

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00086218	2 Total pages filed: 60		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Teresa S.	MI	OFFICE USE ONLY		
	NICKNAME	LAST Terri Wilson	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 1416 Harbor View Drive			Date Hand-delivered or Date Postmarked		
	Galveston, TX 77550			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Dave	SUFFIX Wilson			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1416 Harbor View Drive		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Galveston, TX 77550					
7 CAMPAIGN TREASURER PHONE	AREA CODE (580)	PHONE NUMBER 749-9020	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 23 Galveston			12 OFFICE SOUGHT (if known) State Representative District 23		

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 60

13 C / OH NAME	Wilson, Teresa S. (The Honorable)		14 Filer ID (Ethics Commission Filers) 00086218
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME Texas Alliance for Life PAC	
	<input checked="" type="checkbox"/> GENERAL	COMMITTEE ADDRESS 8000 Centre Park Drive Suite 380 Austin, TX 78754	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Shaw, James	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 4505 Corazon Cv Round Rock, TX 78681	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 179,958.86
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 64,414.85
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 151,217.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

17 AFFIDAVIT

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

The Honorable Teresa S. Wilson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

3 of 60

18 FILER NAME	19 Filer ID (Ethics Commission Filers) 00086218
Wilson, Teresa S. (The Honorable)	
20 SCHEDULE SUBTOTALS	
NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 149,958.86
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 30,000.00
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 64,414.85
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 10.88

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/34 Rpt: 4/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/14/2025	5 Full name of contributor 28 Seawall BLVD 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$500.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 12/15/2025	Full name of contributor A&M PAC Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/15/2025	Full name of contributor All Inclusive Travel Hut Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$400.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/03/2025	Full name of contributor Ansell, William Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$1,041.02
	Principal occupation / Job title (See Instructions) Employer (See Instructions) COA HLB	
Date 11/18/2025	Full name of contributor Bahorich, Donna Contributor address; City; State; Zip Code Piney Point Village, TX 77024	Amount of Contribution (\$) \$1,041.02
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/34 Rpt: 5/60
2 FILER NAME Wilson, Teresa S. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Shawn	7 Amount of Contribution (\$) \$250.00	
	6 Contributor address; City; State; Zip Code League City, TX 77573		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) AMOCO FCU	
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barba, Michael	Amount of Contribution (\$) \$260.25	
	Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Colyandro Public Affairs	
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barba, Michael	Amount of Contribution (\$) \$500.00	
	Contributor address; City; State; Zip Code Austin, TX 78717		
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Colyandro Public Affairs	
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bary, Susan	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Galveston, TX 77554-2909		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Sandra	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/34 Rpt: 6/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Mary	7 Amount of Contribution (\$) \$390.38
	6 Contributor address; City; State; Zip Code League City, TX 77573	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bohlman, Luke	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Bohlman Agency
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bollich, Susan	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Hankamer, TX 77560	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Amanda	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Houston, TX 77058	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) The Sanctuary Foster Care
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Janice A.	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Pearland, TX 77581-6743	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/34 Rpt: 7/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Anthony	7 Amount of Contribution (\$) \$520.51
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McLeod, Alexander, Powel Apffel, P.C.
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Della	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code League City, TX 77573-1548	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Linda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Linda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callen, Margaret A.	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Santa fe, TX 77513-0986	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/34 Rpt: 8/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantini, Armin	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Galveston, TX 77551	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Fran	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card, Fran	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carnes, Franklin Rusty	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Funeral Director		Employer (See Instructions) Carnes Brothers Funeral Home
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cawley, Jennifer	Amount of Contribution (\$) \$1,100.00
	Contributor address; City; State; Zip Code Austin, TX 78747	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Association of Life and Health Insurers

