FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062819 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Jay M. NAME Date Received **ELECTRONICALLY FILED** 01/11/2025 NICKNAME LAST **SUFFIX** Wright CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 793 Angelina Court MAILING Receipt # Amount **ADDRESS** Change of Address Conroe, TX 77302 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jay M. NAME NICKNAME LAST **SUFFIX** Wright **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 793 Angelina Court **ADDRESS** (Residence or Business) Conroe, TX 77302 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (936) 333-1071 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 2 District 9

Forms provided by Texas Ethics Commission

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Wright, Jay M. (Mr.)		14 Filer ID 00062819	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 0.00
EXPENDITURE TOTALS	`	IZED POLITICAL EXPENDITURES	,	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 1,446.20
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 10,118.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 10,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		Mr	. Jay M. Wright	
		Signature of	Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid ertify which, witness my hand and seal of office.	, this the	day
	eer administering oath	Printed name of officer administering oath	Title of office	r administering oath
Signature of office	2. Zaotorning oddir		The of office	g oati

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 11			
18 FILER NAME Wright, Jay M. (Mr.)	(Ethics Commission Filers)					
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT					
1. X SCHEDULE A(J)1: MONETAR	\$ 0.00					
2. X SCHEDULE A2: NON-MONET	\$ 0.00					
3. X SCHEDULE B(J): PLEDGED (\$ 0.00					
4. X SCHEDULE E(J): LOANS (JUI	4. X SCHEDULE E(J): LOANS (JUDICIAL)					
5. X SCHEDULE F1: POLITICAL E	\$ 1,200.00					
6. X SCHEDULE F2: UNPAID INCL	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS					
7. X SCHEDULE F3: PURCHASE (7. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS					
8. X SCHEDULE F4: EXPENDITUR	8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
9. X SCHEDULE G: POLITICAL EX	9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS					
10. SCHEDULE H: PAYMENT FR	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH					
11. SCHEDULE I: NON-POLITICAL	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS					
12. SCHEDULE K: INTEREST, CR	\$					

