/2024	Full name of contributor Fleetwood, Dana Contributor address; City; St			)		Amount of Contribution (\$)	\$500.00
	Principal occu Vice Preside	pation / Job title (See Instructions	s)		Employer (See Instructions ValPoint Operating	<u>                                      </u>		
	Date 09/17/2024	Full name of contributor Forney, P.D.  Contributor address; City; Si  San Antonio, TX 78209					Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>(</u> 6)		
			1					

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/19 Rpt: 9/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)			3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 10/15/2024	5 Full name of contributor Gamble, Phil	out-of-state PAC (ID#:ate; Zip Code	)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>s)</u>		
	Attorney	pation 7 000 title (Oce mondetions)		Self	<i>-</i> )		
	Date 09/16/2024	Full name of contributor Green, Joseph Contributor address; City; Sta		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Jersey Village, TX 77040 pation / Job title (See Instructions)	, <u> </u>	Employer (See Instructions	<u> </u> s)		
	CEO	,		Greens Blue Flame Gas			
	Date 07/25/2024	Full name of contributor HS Law PAC Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$10,000.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/03/2024	Full name of contributor Halliburton PAC Contributor address; City; Sta	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	)	Employer (See Instructions	5)		
	Date 09/17/2024	Full name of contributor Hamner, Ronald Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions retired	S)		

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how	to complete this forr	n.	1	Total pages Schedule A1: Sch: 7/19 Rpt: 10/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)			3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 09/03/2024	Full name of contributor     Hancock, James     Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)	7	Amount of Contribution (\$)	\$50.00
_	Deignigal	Stafford, TX 77477	lo.	Frankrije (Coo koete jetinge			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	<u> </u>		
	Date 12/06/2024	Full name of contributor Hayenga, William  Contributor address; City; Sta				Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>		
	Attorney			McElroy, Sullivan, Miller	&	Weber	
	Date 12/06/2024	Full name of contributor Hayenga, William Contributor address; City; Sta		)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78711					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions McElroy, Sullivan, Miller	-	Weber	
	Date 09/17/2024	Full name of contributor Herrick, Jason Contributor address; City; Sta Amarillo, TX 79119	out-of-state PAC (ID#: tte; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Pantera Energy Compar			
	Date 12/05/2024	Full name of contributor Holding, Carol Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00
	Principal occu oil and gas	pation / Job title (See Instructions)		Employer (See Instructions SOGC, Inc.	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/19 Rpt: 11/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 12/03/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$1,000.00
_	Deinainal agai	Austin, TX 78701	O Franksian (Cas Instructions			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Hook, Joanne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	Houston, TX 77025  upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	- Timolpai ooda	pation 7 oos tillo (eee metadolono)	Employer (God morradione)	,		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Hosek, Chris Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78746				
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Texas Star Alliance	)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Hupp, Donald Contributor address; City; State; Zip Code  Wichita Falls, TX 76308	)		Amount of Contribution (\$)	\$250.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Gunn Oil Company	)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Hutzler, Melvin Contributor address; City; State; Zip Code Bulverde, TX 78163	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/19 Rpt: 12/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 09/09/2024	5 Full name of contributor out-of-state PAC (ID#:_ John Oates Company  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
_		Stinnett, TX 79083				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Kannel, Patricia  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	Sweetwater, TX 79556 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	r illicipai occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 09/17/2024	Full name of contributor	)		Amount of Contribution (\$)	\$100.00
		Wichita Falls, TX 76308				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Koenig, Bonnie Contributor address; City; State; Zip Code Seguin, TX 78155			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Lloyd Gosselink Rochelle & Townsend, P.C.  Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/53		
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)	
4	Date 09/03/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$2,500.00	
_	Deinsinal	Carrollton, TX 75006					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 10/03/2024	Full name of contributor out-of-state PAC (ID#:_Martineau, David  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00	
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions				
	Owner	pation / 300 title (3ee instructions)	DFM Energy	<i>,</i>			
	Date Full name of contributor out-of-state PAC (ID#:)  08/18/2024 Maxwell Biard, Amy  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Austin, TX 78746					
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Amy Maxwell, LLC	)			
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#: McBay, Michael Contributor address; City; State; Zip Code Groesbeck, TX 76642	)		Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#:_ McCormick, Travis Contributor address; City; State; Zip Code Austin, TX 78704	)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu Principal	pation / Job title (See Instructions)	Employer (See Instructions McCormick Strategies	)			