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/34 Rpt: 9/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy, Inc. PAC 6 Contributor address; City; State; Zip Code Houston, TX 77210-4567	7 Amount of Contribution (\$) \$1,500.00
	8 Principal occupation / Job title (See Instructions) Administrator	9 Employer (See Instructions) Hospice Care Team Inc.
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Joe Contributor address; City; State; Zip Code Beaumont, TX 77713	Amount of Contribution (\$) \$1,500.00
	Principal occupation / Job title (See Instructions) Administrator	Employer (See Instructions) Hospice Care Team Inc.
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clements, Tony Contributor address; City; State; Zip Code Santa Fe, TX 77510	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Brand Manager	Employer (See Instructions) Coca-Cola
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cody Vasut Campaign Contributor address; City; State; Zip Code Angleton, TX 77516	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 07/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colangelo, Laura Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$200.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/34 Rpt: 10/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coltzer, William	7 Amount of Contribution (\$) \$5,205.08
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Zero Six Consulting
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyandro, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions) Public Affairs Consultant		Employer (See Instructions) Colyandro Public Affairs
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Combs, Patricia W.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Beach City, TX 77523	
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) CCIP
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Steven	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copeland, Wendy	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Hankamer, TX 77560	
Principal occupation / Job title (See Instructions) Director of Field Services		Employer (See Instructions) Natural Energy Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/34 Rpt: 11/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/16/2025	5 Full name of contributor CovestroPAC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Pittsburgh, PA 15205	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor Cowan, Robert	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Pearland, TX 77584	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor Davis, Beverly	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Liberty, TX 77575	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2025	Full name of contributor Del Papa Jr., Lawrence J.	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Texas City, TX 77591	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2025	Full name of contributor Delgado, Jason	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Texas City, TX 77590	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EPAM Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/34 Rpt: 12/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denys, James	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Spring, TX 77388	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin Burrows Campaign	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Austin, TX 78767	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ENPAC Texas	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonson, Susan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Susan M Edmonson
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Theresa	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/34 Rpt: 13/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emmons, Loretta	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Anahuac, TX 77514	
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Rapid Waste Solutions
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Ruben	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Santa Fe, TX 77517	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Santa Fe ISD
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulk, Dianna	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Hitchcock ISD
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Jack	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Emily	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/34 Rpt: 14/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flowers, Karen F.	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Donald	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Crystal Beach, TX 77650	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fluke, Marty	Amount of Contribution (\$) \$1,041.02
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of UTMB PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galveston County Apartment Association PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/34 Rpt: 15/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galveston Pilots for Good Government Inc.	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77552	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godinich, Sandra	Amount of Contribution (\$) \$1,041.02
	Contributor address; City; State; Zip Code Texas City, TX 77591	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Capitol Law Consulting Group
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg, Aaron	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Austin, TX 78704	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Battleship Texas
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLCO PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/34 Rpt: 16/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Marcy 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$52.05
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Richard Contributor address; City; State; Zip Code Denton, TX 76201	Amount of Contribution (\$) \$1,041.02
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hayes, Berry, White Vanzant, LLP
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Sarah Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, D. Anne Contributor address; City; State; Zip Code Galveston, TX 77551-5940	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrin, Katherine Contributor address; City; State; Zip Code La Marque, TX 77568	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) Investment		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/34 Rpt: 17/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsch, San Juana C. 6 Contributor address; City; State; Zip Code Galveston, TX 77554	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Recruiter		9 Employer (See Instructions) Burnett
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloman, Shannon Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) State Rep		Employer (See Instructions) State of Texas
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, Janis Contributor address; City; State; Zip Code Silsbee, TX 77656	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) State Rep		Employer (See Instructions) State of Texas
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HomePAC of Texas Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/34 Rpt: 18/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Pilots PAC 6 Contributor address; City; State; Zip Code Deer Park, TX 77536	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Debra Contributor address; City; State; Zip Code Santa Fe, TX 77617	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janke, Crystal Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$520.51
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joiner, Carl Contributor address; City; State; Zip Code Kemah, TX 77565	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lorraine Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$104.10
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 16/34 Rpt: 19/60
2 FILER NAME Wilson, Teresa S. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/24/2025	5 Full name of contributor Kelly, Brian	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$260.25
	6 Contributor address; City; State; Zip Code Houston, TX 77056		
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Landrys	
Date 11/10/2025	Full name of contributor Kelso, Mark	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Galveston ISD	
Date 11/10/2025	Full name of contributor Kelso, Mark	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Galveston ISD	
Date 12/05/2025	Full name of contributor Kirbie, Tina	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/03/2025	Full name of contributor Koebele, Stephen	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$1,041.02
	Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Attorney at Law		Employer (See Instructions) Self Employed	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/34 Rpt: 20/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koncaba, Kristi	7 Amount of Contribution (\$) \$520.51
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Dana	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Dana	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roxann	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Alvin, TX 77511	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh Dority & Associates, LLP	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Baytown, TX 77521	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/34 Rpt: 21/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maisel, Natalie	7 Amount of Contribution (\$) \$52.05
	6 Contributor address; City; State; Zip Code Houston, TX 77006	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00496307) Marathon Petroleum Corporation Employees PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Findlay, OH 45840-3229	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquez, Connie	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Self Employed
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Randy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Crystal Beach, TX 77650	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mata, Josue	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Beach City, TX 77523	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Premier Outdoor Living and Construction LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/34 Rpt: 22/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Samuel	7 Amount of Contribution (\$) \$260.25
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions) UTMB
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matranga, Lisa	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mattson, Bill	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McColgin, Leslie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis, Patrick (Dr.)	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Humana