PLEDO	SED CONTRIBUTIONS (JUDICIA	AL)		SCHED	ULE B(J)
The	Instruction Guide explains how to complet	1 Total pages Schedule B(J): Sch: 1/1 Rpt: 4/11			
2 FILER NAM Wright, Jay		3 Filer ID (00062819	on Filers)		
4 TOTAL O	UNITEMIZED PLEDGES			\$	0.00
5 Date	6 Full name of pledgor out-of-state PAC (ID#:	Code	8 Amount of pledge (\$)	9 In-kind I (If ap	description plicable)
			Check if travel of	outside of Texas.	Complete Schedule T.
10 Pledgor's pri	ncipal occupation	11 Pledgor's job title			
12 Pledgor's en	pployer/law firm	13 Law firm of pledgor	's spouse (if any)		
14 If pledgor is	a child, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)				SCHE	DULE E	(J)
	The Instruction	on Guide explains how to complete this	form.	1 Total pages Schedule E(J): Sch: 1/1 Rpt: 5/11				
2	FILER NAME Wright, Jay M. (N	Mr.)		1	Filer ID	(Ethics Co	ommission F	ilers)
4	TOTAL OF UN	IITEMIZED LOANS				\$		0.00
5	Date of loan	7 Name of lender ut-of-state P	AC (ID#:			9 Loan A	mount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;			10 Interes			
						11 Maturity	y Date	
12	2 Lender's Principal	Occupation	13 Lender's Job Title			•		
14	1 Lender's Employer	r/Law Firm	15 Law Firm of lender's spous	se (if	fany)			
16	If lender is child, la	aw firm of parent(s) (if any)	1					
17	7 Description of Coll	ateral	18 Check if personal funds we	ere c	deposite		al account structions)	
19	GUARANTOR INFORMATION	•			22 Amoun	t Guarantee	d (\$)	
23	not applicable not applicable	21 Guarantor address; City; State; pal Occupation	Zip Code 24 Guarantor's Job Title					
25	5 Guarantor's Emplo	over/Law Eirm	26 Law Firm of guarantor's sp	OUIS.	e (if any	١		
			20 Law Film Or guarantor 5 Sp		- (ii ai iy	,		
27	' If guarantor is child	d, law firm of parent(s) (if any)						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Giff/Awards/Memorials Legal Services The Instruction Gi	•		ages	/Contract Labor		OTHER (enter a	istrict a category not listed above)
┝	Total pages Schedule F1:	2			•		_		3	Filer ID	(Ethics Commission Filers)
	Sch: 1/1 Rpt: 6/11		Wright, Jay	M (Mr)					3	00062819	(Ethics Commission Filers)
╙											
4	Date	5	Payee name								
	09/06/2024		Montgomery	County Repub	lican Party						
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Cod	de				
l	\$1,000.00		P.O. Box 16	48							
l											
l			O TV	77005							
L			Conroe, TX								
8	PURPOSE OF	(a)		e Categories listed at t		dule)	(b)	Description			
l	EXPENDITURE		County Part	y's GOTV expe	nses						nplete Schedule T.
l								□		officeholder livin	
l								Republican S			print and mail out
l								Republican S	iait	e ioi ivoveii	ibei election
9	Complete ONLY if direct		Candidate/Offic	eholder name	Of	ffice soug	ght			Office h	eld
	expenditure to benefit C/O	4									
F	Date		Payee name								
l	12/19/2024			County Repub	lican Party						
⊢	Amount (\$)		Payee addres			Zip Cod	de				
l	\$200.00		P.O. Box 16		Otato,	2.p 000					
l	φ200.00		P.O. BOX 10	40							
l											
			Conroe, TX	77305							
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sched	dule)	(b)	Description			
l	OF EXPENDITURE		donation for	rally to Austin I	Event			Check if travel of	outsi	de of Texas. Con	nplete Schedule T.
l	LAFLINDITORL							ш		officeholder living	
l										nty Party to	cover expenses for Rally
								in Austin ever	III.		
	Complete ONLY if direct		Candidate/Offic	eholder name	Of	ffice soug	ght			Office h	eld
	expenditure to benefit C/O	4									
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	·		The Instruction Guide explains	now to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAME	≣			3	Filer ID (Ethics Commission Filers)		
	Sch: 1/4 Rpt: 7/11	Wright, Jay	M. (Mr.)				00062819		
4	Date	5 Payee name							
	07/15/2024	Jefferson C	ounty Republican Party						
6	Amount (\$)	7 Payee addre	ss; City; State;	Zip Co	ode				
	\$25.00	1844 I-10							
	Reimbursement from	Suite 102							
	political contributions intended	Beaumont.	Beaumont, TX 77707						
8	PURPOSE		ee Categories listed at the top of this sch	edule)	(b) Description	☐ Ch	neck if travel outside of Texas. Complete Schedule T.		
	OF	1	ee Categories listed at the top of this schi ns/Donations Made By	cuui e)		=	neck if Austin, TX, officeholder living expense		
	EXPENDITURE		Officeholder/Political Comm	ittee	Donation to Cour	_	Party for headquarters expense		
						, 1			
9		L Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit C/OH								
	U, U, I								
	Date	Payee name							
	08/13/2024	Jefferson C	county Republican Party						
	Amount (\$)	Payee addre	ss; City; State;	Zip Co	ode				
	\$25.00	1844 I-10							
	Reimbursement from	Suite 102							
	political contributions intended	Beaumont,	TX 77707						
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description [Ch	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		ns/Donations Made By			Ch	neck if Austin, TX, officeholder living expense		
		Candidate/	Officeholder/Political Comm	ittee	Donation to Cour	nty F	Party for headquarters expense		
L									
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit C/OH								
H	Data								
	Date 09/13/2024	Payee name							
_			county Republican Party		1 -				
	Amount (\$)	Payee addre	ss; City; State;	Zip Co	ode				