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/19 Rpt: 14/53		
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	n Filers)	
4	Date 09/03/2024	5 Full name of contributor out-of-state PAC (ID#:_McCracken, Billy Jean  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00	
_	Dringing Lagor	Kerrville, TX 78028	O Frankrige (Cook hoster astronom				
8	Рппсіраї осси	ipation / Job title (See Instructions)	9 Employer (See Instructions	)			
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ McKenzie, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Sulphur Springs, TX 75482  upation / Job title (See Instructions)	Employer (See Instructions	)			
	Retired	,	Retired	,			
	Date Full name of contributor out-of-state PAC (ID#:)  08/15/2024 Miller, Amanda  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Centennial, CO 80111					
	Principal occu Accounting/	pation / Job title (See Instructions) operating	Employer (See Instructions Lone Tree Management				
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_Mirick, Gloria  Contributor address; City; State; Zip Code  Austin, TX 78757			Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)			
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Modglin, Jason Contributor address; City; State; Zip Code  Austin, TX 78739			Amount of Contribution (\$)	\$100.00	
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Western Midstream	)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 12/19 Rpt: 15/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)			3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 09/08/2024	<ul><li>5 Full name of contributor Moles, Randall</li><li>6 Contributor address; City; State</li></ul>			7	Amount of Contribution (\$)	\$25.00
_	Daine in all access	Wimberley, TX 78676-6325		Faralassa (Osa lastasstisas			
8	retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date 09/17/2024	Full name of contributor  Moyer, Jim  Contributor address; City; State	out-of-state PAC (ID#: ;; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Hemphill, TX 75948 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired			retired			
	Date 12/10/2024	Full name of contributor  NGL Texas PAC  Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code	)		Amount of Contribution (\$)	\$25,000.00
		Austin, TX 78709					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 09/17/2024	Full name of contributor  Nolen, Wesley  Contributor address; City; State  Borger, TX 79007				Amount of Contribution (\$)	\$3,000.00
	Principal occu Owner	pation / Job title (See Instructions)		Employer (See Instructions SNW Operating Compar			
	Date 12/03/2024	Full name of contributor Occidental Petroleum Corpor Contributor address; City; State Washington, DC 20006		)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			I				

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/19 Rpt: 16/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 12/10/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,000.00
_		Tulsa, OK 74103				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 08/19/2024	Full name of contributor out-of-state PAC (ID#:_ Oneok Employees PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Tulsa, OK 74102 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_ Oneok Employees PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Tulsa, OK 74102 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_Parker, Robert  Contributor address; City; State; Zip Code  Corpus Christi, TX 78469			Amount of Contribution (\$)	\$2,500.00
	Principal occu Chairman	pation / Job title (See Instructions)	Employer (See Instructions REP Holdings	)		
	Date 07/23/2024	Full name of contributor out-of-state PAC (ID#:_ Patton Jr., Robert  Contributor address; City; State; Zip Code  Fort Worth, TX 76107			Amount of Contribution (\$)	\$10,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Texas Capitalization Res		ırce Group, Inc	

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/19 Rpt: 17/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)
4	Date 08/28/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$5,000.66
8	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	9 Employer (See Instructions			
•	r inicipal occu	pation / 300 title (See Instructions)	2 Employer (See Instructions	,		
	Date 12/03/2024	Full name of contributor			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701  pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:) 09/17/2024 Quintanilla, Leo  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		San Antonio, TX 78212				
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Quintanilla Management			
	Date 09/13/2024	Full name of contributor out-of-state PAC (ID#:_ Reyna, Kaleen  Contributor address; City; State; Zip Code  Amarillo, TX 79119	)		Amount of Contribution (\$)	\$250.00
	Principal occu VP of Financ	pation / Job title (See Instructions)	Employer (See Instructions Pantera energy	)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_Rio, Gabriel Contributor address; City; State; Zip Code Houston, TX 77024	)		Amount of Contribution (\$)	\$10,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Milestone Environmenta		ervices	

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/19 Rpt: 18/53			
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)		
4	Date 09/17/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Roessler, Randall</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)	7	Amount of Contribution (\$)	\$100.00		
_		Dripping Springs, TX 78620	10 - 1 (0 1 1 1					
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions retired	)				
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Scharbauer, Chris Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00		
	Principal occu	Amarillo, TX 79118 pation / Job title (See Instructions)	Employer (See Instructions	)				
	Owner	pation / coo title (coo metadolono)	Scharbauer Cattle	,				
	Date Full name of contributor out-of-state PAC (ID#:) 09/03/2024 Schattyn, John  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00			
		Kerrville, TX 78028						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_Schorsten, Elizabeth  Contributor address; City; State; Zip Code  Fulshear, TX 77441			Amount of Contribution (\$)	\$50.00		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)				
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_Scully, Thomas  Contributor address; City; State; Zip Code  El Paso, TX 79922			Amount of Contribution (\$)	\$100.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/19 Rpt: 19/53			
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission 00084408	on Filers)		
4	Date 07/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Sinclair, Donald  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$2,500.00		
_	Dringing! goog	Houston, TX 77005	O Employer (See Instructions					
8	investor	pation / Job title (See Instructions)	9 Employer (See Instructions Self	)				
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Skupin, Janis Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$40.00		
	Principal occu	Gainesville, TX 76240  pation / Job title (See Instructions)	Employer (See Instructions	)				
	Date 08/30/2024	Full name of contributor out-of-state PAC (ID#:_ Smith, Dale Contributor address; City; State; Zip Code Amarillo, TX 79101			Amount of Contribution (\$)	\$250.00		
	Principal occu Cattleman	pation / Job title (See Instructions)	Employer (See Instructions  JA Cattle Co. Ltd	)				
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Smith, Fran Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)				
	Date 09/09/2024	Full name of contributor out-of-state PAC (ID#:_ Snodgrass, Donna Contributor address; City; State; Zip Code Lubbock, TX 79424			Amount of Contribution (\$)	\$5.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				