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/34 Rpt: 23/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/12/2025	5 Full name of contributor McGuireWoods PAC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Richmond, VA 23219-1937	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2025	Full name of contributor McKenna, Esther	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/19/2025	Full name of contributor McLeroy, John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code College Station, TX 77845	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/13/2025	Full name of contributor McWilliams, Andrea	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) MGA
Date 12/08/2025	Full name of contributor Michetich, Robert	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code LaMarque, TX 77568	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 21/34 Rpt: 24/60
2 FILER NAME Wilson, Teresa S. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/12/2025	5 Full name of contributor Miles, Martin	<input type="checkbox"/> out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554		
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) Galveston park board	
Date 12/18/2025	Full name of contributor Moffa, Sherri	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code Dickinson, TX 77530		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/29/2025	Full name of contributor Mohn, Jerry	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Galveston, TX 77554		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 12/22/2025	Full name of contributor Morris, Lisa	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Santa Fe, TX 77510		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/08/2025	Full name of contributor Mulrain, Carol Jean	<input type="checkbox"/> out-of-state PAC (ID#:)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Galveston, TX 77550		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/34 Rpt: 25/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/04/2025	5 Full name of contributor Munisteri, Stephan	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions) Senior advisor		9 Employer (See Instructions) State of Texas
Date 12/16/2025	Full name of contributor Murphy, Tykisha	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code La Marque, TX 77568	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/24/2025	Full name of contributor Nguyen, Lisa	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Manicurist		Employer (See Instructions) Joy Nails
Date 12/19/2025	Full name of contributor Nichols, Anita L.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Baytown, TX 77520	
Principal occupation / Job title (See Instructions) Forensic Auditor		Employer (See Instructions) Contract
Date 12/16/2025	Full name of contributor Ott, Jennifer	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code League City, TX 77573	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Galveston County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/34 Rpt: 26/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Joshua 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$104.10
	8 Principal occupation / Job title (See Instructions) Manager	9 Employer (See Instructions) Galveston Economic Development Partnership
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedigo, Renell Contributor address; City; State; Zip Code Galveston, TX 77550-4339	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Juan Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$250.00
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 12/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Don Contributor address; City; State; Zip Code Texas City, TX 77590	Amount of Contribution (\$) \$31.23
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Don Contributor address; City; State; Zip Code Texas City, TX 77590	Amount of Contribution (\$) \$31.23
	Principal occupation / Job title (See Instructions) Retired	Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/34 Rpt: 27/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/10/2025	5 Full name of contributor Porter, Karan	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code San Leon, TX 77539	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/11/2025	Full name of contributor Putman, Alison	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Kemah, TX 77565	
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Resolve It, Inc.
Date 12/01/2025	Full name of contributor Raschke, Fred	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Galveston, TX 77554-1943	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mills Shirley, LLP
Date 12/17/2025	Full name of contributor Ratisseau, Philip	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) GC Specialist		Employer (See Instructions) Bureau Veritas
Date 11/17/2025	Full name of contributor Rawlins, Beau James	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) RBG