	\$25.00	1844 I-10							
Reimbursement from political contributions		Suite 102							
L	intended	Beaumont,	TX 77707						
	PURPOSE	1	ee Categories listed at the top of this sch	edule)	Description	=	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		ns/Donations Made By	:44.0 -	[_	neck if Austin, TX, officeholder living expense		
		Candidate/	Officeholder/Political Comm	iiteė	Donation to Cour	nty F	Party for headquarters expense		
	Complete ONLY if direct	Candidata/Office	holder name		Office cought		Office hold		
	Complete ONLY if direct expenditure to benefit	Candidate/Office	пошентатте		Office sought		Office held		
L	C/OH								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L			The Instruction Guide explains	how to co	omplete this form.		
1	Total pages Schedule G:	2 FILER NAME	<u> </u>			3	Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 8/11	Wright, Jay	M. (Mr.)				00062819
4	Date	5 Payee name					
	11/13/2024	1 -	County Republican Party				
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode		
	\$25.00	1844 I-10					
	Reimbursement from	Suite 102					
	political contributions intended	Beaumont,	TX 77707				
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	edule)	(b) Description	Ch	heck if travel outside of Texas. Complete Schedule T.
	OF	• • • • •	ns/Donations Made By	,		=	heck if Austin, TX, officeholder living expense
	EXPENDITURE		Officeholder/Political Comm	ittee	Donation to Cour	<u>−</u> nty I	Party headquarters expense
						٠, ٠	,
9	Complete ONLY if direct expenditure to benefit	<u> </u> Candidate/Office	holder name		Office sought		Office held
	C/OH						
	Date	Payee name					
	12/13/2024	l	County Republican Party				
	Amount (\$)	Payee addre		Zip Co	ode		
	\$25.00	1844 I-10	, ,,	, ,			
	Reimbursement from	Suite 102					
	political contributions intended	Beaumont,	TX 77707				
				odul-V	Description	7 01	heck if travel outside of Texas. Complete Schedule T.
	PURPOSE OF	' '	ee Categories listed at the top of this scho	eauie)	Description	=	neck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
	EXPENDITURE		ns/Donations Made By Officeholder/Political Comm	ittee	Donation to Cour		Party headquarters expense
				-	2011411011110 0001	iiiy I	i any madaquations expense
	Complete ONLY if direct	I Candidate/Office	holder name		Office sought		Office held
	expenditure to benefit		-		- 1 2 · g		- 1 1
	C/OH						
	Date	Payee name					
	07/05/2024	Montgomer	y County Republican Party				
	Amount (\$)	Payee addre	ess; City; State;	Zip Co	ode		
	\$20.20	P.O. Box 10	648				
	Reimbursement from						
	political contributions intended	Conroe, TX	77305				
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Ch	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		ns/Donations Made By			Ch	heck if Austin, TX, officeholder living expense
	L'A LIBITOIL	Candidate/	Officeholder/Political Comm	ittee	Donation to Cour	nty I	Party for headquarters expense
						_	
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held
	C/OH						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 9/11 Wright, Jay M. (Mr.) 00062819 Date Payee name 08/05/2024 Montgomery County Republican Party Amount (\$) Payee address; City; State; Zip Code \$20.20 P.O. Box 1648 Reimbursement from political contributions intended Conroe, TX 77305 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation for County headquarters expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/05/2024 Montgomery County Republican Party Amount (\$) Payee address; City; State; Zip Code \$20.20 P.O. Box 1648 Reimbursement from political contributions Conroe, TX 77305 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation to County Party headquarters expense Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/07/2024 Montgomery County Republican Party Payee address; City; State; Zip Code Amount (\$) \$20.20 P.O. Box 1648 Reimbursement from political contributions intended Conroe, TX 77305 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation to County Party headquarters expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 4/4 Rpt: 10/11 Wright, Jay M. (Mr.) 00062819 Date Payee name 11/05/2024 Montgomery County Republican Party Amount (\$) Payee address; State; Zip Code City; P.O. Box 1648 \$20.20 Reimbursement from political contributions intended Conroe, TX 77305 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation to County Party for headquarters expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/05/2024 Montgomery County Republican Party Amount (\$) Payee address; City; State; Zip Code \$20.20 P.O. Box 1648 Reimbursement from political contributions Conroe, TX 77305 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation to County Party for headquarters expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

OUTSTAN	NDING LOANS	SCHEDULE L
The Instruction	on Guide explains how to complete this form.	1 Total pages Schedule L: Sch: 1/1 Rpt: 11/11
2 FILER NAME Wright, Jay M. ((Mr.)	3 Filer ID (Ethics Commission Filers) 00062819
LENDER INFORMATION	4 Name of lender Wright, Jay	<u> </u>
	5 Lender address; City; State; Zip Code	
	Conroe, TX 77302	
GUARANTOR INFORMATION	6 Name of guarantor	
X not applicable	7 Guarantor address; City; State; Zip Code	