	MONET	ONETARY POLITICAL CONTRIBUTIONS			S		SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	1 Total pages Schedule A1: Sch: 17/19 Rpt: 20/53		
2	FILER NAME Wright, Jame	es D. (The Honorable)				3	Filer ID (Ethics Commission 00084408	on Filers)	
4	Date 12/05/2024	<ul><li>5 Full name of contributor Spreen, Lauren</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code		)	7	Amount of Contribution (\$)	\$5,000.00	
		Austin, TX 78703							
8	Principal occu Consultant	pation / Job title (See Instructions	s) <u> </u>		Employer (See Instructions Self	5)			
	Date 08/27/2024	Full name of contributor Stark, Judy Contributor address; City; Si	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00	
	Amarillo, TX 79119  Principal occupation / Job title (See Instructions)  Employer (See Instructions)		) 						
	President	pation / oob title (occ mondone)	,		PPROA	''			
	Date Full name of contributor out-of-state PAC (ID#:)  12/12/2024 TC Energy PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00				
		Houston, TX 77002							
	Principal occu	pation / Job title (See Instructions	s) 		Employer (See Instructions	5)			
	Date 12/10/2024	Full name of contributor Targa Resources Corp. P Contributor address; City; Si Houston, TX 77002					Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)			
	Date 09/27/2024	Full name of contributor Taylor, Randy Contributor address; City; Si Austin, TX 78746	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu CEO	pation / Job title (See Instructions	(3)		Employer (See Instructions Pinnergy	5)			
			1						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/19 Rpt: 21/53	
2	FILER NAME Wright, Jame	es D. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00084408	
4	Date 09/09/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$50.00	
_		Kerrville, TX 78028				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ Teter, Rex Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$25.00	
	Dringinal occu	Pasadena, TX 77503  pation / Job title (See Instructions)	Employer (See Instructions	·/_		
	minister	pation 7 300 title (See Instructions)	Self	•)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/03/2024 Tex-Pipe PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00		
		Austin, TX 78791				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Energy PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$) \$10,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Troxclair PC Contributor address; City; State; Zip Code Austin, TX 78701	)		Amount of Contribution (\$) \$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE	<b>A1</b>	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/19 Rpt: 22/53		
2	FILER NAME Wright, Jam	es D. (The Honorable)		3	Filer ID (Ethics Commission F 00084408	-ilers)	
4	Date 09/03/2024	Full name of contributor		7	Amount of Contribution (\$)	\$35.00	
		Irving, TX 75062					
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Valero PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$) \$5	5,000.00	
		San Antonio, TX 78269					
	Principal occupation / Job title (See Instructions)		Employer (See Instructions	s)			
	Date 09/12/2024	Full name of contributor out-of-state PAC (ID#: Ware, William Contributor address; City; State; Zip Code		•	Amount of Contribution (\$) \$2	1,000.00	
		Amarillo, TX 79109					
	Principal occu Banker	pation / Job title (See Instructions)	Employer (See Instructions Amarillo National Bank	s)			
	Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Webb Jr., Walter Contributor address; City; State; Zip Code Dallas, TX 75216	)		Amount of Contribution (\$)	\$5.00	
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Food Son/fee

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/31 Rpt: 23/53	2 FILER NAME Wright, James D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00084408
4 Date	5 Payee name
10/17/2024	Anderson, Lyn
6 Amount (\$) \$517.27	7 Payee address; City; State; Zip Code 708 S. Taylor St.
Ψ011.21	700 S. Taylor St.
	Amarillo, TX 79101
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	event food and beverage
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/31/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$1,402.47	1340 Poydras Street Suite 1770
	, and the second
	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	credit card processing fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Aristotle
Amount (\$)	
\$586.30	P.O. Box 716045
	Philadelphia, PA 19171
DUDDOCE	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/(Banking)  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	accounting software
	accounting contrain
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total manage Calculula E4.	Lo Elle D. Marie	:1\
1	Total pages Schedule F1: Sch: 2/31 Rpt: 24/53	2 FILER NAME Wright, James D. (The Honorable)  3 Filer ID (Ethics Commission F 00084408	liers)
4	Date	5 Payee name	
	07/17/2024	Aristotle	
6	Amount (\$) \$550.00	7 Payee address; City; State; Zip Code P.O. Box 716045	
		Philadelphia, PA 19171	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		accounting software	
		accounting software	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	11/04/2024	Aristotle	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$894.85	P.O. Box 716045	
	φου-1.00	1.0. Box 110040	
		Philadelphia, PA 19171	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	LXI LINDITORL	Check if Austin, TX, officeholder living expense	
		accounting software	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	09/09/2024	Aristotle	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$586.30	P.O. Box 716045	
	Φ300.30	P.O. Box 710045	
		Philadelphia, PA 19171	
		I	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		accounting software	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	п	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/31 Rpt: 25/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	08/07/2024	Aristotle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$550.00	P.O. Box 716045
		Philadelphia, PA 19171
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		accounting software
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/12/2024	Bergsma for Corpus Christi
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO Box 955
		Corpus Christi, TX 78403
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		campaign contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>y</b>
_	Date	Payee name
	11/27/2024	Call to Action
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	528 Landing Lane
		Leander, TX 78641
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		filming
	Complete ONLY if divert	Candidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### 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)