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/34 Rpt: 28/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renfro, Lisa A. 6 Contributor address; City; State; Zip Code Katy, TX 77449-8430	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Nicholas R. Contributor address; City; State; Zip Code Baytown, TX 77521-5035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigsby, Jane Contributor address; City; State; Zip Code Bayou Vista, TX 77563	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Christopher Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Sullivan Environmental Services inc
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Shelley Contributor address; City; State; Zip Code Taylor Lake Village, TX 77586	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Development		Employer (See Instructions) TPPF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/34 Rpt: 29/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 07/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russo, Christopher	7 Amount of Contribution (\$) \$26.03
	6 Contributor address; City; State; Zip Code El Lago, TX 77586	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Strong Borders Foundation
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos Stone, Maria Thereza	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Bayou Vista, TX 77563	
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) The Law Office of Lisa Vance, P.C.
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schrimbeck, Byron	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Baytown, TX 77521	
Principal occupation / Job title (See Instructions) Managing member		Employer (See Instructions) Deftec solutions
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott II, James M.	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Beaumont, TX 77705-9628	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Trans-Global Solutions, Inc.
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Joyce	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Dickinson, TX 77639	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/34 Rpt: 30/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shawgo, Janet	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Galveston, TX 77554	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Employer (See Instructions) Retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Destiny	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Coastal Refractory Services, Inc.Coastal Refractory Services
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smecca, John	Amount of Contribution (\$) \$520.51
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Restauranteur		Employer (See Instructions) Smecca Mngt
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Eric	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Baytown, TX 77523	
Principal occupation / Job title (See Instructions) IT Field Engineer		Employer (See Instructions) LyondellBasell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/34 Rpt: 31/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Steve Allen Kinard Campaign Account	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Richardson, TX 75080	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TXCRNA PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tarlton-Shannon, Terrilyn	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tenaris Global Services (USA) Corp PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77027-3531	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$50,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/34 Rpt: 32/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Apartment Association PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701-1951	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Life Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Cornerstone Credit Union League PAC Dallas, TX 75265-5147	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association PAC Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Lobby Strategies Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/34 Rpt: 33/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/13/2025	5 Full name of contributor Timm, Asta	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Galveston, TX 77550	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/27/2025	Full name of contributor Tinsley, Patrick E.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Crystal Beach, TX 77650-2386	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor Troutman Pepper Locke LLP	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77002	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/16/2025	Full name of contributor Van Noord, Leonard	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/18/2025	Full name of contributor Vance, Craig	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code The Woodlands, TX 77381	
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/34 Rpt: 34/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villemez, Steve	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Mont Belvieu, TX 77580-1320	
8 Principal occupation / Job title (See Instructions) Sales Engineer		9 Employer (See Instructions) Spirax Sarco
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DAVID	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Galveston, TX 77554	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DAVID	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Galveston, TX 77550-3179	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Stan	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Friendswood, TX 77546	
Principal occupation / Job title (See Instructions) Employee Care Coordinator		Employer (See Instructions) Spike Electric Controls
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/34 Rpt: 35/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waters, Lynda 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Glen Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$208.20
Principal occupation / Job title (See Instructions) Juvenile Probation Officer		Employer (See Instructions) Galveston County