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/31 Rpt: 26/53	Wright, James D. (The Honorable)	00084408
4	Date	Payee name	
	12/09/2024	Call to Action	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$64.99	528 Landing Ln	
		Leander, TX 78641	
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
		TIII	lming supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office field
_			
	Date	Payee name	
	12/05/2024	DB Liquors	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$46.54	8312 Burnet Rd	
		Austin, TX 78757	
	PURPOSE	(b) Category (See Categories listed at the top of this schedule)	escription
	OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
		L ho	Check if Austin, TX, officeholder living expense OSt gift
			oot giit
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	09/18/2024	Embassy Suites	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$266.91	550 S Buchanan	
	Ψ200.31	330 3 Buchanan	
		Amarilla TV 70101	
		Amarillo, TX 79101	
	PURPOSE OF	, , ,	escription  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District	Check if Austin, TX, officeholder living expense
		ho	otel stay
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/31 Rpt: 27/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	10/07/2024	Fedex
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.50	942 Shady Grove Rd S
		Memphis, TN 38120
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	postage Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Postage
		. Sollago
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/11/2024	Franklin Creative Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$8,940.56	558 Castle Pines Pkwy
		Suite B-4, Box 333
		Castle Pines, CO 80108
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		mail piece
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	experientare to benefit 6/61	<u> </u>
	Date	Payee name
	12/23/2024	Godaddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.04	14455 N Hayden Rd Suite 100
		Scottsdale, AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	email Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense email accounts
1		Giriali accounts
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/31 Rpt: 28/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	12/23/2024	Godaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$46.88	14455 N Hayden Rd Suite 100
		Scottsdale, AZ 85260
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	emails Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		email accounts
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	12/18/2024	Godaddy
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$118.66	14455 N Hayden Rd Suite 100
	Ψ110.00	14433 N Haydell Nd Suite 100
		Scottsdale, AZ 85260
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  website domain
		website domain
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	11/15/2024	Grill & Vine
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.06	1201 Main
		Dallas, TX 75202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  staff lunch
		Stan functi
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	•	
L		

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	ense Prir Sala	-	nse es/Contract Labor	Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:						3 Filer ID	(Ethics Commission Filers)
L	Sch: 7/31 Rpt: 29/53	Wright, Jan	nes D. (The Honora	able)			00084408	
4	Date	5 Payee name						
L	10/17/2024	HEB						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zi	p Code			
	\$144.40	701 S Capi	tal of Texas Hwy					
		West Lake	Hills, TX 78746					
8	PURPOSE	(a) Category (S	ee Categories listed at the to	pp of this schedule	) (b	<b>)</b> Description		
	OF EXPENDITURE	Food/Beve	rage Expense			_	outside of Texas. Com	
						event supplie	ı, TX, officeholder living	expense
						event supplie	.5	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office	e sough	<u> </u>	Office he	eld
_	expenditure to benefit C/OI		denoted name	Onice			Office fic	
	Date	Payee name						
L	10/16/2024	Harland Cla	arke					
	Amount (\$)	Payee addre	ess; City;	State; Zij	p Code			
	\$251.24	15955 La C	Cantera Pkwy					
		San Antoni	o, TX 78256					
	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule	(b	<b>)</b> Description		
	OF EXPENDITURE	Accounting				<b>=</b>	outside of Texas. Com	
						checks	ı, TX, officeholder living	expense
						CHECKS		
$\vdash$	Complete ONLY if direct	Candidate/Off	iceholder name	Office	e sough	<u> </u>	Office he	eld
	expenditure to benefit C/O			J		-	2.1100 H	
$\vdash$	Date	Dayoo nama						
	12/06/2024	Payee name Holland Ta	ucher Consulting G	roup				
_				State; Zij	n Codo			
	Amount (\$) \$4,674.19	Payee addre		Siait, ZI	h cone			
	Ψ4,074.19	1 0 000 00	7201					
		Austin, TX	78768					
	PURPOSE	(a) Category (S	ee Categories listed at the to	op of this schedule	(b	) Description		
	OF EXPENDITURE	Consulting				ш	outside of Texas. Com	
						Check if Austin	ı, TX, officeholder living	expense
						ranaraising C	onsuming	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office	e sough	<u> </u>	Office he	eld
	expenditure to benefit C/O		.cc.ioidoi ildillo	Onice	o oougii	•	Omice ne	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>		
1	Total pages Schedule F1:	
L	Sch: 8/31 Rpt: 30/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	11/12/2024	Holland Taucher Consulting Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,445.00	PO Box 684281
	•	
		Austin, TX 78768
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		fundraising consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$	Date	Davisa nama
	10/25/2024	Payee name  Honest Mary's
_		,
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.75	2021 Aldrich
L		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		staff lunch
_	0 1 0 0 0 0 0 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	,	
	Date	Payee name
L	08/22/2024	Hyatt Hill Country
	Amount (\$)	Payee address; City; State; Zip Code
	\$344.87	9800 Hyatt Resort Dr.
		San Antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	TAI LIADITORE	Check if Austin, TX, officeholder living expense
		staff meal
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit C/Of	·

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials E Legal Services	expense	Printing Expe	nse es/Cor			Travel Out of D OTHER (enter	
_	T : 1	la ====	The Instruction Gui	ue explains no	ow to com	nete i	nis iorni.	٦_	E1 15	(Ethio Occupiator Ethio)
1	Total pages Schedule F1:	1		(مامامه				3	Filer ID	(Ethics Commission Filers)
	Sch: 9/31 Rpt: 31/53	vvrignt, Ja	mes D. (The Hono	таріе)					00084408	
4	Date	5 Payee nam								
	08/21/2024	Hyatt Hill (	Country							
6	Amount (\$)	<b>7</b> Payee addr	ess; City;	State;	Zip Code	)				
	\$1,673.97	9800 Hyat	t Resort Dr.							
_			nio, TX 78251		1					
8	PURPOSE OF		See Categories listed at the	top of this sched	<sub>dule)</sub> (k	) De	Scription	d outo	ide of Toyon Co	mplata Cabadula T
	EXPENDITURE	Travel In [	DISTRICT			H			, officeholder livir	mplete Schedule T. ng expense
						hc	tel stay			
9	Complete ONLY if direct		fficeholder name	Of	fice sough	t			Office h	neld
	expenditure to benefit C/OI	п •								
	Date	Payee nam	e							
	08/15/2024	Jason's D	eli							
	Amount (\$)	Payee addr	ess; City;	State;	Zip Code	;				
	\$81.46	1000 E 41	st St							
		Austin, TX	78751							
	PURPOSE	(a) Category	See Categories listed at the	top of this sched	dule) (k	) De	scription			
	OF EXPENDITURE	Food/Beve	erage Expense							mplete Schedule T.
						L ct:	aff meal	ın, IX	, officeholder livir	ng expense
						310	an mean			
_	Complete ONLY if direct	Candidate/O	fficeholder name	Of	fice sough	ıt			Office h	neld
	expenditure to benefit C/OI	H								
	Date	Payee nam	e							
	07/29/2024	K&C Cattl	е							
	Amount (\$)	Payee addr	ess; City;	State;	Zip Code	)				
	\$1,035.00	2900 N FN	и 973							
		Austin, TX	78725							
	PURPOSE	(a) Category	See Categories listed at the	top of this sched	dule) (k	) De	scription			
	OF EXPENDITURE	Food/Beve	erage Expense							mplete Schedule T.
						L for			, officeholder livir	ng expense
						100	od/bevera	ye		
	Complete ONLY if direct	Candidata/O	fficeholder name	Ot-	fice sough	ıt			Office h	neld
	Complete ONLY if direct expenditure to benefit C/OI		mcendidei Hällle	OI	nce sougr	ıt			Onice i	ICIU

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/31 Rpt: 32/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	11/05/2024	Krejci, Aaron
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	5207 Purple Sage Dr
		Unit A
		Austin, TX 78724
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Staff salary
		Stail Salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/10/2024	Krejci, Aaron
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5207 Purple Sage Dr
		Unit A
		Austin, TX 78724
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  staff salary
		Stall Salaly
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/24/2024	Krejci, Aaron
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5207 Purple Sage Dr
		Unit A
		Austin, TX 78724
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		staff salary
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/31 Rpt: 33/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	07/23/2024	Krejci, Aaron
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	5207 Purple Sage Dr
	!	Unit A
	!	Austin, TX 78724
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	!	Check if Austin, TX, officeholder living expense  staff salary
	!	Stati Stati
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
-	expenditure to benefit C/O	
	Date	Payee name
	12/06/2024	Krejci, Aaron
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5207 Purple Sage Dr
	!	Unit A
	!	Austin, TX 78724
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
	!	staff salary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	08/08/2024	Krejci, Aaron
_		•
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 5207 Purple Sage Dr
	Φ1,000.00	
	!	Unit A
		Austin, TX 78724
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Lahor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor
	!	staff salary
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	H