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber for Congress Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$1,041.02
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendt, Paul Contributor address; City; State; Zip Code Galveston, TX 77554	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitley, David Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/34 Rpt: 36/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas BW-PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson Rappaport, Marsha	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Galveston, TX 77550	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodcock, Bruce	Amount of Contribution (\$) \$104.10
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokubaitis, Ronald	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Austin, TX 78746	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Self Employed
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeek, Donald	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dickinson, TX 77539	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/34 Rpt: 37/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zetterstrom, Lars 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$52.05
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 38/60</p>
<p>2 FILER NAME Wilson, Teresa S. (The Honorable)</p>				<p>3 Filer ID (Ethics Commission Filers) 00086218</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 12/31/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dustin Burrows Campaign</p> <p>7 Contributor address; City; State; Zip Code Austin, TX 78767</p>			<p>8 Amount of contribution (\$) \$10,000.00</p> <p>9 In-kind contribution description Polling</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 12/29/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC</p> <p>Contributor address; City; State; Zip Code Austin, TX 78701</p>			<p>Amount of contribution (\$) \$15,000.00</p> <p>In-kind contribution description Campaign Polling</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 12/30/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC</p> <p>Contributor address; City; State; Zip Code Austin, TX 78701</p>			<p>Amount of contribution (\$) \$5,000.00</p> <p>In-kind contribution description Campaign Polling</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 1/20 Rpt: 39/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/15/2025	5 Payee name Amazon	
6 Amount (\$) \$7.57	7 Payee address; City; State; Zip Code 410 Terry Ave. N Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/09/2025	Payee name Anahuac Area Chamber of Commerce	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 603 Miller St PO Box R Anahuac, TX 77514	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/22/2025	Payee name Best Western - Aiden	
Amount (\$) \$105.87	Payee address; City; State; Zip Code 2200 South I H 35 Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 2/20 Rpt: 40/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 08/06/2025	5 Payee name Best Western - Aiden	
6 Amount (\$) \$91.80	7 Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/12/2025	Payee name Best Western - Aiden	
Amount (\$) \$91.80	Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/19/2025	Payee name Best Western - Aiden	
Amount (\$) \$91.80	Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 3/20 Rpt: 41/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 08/25/2025	5 Payee name Best Western - Aiden	
6 Amount (\$) \$91.80	7 Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Best Western - Aiden	
Amount (\$) \$459.00	Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name Best Western - Aiden	
Amount (\$) \$183.60	Payee address; City; 2200 South I H 35 Austin, TX 78704	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) In-session hotel expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense In-session hotel expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 4/20 Rpt: 42/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/14/2025	5 Payee name Camp Political LLC	
6 Amount (\$) \$6,306.66	7 Payee address; City; State; Zip Code 401 NE 46th Street Oklahoma City, OK 73105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Mailer	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Casandra Hernandez for Texass	Office sought Office held
Date 07/18/2025	Payee name Casandra Hernandez for Texass	
Amount (\$) \$50.00	Payee address; City; State; Zip Code P.O. Box 1289 Addison, TX 75001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Committee Chairman Gift	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Committee Chairman Gift
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Clear Creek Republican Women	Office sought Office held
Date 09/25/2025	Payee name Clear Creek Republican Women	
Amount (\$) \$35.00	Payee address; City; State; Zip Code PO Box 2171 League City, TX 77574	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Casandra Hernandez for Texass	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 5/20 Rpt: 43/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/20/2025	5 Payee name Denson, Linda	
6 Amount (\$) \$3,764.97	7 Payee address; City; State; Zip Code 1019 16th Street Galveston, TX 77550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Devine Promotions & Printing LLC	
Amount (\$) \$62.12	Payee address; City; State; Zip Code 5411 Brookglen Suite B Houston, TX 77017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/26/2025	Payee name Devine Promotions & Printing LLC	
Amount (\$) \$130.05	Payee address; City; State; Zip Code 5411 Brookglen Suite B Houston, TX 77017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Flyers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 6/20 Rpt: 44/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/26/2025	5 Payee name Devine Promotions & Printing LLC	
6 Amount (\$) \$1,243.79	7 Payee address; City; State; Zip Code 5411 Brookglen Suite B Houston, TX 77017	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Banner and Flyers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/10/2025	Payee name Devine Promotions & Printing LLC	