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/31 Rpt: 34/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	12/06/2024	Look Ahead Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
	!	Fl 5
	!	Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	consulting
	!	oo leataing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	<del>-</del>
	Date	Payee name
	10/22/2024	Look Ahead Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
	!	FI 5
	1	Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	!	Check if Austin, TX, officeholder living expense  consulting
	1	oo noalang
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	10/02/2024	Look Ahead Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
	!	FI 5
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
	!	consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·
	·	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
se Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/31 Rpt: 35/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	07/22/2024	Look Ahead Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
		FI 5
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense  consulting
		Consulting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/Ol	
	Date	Payee name
	12/04/2024	Look Ahead Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
		FI 5
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense  consulting
		Consulting
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
	Date	Payee name
	12/11/2024	Look Ahead Strategies
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1500 Wilson Blvd
		FI 5
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		consulting
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/31 Rpt: 36/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	08/13/2024	Look Ahead Strategies
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5,000.00	1500 Wilson Blvd
		FI 5
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  consulting
		Consularing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/17/2024	Lotus Hunan
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.32	3201 Bee Cave Rd
		Ste 112
		Austin, TX 78746
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		staff meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	12/17/2024	Mailchimp
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.97	405 N Angier
		Atlanta, GA 30308
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		email blast service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/31 Rpt: 37/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	11/12/2024	Moore, Megan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2305 Barton Creek Blvd
		Unit 45
		Austin, TX 78735
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  staff salary
		Stail Salary
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/15/2024	Moore, Megan
	Amount (\$)	Payee address; City; State; Zip Code
	\$576.04	2305 Barton Creek Blvd
		Unit 45
		Austin, TX 78735
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  staff salary
		Stail Staily
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/15/2024	Moore, Megan
	Amount (\$)	Payee address; City; State; Zip Code
	\$634.61	2305 Barton Creek Blvd
		Unit 45
		Austin, TX 78735
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		staff salary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries/V	Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
			The Instruction Guid	le explains how to co	mpl	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	ИE				3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 16/31 Rpt: 38/53	Wright, Ja	ames D. (The Honor	able)				00084408		
4	Date	5 Payee nam	ne							
	10/15/2024	Moore, M	egan							
6	Amount (\$)	<b>7</b> Payee add	ress; City;	State; Zip Co	ode					
	\$500.00	2305 Bart	on Creek Blvd							
		Unit 45								
		Austin, T	< 78735							
8	PURPOSE		(See Categories listed at the	ton of this schodula)	(b)	Description				
	OF		Vages/Contract Lab		( )		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		g	-		Check if Austin	, TX,	officeholder living	g expense	
						staff salary				
9	Complete ONLY if direct		officeholder name	Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	1								
	Date	Payee nan	ne							
	12/16/2024	Moore, M	egan							
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$500.00	2305 Bart	on Creek Blvd							
		Unit 45								
		Austin, T	< 78735							
	PURPOSE	(a) Category	(See Categories listed at the	ton of this schedule)	(b)	Description				
	OF		Vages/Contract Lab		``		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		3			ш	, TX,	officeholder living	g expense	
						staff salary				
	Complete ONLY if direct expenditure to benefit C/OI		officeholder name	Office sou	ıght			Office h	eld	
	Date	Payee nan	ne							
	08/19/2024	Moore, M	egan							
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$500.00	2305 Bart	on Creek Blvd							
		Unit 45								
		Austin, T	< 78735							
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description				
	OF EXPENDITURE		Vages/Contract Lab			ш			plete Schedule T.	
	LXI LINDITORL					ш	, TX,	officeholder living	g expense	
						staff salary				
_	Complete ONLY if allowed	Complial - 4 - 40	Micabalder reserve	O#:	10 F 1			Office 1	ald	
	Complete ONLY if direct expenditure to benefit C/OI		officeholder name	Office sou	ignt			Office h	eiu	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/31 Rpt: 39/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	08/05/2024	NGL Water Solutions
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100,000.00	2900 N Loop
		Ste 1250
		Houston, TX 77092
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	contribution refund Check if travel outside of Texas. Complete Schedule T.
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense  contribution refund
		Contribution retaind
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	
_	Date	Payee name
	10/25/2024	Naedler, Jennifer
_	Amount (\$)	Payee address; City; State; Zip Code
	\$4,302.30	PO Box 41964
	Ψ4,502.50	1 0 80% 41304
		Houston, TX 77241
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  fundraising
		Turnar aronny
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/30/2024	Naedler, Jennifer
	Amount (\$)	Payee address; City; State; Zip Code
	\$8,956.60	PO Box 41964
	, , , , , , , ,	
		Houston, TX 77241
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Check if Austin, TX, officeholder living expense fundraising consulting
		Turidialsing Consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to	-	lete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 18/31 Rpt: 40/53	Wright, James D. (The Honorable)		00084408
4	Date	5 Payee name		•
	09/03/2024	Naedler, Jennifer		
6	Amount (\$)	7 Payee address; City; State; Zip	Code	
	\$6,595.74	PO Box 41964		
		Houston, TX 77241		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense fundraising consulting
				iditarationing concentuing
9	Complete ONLY if direct	Candidate/Officeholder name Office s	<u> </u>	Office held
	expenditure to benefit C/OI		J	
F	Date	Payee name		
	08/01/2024	Naedler, Jennifer		
H	Amount (\$)	Payee address; City; State; Zip	Code	
	\$7,047.29	PO Box 41964		
		Houston, TX 77241		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense fundraising consulting
				idital alling consulting
H	Complete ONLY if direct	Candidate/Officeholder name Office s	<u> </u>	Office held
	expenditure to benefit C/OI	1		
F	Date	Payee name		
	11/07/2024	Office Depot		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$1,027.27	5425 S Padre Island Dr		
		Ste 151		
		Corpus Christi, TX 78411		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	computer		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense computer
┝	Complete ONLY if direct	Candidate/Officeholder name Office s	 ought	Office held
	expenditure to benefit C/OI		-	
Г				

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committe Credit Card Payment		I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services  Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guid	e explains how t	o compl	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 19/31 Rpt: 41/53	Wright, Jar	nes D. (The Honor	able)				00084408		
4	Date	5 Payee name					<u> </u>			
	08/12/2024	Omni Corp								
_				Otata: 7	0-1-					
6	Amount (\$)	7 Payee addre	•	State; Zip	Code					
	\$394.32	900 N Sho	reline							
		Corpus Ch	risti, TX 78401							
8	PURPOSE	(a) Category (5	See Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Travel In D				Check if travel	outs	ide of Texas. Cor	mplete Schedule T.	
	LAI LINDITORE					_	ı, TX	, officeholder livir	ng expense	
						hotel stay				
9	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office	sought			Office h	neld	
	experialture to belieff C/Or	1								
	Date	Payee name	<del></del>							
	07/25/2024	Pappadeaı	JX							
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$51.84	_	erstate Hwy 35							
	402.0	002011111	orotatio ritty oo							
		Acceting TV	70750							
		Austin, TX	18152							
	PURPOSE OF	(a) Category (s	See Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Beve	rage Expense					ide of Texas. Cor , officeholder livir	mplete Schedule T.	
						staff lunch	1, 1 ^	, officeriolaer livii	ig expense	
						otan lanon				
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office	sought			Office h	nold	
	expenditure to benefit C/O		ilcenoider name	Office	Sougrit			Office i	leiu	
	Date	Payee name								
	11/25/2024	Prosperity	Bank							
	Amount (\$)	Payee addre	ess; City;	State; Zip	Code					
	\$20.00	900 Congr	ess							
		Austin, TX	78701							
	PURPOSE	(-) -			(b)	Description				
	OF	,	See Categories listed at the t	op of this schedule)	(0)	Description  Check if travel	outs	ide of Texas. Cor	mplete Schedule T.	
	EXPENDITURE	Fees						, officeholder livir		
						wire fee				
$\vdash$	Complete ONLY if direct	LCandidate/∩f	ficeholder name	Office	sought			Office h	neld	
	expenditure to benefit C/O			230				2001		
L										
	rme provided by Tayas E	thice Commice	ion	w othice state	tv. 110				Version V// 1 0 5dd2ace	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

nse Travel in District
ense Travel Out of Dis
ges/Contract Labor OTHER (enter a

1 T	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
ξ	Sch: 20/31 Rpt: 42/53	Wright, James D. (The Honorable)	00084408
<b>4</b> D	Date	5 Payee name	
С	07/30/2024	Prosperity Bank	
6 A	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$30.00	900 Congress	
		Austin, TX 78701	
8	PURPOSE		) Decembration
°	OF	(a) Category (See Categories listed at the top of this schedule) (b)  Fees	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	rees	Check if Austin, TX, officeholder living expense
			banking fee
	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
е	expenditure to benefit C/OI	4	
Г	Date	Payee name	
С	07/19/2024	Randall's	
A	Amount (\$)	Payee address; City; State; Zip Code	
	\$17.31	3300 Bee Caves Rd	
		West Lake Hills, TX 78746	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
	OF	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			office supplies
<u> </u>			200
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	Date	Payee name	
1	10/09/2024	Ready Refresh By Nestle	
Δ	Amount (\$)	Payee address; City; State; Zip Code	
	\$71.95	PO Box 856192	
		Louisville, KY 40285	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			office water service
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	complete <u>ONLY</u> II direct expenditure to benefit C/OI		Conice field
<u> </u>			

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	Pol pense Prir	ling Expens			Travel in District Travel Out of Di		
	Credit Card Payment		The Instruction Guid	le explains how	to compl	ete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission	n Filers)
	Sch: 21/31 Rpt: 43/53	Wright, Ja	mes D. (The Honor	able)			l	00084408		
4	Date	<b>5</b> Payee name								
•	11/25/2024		resh By Nestle							
_			-	0 7.						
6	Amount (\$)	7 Payee addr		State; Zi	p Code					
	\$71.95	PO Box 85	66192							
		Louisville,	KY 40285							
8	PURPOSE	(a) Category	See Categories listed at the t	ton of this schedule	(b)	Description				
	OF		rhead/Rental Expe		" [``		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE					Check if Austin	n, TX,	officeholder living	g expense	
						water service	9			
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office	e sought			Office h	eld	
	expenditure to benefit C/OI	4								
_	Date	Dayoo nam								
	08/05/2024	Payee name								
			resh By Nestle							
	Amount (\$)	Payee addr	•	State; Zi	p Code					
	\$64.66	PO Box 85	66192							
		Louisville,	KY 40285							
	PURPOSE	(a) Category	See Categories listed at the t	ton of this schodulo	(b)	Description				
	OF		rhead/Rental Expe		" [` 1		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE					Check if Austin	n, TX,	officeholder living	g expense	
						water service	9			
	Complete ONLY if direct		ficeholder name	Office	e sought			Office h	eld	
	expenditure to benefit C/OF	4								
	Date	Payee name								
	12/04/2024	Spectrum	5							
		·								
	Amount (\$)	Payee addr		State; Zi	p Code					
	\$152.45	PO Box 60	0074							
		City Of Ind	ustry, CA 91716							
	PURPOSE	(a) Category	See Categories listed at the t	ton of this schedule	(b)	Description				
	OF		rhead/Rental Expe		"  ` ´		outsi	de of Texas. Con	plete Schedule T.	
	EXPENDITURE					Check if Austin	n, TX,	officeholder living	g expense	
						internet servi	ice			
	Complete ONLY if direct		ficeholder name	Office	e sought			Office h	eld	
	expenditure to benefit C/OI	4								

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 22/31 Rpt: 44/53	Wright, James D. (The Honorable) 00084408
4 Date	5 Payee name
10/03/2024	Spectrum
6 Amount (\$) \$152.45	7 Payee address; City; State; Zip Code PO Box 60074  City Of Industry, CA 91716
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  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	Payee name
09/25/2024	Spectrum
Amount (\$) \$223.42	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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/03/2024	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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense internet service
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/31 Rpt: 45/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	12/03/2024	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$152.45	PO Box 60074
		City Of Industry, CA 91716
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		internet service
_	0 1: 01:14 7 1	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	12/03/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$218.40	PO Box 60074
		City Of Industry, CA 91716
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense internet service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/04/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$223.42	PO Box 60074
	Ψ220.42	1 0 200 00014
		City Of Industry, CA 91716
	DUDDOOF	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		internet service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	H

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/31 Rpt: 46/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	09/03/2024	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$152.64	PO Box 60074
		City Of Industry, CA 91716
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		internet service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/23/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$232.37	PO Box 60074
L		City Of Industry, CA 91716
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		internet service
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	08/20/2024	Spectrum
	Amount (\$)	Payee address; City; State; Zip Code
	\$223.42	PO Box 60074
		City Of Industry, CA 91716
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense internet service
		Internet service
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/Ol	
$\vdash$		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 25/31 Rpt: 47/53	Wright, James D. (The Honorable)  00084408
4	Date	5 Payee name
	08/02/2024	Spectrum
6	Amount (\$)	7 Payee address; City; State; Zip Code
•	\$151.47	PO Box 60074
	¥202	
		City Of Industry, CA 91716
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		internet service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
	Date	Payee name
	11/15/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	, ,	3300 Bee Cave Rd
	\$21.65	5500 Bee Cave Ru
		Austin, TX 78746
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  staff coffee
		Stan conce
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	5.	
	Date	Payee name
	08/16/2024	Starbucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.65	501 W 15th
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		staff coffee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/OI	1