Amount (\$) \$246.27	Payee address; City; State; Zip Code 5411 Brookglen Suite B Houston, TX 77017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Social Media	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Digiworld Media	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 2924 Colonial Dr. Dickinson, TX 77539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Video media services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video media services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 7/20 Rpt: 45/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 11/28/2025	5 Payee name Dustin Burrows Campaign	
6 Amount (\$) \$100.00	7 Payee address; City; 10507 Quaker Avenue Suite 103 Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Galveston Chamber of Commerce	
Amount (\$) \$250.00	Payee address; City; 2228 MECHANIC ST Suite 101 Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Galveston Chamber of Commerce	
Amount (\$) \$400.00	Payee address; City; 2228 MECHANIC ST Suite 101 Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Membership Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 8/20 Rpt: 46/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/06/2025	5 Payee name Galveston Island Pachyderm Club	
6 Amount (\$) \$80.00	7 Payee address; City; State; Zip Code 6341 Steward Road #119 Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/24/2025	Payee name Galveston Republican Women	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 908 Layfair Place Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Galveston Republican Women	
Amount (\$) \$70.00	Payee address; City; State; Zip Code 908 Layfair Place Friendswood, TX 77546	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 9/20 Rpt: 47/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218	
4 Date 12/26/2025	5 Payee name Galveston Republican Women		
6 Amount (\$) \$65.00	7 Payee address; City; 908 Layfair Place Friendswood, TX 77546		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Membership Fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 10/27/2025	Payee name Greg Abbott Campaign		
Amount (\$) \$250.00	Payee address; City; PO BOX 308 Austin, TX 78767		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held
Date 10/15/2025	Payee name Jeter, Robert		
Amount (\$) \$50.00	Payee address; City; 7115 Little Willow Dr. Pasadena, TX 77505		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Candidate/Officeholder name	Office sought Office sought	Office held Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 10/20 Rpt: 48/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 08/07/2025	5 Payee name La Brisa	
6 Amount (\$) \$20.00	7 Payee address; City; 501 North Wesley Drive League City, TX 77573	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/09/2025	Payee name La Brisa	
Amount (\$) \$20.00	Payee address; City; 501 North Wesley Drive League City, TX 77573	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name LeBlanc, Susan	
Amount (\$) \$50.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wallisville, TX 77597	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 11/20 Rpt: 49/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/16/2025	5 Payee name LeBlanc, Susan	
6 Amount (\$) \$1,853.83	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Wallisville, TX 77597	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Mont Belvieu Area Chamber of Commerce	Office sought Office held
Date 09/29/2025	Payee name Mont Belvieu Area Chamber of Commerce	
Amount (\$) \$295.00	Payee address; City; State; Zip Code P. O. Box 750 Mont Belvieu, TX 77580	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office Depot	Office sought Office held
Date 10/01/2025	Payee name Office Depot	
Amount (\$) \$32.15	Payee address; City; State; Zip Code 2711 61st St Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office Depot	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 12/20 Rpt: 50/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 10/02/2025	5 Payee name Office Depot	
6 Amount (\$) \$19.38	7 Payee address; City; 2711 61st St Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Propeller Club No. 10	Office sought Office held
Date 09/15/2025	Payee name Propeller Club No. 10	
Amount (\$) \$70.00	Payee address; City; P.O. Box 1115 Galveston, TX 77553	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Propeller Club No. 10	Office sought Office held
Date 12/08/2025	Payee name Propeller Club No. 10	
Amount (\$) \$45.00	Payee address; City; P.O. Box 1115 Galveston, TX 77553	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Propeller Club No. 10	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 13/20 Rpt: 51/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/14/2025	5 Payee name Rachele Faye Photography	
6 Amount (\$) \$54.13	7 Payee address; City; 7811 Black Oak Drive Suite D Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Photography	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/10/2025	Payee name Republican Party of Texas	
Amount (\$) \$750.00	Payee address; City; 807 Brazos St. Suite 701 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Filing Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/06/2025	Payee name Safe Haven Baby Boxes	
Amount (\$) \$53.00	Payee address; City; P.O.Box 185 Woodburn , IN 46797	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Donation for Chambers County Republican Women
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 14/20 Rpt: 52/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 07/14/2025	5 Payee name Seabreeze Beacon	
6 Amount (\$) \$35.00	7 Payee address; City; 1354 SH 124 Winnie, TX 77665	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) District newspaper subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense District newspaper subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name StampSale	
Amount (\$) \$42.90	Payee address; City; 1077 N. Willow Ave. Ste 105-405 Clovis, CA 93611	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Stamps	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/12/2025	Payee name Texas City/LaMarque Chamber of Commerce	