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 26/31 Rpt: 48/53	Wright, James D. (The Honorable)	00084408
4	Date	5 Payee name	•
	12/06/2024	Strategic Partners	
6	Amount (\$) \$2,500.00	<b>7</b> Payee address; City; State; Zip Code 7815 Woodmont Ave	
		Bethesda, MD 20814	
8	PURPOSE OF EXPENDITURE	Consulting Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  digital consulting
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
L	11/27/2024	Strategic Partners	
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7815 Woodmont Ave	
		Bethesda, MD 20814	
	PURPOSE OF EXPENDITURE	Consulting Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  digital consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/24/2024	Strategic Partners	
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7815 Woodmont Ave	
		Bethesda, MD 20814	
	PURPOSE OF EXPENDITURE	Consulting Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  digital consulting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

Advertising Expense Et Accounting/Banking Fronsulting Expense Fronsulting Expense Contributions/ Donations Made By - Google Contributions/ Official College Contributions (Official College Contributions)

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
	Sch: 27/31 Rpt: 49/53	Wright, James D. (The Honorable) 00084408		
4	Date	5 Payee name		
	10/01/2024	Strategic Partners		
6	Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 7815 Woodmont Ave		
		Bethesda, MD 20814		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense digital consulting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	12/25/2024	Strategic Partners		
	Amount (\$) \$2,000.00	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)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense digital consulting		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	09/06/2024	Strategic Partners		
	Amount (\$) Payee address; City; State; Zip Code \$2,500.00 7815 Woodmont Ave			
		Bethesda, MD 20814		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense digital consulting		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

	Credit Card Payment  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 28/31 Rpt: 50/53	Wright, James D. (The Honorable)		00084408		
4	Date	5 Payee name		<b>'</b>		
	08/06/2024	Strategic Partners				
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de			
	\$6,250.00	7815 Woodmont Ave				
		Bethesda, MD 20814				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense digital consulting		
				digital consulting		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
ľ	expenditure to benefit C/OI		9	Cines nea		
_	Date	Payee name				
	09/19/2024	Tailwind				
	Amount (\$)	Payee address; City; State; Zip Coo	de			
	\$33.68	10801 Airport Blvd				
		'				
		Amarillo, TX 79111				
_	PURPOSE		(b)	Description		
	OF	Food/Beverage Expense	()	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	, , , , , , , , , , , , , , , , , , ,		Check if Austin, TX, officeholder living expense		
				staff meal		
	Opening the ONE Wife disease	Out it date (Office helder name		Office held		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	gnı	Office field		
-	Data					
	Date 09/12/2024	Payee name The Local				
			-1 -			
	Amount (\$) \$368.05	Payee address; City; State; Zip Cor 9901 Brodie Ln	ae			
	φ306.03	9901 Blodie Eli				
		Austin, TX 78748				
			4.			
	PURPOSE OF	, ,	(b)	Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense		
				staff meal		
	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held		
L	expenditure to benefit C/OH					

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/31 Rpt: 51/53	Wright, James D. (The Honorable) 00084408
4	Date	5 Payee name
	08/07/2024	The Oilfield
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,217.81	Marienfeld
		Midland, TX 79701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		food and beverage
		iood and soloidge
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	12/03/2024	Twin Liquors
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$54.11	2932 Guadalupe
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  host gift
		instal gill
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	09/26/2024	US Postal Service
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	802 N Tancahua St
		Corpus Christi, TX 78401
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  post office box rental
		post office box ferital
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
$\vdash$		
ı		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1: Sch: 30/31 Rpt: 52/53	2 FILER NAME Wright, James D. (The Honorable)		Filer ID (Eth 00084408	ics Commission Filers)	
4	Date 08/26/2024	5 Payee name United Airlines				
6	Amount (\$) \$229.84	7 Payee address; City; State; Zip Cod 609 Main St				
		Houston, TX 77002				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District		de of Texas. Complete S officeholder living exper		
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	i	Office held		
	Date 09/24/2024	Payee name Verizon				
	Amount (\$) \$533.12	Payee address; City; State; Zip Cod PO Box 660108  Dallas, TX 75266				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) cell phone	<b>—</b>	de of Texas. Complete S officeholder living exper		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	·	Office held		
	Date 11/19/2024	Payee name Wow Donuts				
	Amount (\$) \$38.85	Payee address; City; State; Zip Cod 3267 Bee Caves Rd				
		Austin, TX 78746				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	<b></b>	de of Texas. Complete S officeholder living exper		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough		Office held		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
l	Sch: 31/31 Rpt: 53/53	Wright, James D. (The Honorable)		00084408	
4	Date	5 Payee name		<u> </u>	
	08/15/2024	Wow Donuts			
6	Amount (\$)	7 Payee address; City; State; Zip Co	de		
l	\$20.62	3267 Bee Caves Rd			
l					
		Austin, TX 78746			
8	PURPOSE		(h)	Description	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(15)	Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	1 000/Beverage Expense		Check if Austin, TX, officeholder living expense	
				staff meal	
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
	expenditure to benefit C/O	ч			
F	Date	Payee name			
	12/02/2024	Wright , Jim			
H	Amount (\$)	Payee address; City; State; Zip Co	de		
l	\$210.02	PO Box 748			
l					
l		Orange Grove, TX 78372			
⊢	PURPOSE		(h)	Providentino	
l	OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	(D)	Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Develage Expense		Check if Austin, TX, officeholder living expense	
				reimbursement - staff lunch	
Г	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held	
l	expenditure to benefit C/O	п			
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