Amount (\$) \$40.00	Payee address; City; 9702 E.F. Lowry Expressway Texas City, TX 77591	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 15/20 Rpt: 53/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 09/16/2025	5 Payee name Texas Department of Criminal Justice	
6 Amount (\$) \$100.94	7 Payee address; City; State; Zip Code 8801 South 1st Street Suite 100 Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) End of session Staff Gifts	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense End of session Staff Gifts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Tocco, Dena	Office sought Office held
Date 10/23/2025	Payee name Tocco, Dena	
Amount (\$) \$49.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Tocco, Dena	Office sought Office held
Date 11/18/2025	Payee name Tocco, Dena	
Amount (\$) \$60.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Pearland, TX 77581	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Tocco, Dena	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 16/20 Rpt: 54/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218	
4 Date 11/06/2025	5 Payee name Tyra, Richard		
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Santa Fe, TX 77510-9603		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Citizen Appreciation Event Sponsorship	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	
Date 11/10/2025	Payee name USPS		
Amount (\$) \$11.90	Payee address; City; State; Zip Code 5826 BROADWAY ST Galveston, TX 77551-9998		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	
Date 07/17/2025	Payee name Uber		
Amount (\$) \$8.90	Payee address; City; State; Zip Code 1515 3rd Street San Francisco, CA 94158		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event transportation	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 17/20 Rpt: 55/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 09/15/2025	5 Payee name WILSON, DAVID	
6 Amount (\$) \$15,000.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Galveston, TX 77550	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Repayment/Reimbursement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name WILSON, DAVID	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Repayment/Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/18/2025	Payee name WILSON, DAVID	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Galveston, TX 77550	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Loan Repayment/Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 18/20 Rpt: 56/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/11/2025	5 Payee name WILSON, DAVID	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Galveston, TX 77550-3179	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/17/2025	Payee name Walmart	
Amount (\$) \$23.77	Payee address; City; State; Zip Code 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Thank you cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/21/2025	Payee name Walmart	
Amount (\$) \$16.97	Payee address; City; State; Zip Code 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Check printing expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check printing expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 19/20 Rpt: 57/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/09/2025	5 Payee name Walmart	
6 Amount (\$) \$10.74	7 Payee address; City; 6702 Seawall Blvd Galveston, TX 77551	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Name tags	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name tags
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name Walmart	
Amount (\$) \$54.36	Payee address; City; 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Name tags and Thank You cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name tags and Thank You cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/19/2025	Payee name Walmart	
Amount (\$) \$31.10	Payee address; City; 6702 Seawall Blvd Galveston, TX 77551	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Thank you cards	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: Sch: 20/20 Rpt: 58/60	2 FILER NAME Wilson, Teresa S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/29/2025	5 Payee name WinRed	
6 Amount (\$) \$1,394.68	7 Payee address; City; State; Zip Code 1776 Wilson Blvd Arlington, VA 22209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Solicitation/Fundraising Expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/2 Rpt: 59/60</p>
<p>2 FILER NAME Wilson, Teresa S. (The Honorable)</p>		<p>3 Filer ID (Ethics Commission Filers) 00086218</p>
<p>4 Date 07/08/2025</p>	<p>5 Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551</p>	<p>8 Amount (\$) \$2.06</p>
	<p>7 Purpose for which amount is received Campaign Account Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 08/07/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551</p>	<p>Amount (\$) \$2.16</p>
	<p>Purpose for which amount is received Campaign Account Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 09/08/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551</p>	<p>Amount (\$) \$2.32</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/07/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551</p>	<p>Amount (\$) \$1.44</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/07/2025</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551</p>	<p>Amount (\$) \$1.48</p>
	<p>Purpose for which amount is received Interest</p>	<input type="checkbox"/> Check if political contribution returned to filer

**INTEREST, CREDITS, GAINS, REFUNDS, AND
CONTRIBUTIONS RETURNED TO FILER****SCHEDULE K**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 2/2 Rpt: 60/60
2 FILER NAME Wilson, Teresa S. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00086218
4 Date 12/05/2025	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$1.42
	6 Address of person from whom amount is received; City; State; Zip Code Galveston, TX 77551	
	7 Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer