

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

| | | | | | | |
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| The C/OH Instruction Guide explains how to complete this form. | | | 1 Filer ID (Ethics Commission Filers) 00089820 | 2 Total pages filed: 69 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST Leigh | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Wambsganss | 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; P.O. Box 94095 Southlake, TX 76092 | | | Date Hand-delivered or Date Postmarked | | |
| | | | | Receipt # | Amount | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST Jim | MI | | | |
| | NICKNAME | LAST Wilkinson | SUFFIX | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 1 E Greenway Plaza Ste. 225 Houston, TX 77046 | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (817) 567-2345 | | | | | |
| 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 10/26/2025 | Day | Year | Month 12/31/2025 | Day | Year |
| 10 ELECTION | ELECTION DATE Month 01/31/2026 | | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 11 OFFICE | OFFICE HELD (if any) | | | 12 OFFICE SOUGHT (if known) State Senator District 9 | | |

GO TO PAGE 2

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

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

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| | | | |
|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------|
| 13 C / OH NAME | Wambsganss, Leigh | | 14 Filer ID (Ethics Commission Filers) 00089820 |
| 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 <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | \$ 35.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 527,620.85 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 300,259.61 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 361,637.45 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 200,000.00 |

17 AFFIDAVIT

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

Leigh Wambsganss

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

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|-----------------------------------------------------------------------------------------------------------------|--------------------|----------------------------|
| 18 FILER NAME | 19 Filer ID | (Ethics Commission Filers) |
| Wambsganss, Leigh | 00089820 | |
| 20 SCHEDULE SUBTOTALS | NAME OF SCHEDULE | |
| | SUBTOTAL AMOUNT | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 527,220.85 |
| 2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | 400.00 |
| 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 | \$ | 293,486.53 |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ | |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ | |
| 8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ | 6,773.08 |
| 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 type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/33 Rpt: 4/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Kirkendall, James | 7 Amount of Contribution (\$) \$26.35 |
| | 6 Contributor address; City; State; Zip Code Fort Worth, TX 76148 | |
| 8 Principal occupation / Job title (See Instructions) Bum | | 9 Employer (See Instructions) Retired |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, C. Dan | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Greenville, SC 29615 | |
| Principal occupation / Job title (See Instructions) Founder | | Employer (See Instructions) The Capital Corporation |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akowski, Melinda | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76126 | |
| Principal occupation / Job title (See Instructions) Realtor | | Employer (See Instructions) Self |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleshire, Stephen | Amount of Contribution (\$) \$156.56 |
| | Contributor address; City; State; Zip Code Athens, GA 30606 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleshire, Stephen | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Athens, GA 30606 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/33 Rpt: 5/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/01/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Greg | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code Texarkana, TX 75504 | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) The Arnold Companies |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashby, Katie | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) Beauty And Skin Care | | Employer (See Instructions) Mary Kay Independent Sales Director |
| Date 11/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Suzette | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Cleburne, TX 76033 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Mona | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code North Richland Hills, TX 76180 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bair, Timothy | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code North Grafton, MA 01536 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/33 Rpt: 6/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/01/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Steven | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Employer (See Instructions) Retired |
| Date 11/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barekman, Cheryl | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code Euless, TX 76039 | |
| Principal occupation / Job title (See Instructions) Ceo | | Employer (See Instructions) Southcrest Consulting, Llc |
| Date 12/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazan, Norma | Amount of Contribution (\$) \$41.98 |
| | Contributor address; City; State; Zip Code River Oaks, TX 76114 | |
| Principal occupation / Job title (See Instructions) Tcda | | Employer (See Instructions) |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Be Victorious Over Democrats PAC | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Irving, TX 75063 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/33 Rpt: 7/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/10/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berkley, Steven | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Keller, TX 76248 | |
| 8 Principal occupation / Job title (See Instructions) Inspector | | 9 Employer (See Instructions) American Airlines |
| Date 12/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, James | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Atty. | | Employer (See Instructions) Munck Wilson Mandala Llp |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bidne, Brian | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Millsap, TX 76066 | |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Self |
| Date 12/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Alan | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Vienna, VA 22181 | |
| Principal occupation / Job title (See Instructions) Data Architect | | Employer (See Instructions) Bah |
| Date 12/07/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Alan | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Vienna, VA 22181 | |
| Principal occupation / Job title (See Instructions) Data | | Employer (See Instructions) Bah |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/33 Rpt: 8/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Alan | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Vienna, VA 22181 | |
| 8 Principal occupation / Job title (See Instructions) Data | | 9 Employer (See Instructions) Bah |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Alan | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Vienna, VA 22181 | |
| Principal occupation / Job title (See Instructions) Data Architect | | Employer (See Instructions) Bah |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blake, Gary | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76109 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Creative Solutions Healthcare |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Donald | Amount of Contribution (\$) \$177.60 |
| | Contributor address; City; State; Zip Code Cottleville, MO 63304 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Bryan | Amount of Contribution (\$) \$50,000.00 |
| | Contributor address; City; State; Zip Code Atlanta, GA 30305 | |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) JC Bradford Family Office |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/33 Rpt: 9/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Susan | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092-3120 | |
| 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#: _____) Brown, Thomas | Amount of Contribution (\$) \$15.00 |
| | Contributor address; City; State; Zip Code Great Bend, KS 67530 | |
| Principal occupation / Job title (See Instructions) Oil Production/Services | | Employer (See Instructions) Self-Employed |
| Date 11/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buczek, Adam | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Marta | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Keller, TX 76248 | |
| 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#: _____) Campanella, Lisa | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/33 Rpt: 10/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cate, Randall | 7 Amount of Contribution (\$) \$50,000.00 |
| | 6 Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavin, Wylie | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Spicewood, TX 78669 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavin, Wylie | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Spicewood, TX 78669 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Centerpoint Energy PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77210 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Centracco, Robert | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Hurst, TX 76054 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/33 Rpt: 11/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chabot, Dr Paul | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Mckinney, TX 75071 | |
| 8 Principal occupation / Job title (See Instructions) Chabot Strategies | | 9 Employer (See Instructions) Self |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cliff, Eric | Amount of Contribution (\$) \$10.73 |
| | Contributor address; City; State; Zip Code Boise, ID 83704-1954 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosentino, Salvatore | Amount of Contribution (\$) \$3.44 |
| | Contributor address; City; State; Zip Code Milford, MA 01757 | |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 11/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Covel, Bill | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Gatesville, TX 76528 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio, John | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code Boerne, TX 78015 | |
| Principal occupation / Job title (See Instructions) Third Party Relationship Manager | | Employer (See Instructions) Usaa |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/33 Rpt: 12/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Disiere, Teresa | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dollar, James | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Joanne | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Bedford, TX 76021 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Jennifer | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) Texas Specialty Beverage |
| Date 12/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Clark | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Guthrie, OK 73044 | |
| 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: 10/33 Rpt: 13/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Clark | 7 Amount of Contribution (\$) \$15.00 |
| | 6 Contributor address; City; State; Zip Code Guthrie, OK 73044 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 11/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FW Firefighters Committee for Responsible Government | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flemin, JoAnn | Amount of Contribution (\$) \$521.15 |
| | Contributor address; City; State; Zip Code Flint, TX 75762 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Ron | Amount of Contribution (\$) \$94.06 |
| | Contributor address; City; State; Zip Code Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) Dsa | | Employer (See Instructions) Retired |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frederick, Linda | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/33 Rpt: 14/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frietsch, William | 7 Amount of Contribution (\$) \$52.40 |
| | 6 Contributor address; City; State; Zip Code Mt. Sterling, IL 62353 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frietsch, William | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Mt. Sterling, IL 62353 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, John | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Lindale, TX 75771 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Carolyn | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Ravenel, SC 29470 | |
| Principal occupation / Job title (See Instructions) Docent | | Employer (See Instructions) The Old Exchange And Provost Dungeon |
| Date 12/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Curtis | Amount of Contribution (\$) \$1,041.98 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76118 | |
| Principal occupation / Job title (See Instructions) Construction | | Employer (See Instructions) C. Green Scaping, Lp |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/33 Rpt: 15/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/13/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffith, Raymond | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Keller, TX 76248 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulf States Toyota Inc State PAC | Amount of Contribution (\$) \$7,500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77077 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunter, Kelton | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Weatherford, TX 76086-2326 | |
| Principal occupation / Job title (See Instructions) Manager | | Employer (See Instructions) Self |
| Date 12/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HCA Texas Good Government Fund | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75240 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Ralph | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Lago Vista, TX 78645 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/33 Rpt: 16/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hees, Carherine | 7 Amount of Contribution (\$) \$26.35 |
| | 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbst, Karen | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Dallas, TX 75248 | |
| Principal occupation / Job title (See Instructions) Oil And Gas Landamn | | Employer (See Instructions) Providence Minerals, Llc |
| Date 11/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herbst, Karen | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Dallas, TX 75248 | |
| Principal occupation / Job title (See Instructions) Oil And Gas Landamn | | Employer (See Instructions) Providence Minerals, Llc |
| Date 12/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinckley, Deborah | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Azle, TX 76020 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Alamo Pump Company |
| Date 10/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holcomb, John | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Bedford, TX 76021 | |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Nexans |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/33 Rpt: 17/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Terry | 7 Amount of Contribution (\$) \$52.40 |
| | 6 Contributor address; City; State; Zip Code San Marcos, CA 92078 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Terry | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code San Marcos, CA 92078 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Charles | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Trophy Club, TX 76262 | |
| Principal occupation / Job title (See Instructions) Partner | | Employer (See Instructions) Meritax Advisors |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Honea, Charles | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Westlake, TX 76262 | |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Self |
| Date 12/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Officers' Union PAC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77007 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/33 Rpt: 18/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody | 7 Amount of Contribution (\$) \$10,000.00 |
| | 6 Contributor address; City; State; Zip Code El Paso, TX 79913 | |
| 8 Principal occupation / Job title (See Instructions) Developer | | 9 Employer (See Instructions) Hunt Companies |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irwin, Diane | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76148 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnsen, Christine | Amount of Contribution (\$) \$156.56 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Daniel | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jolly, Janet | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Prescott Valley, AZ 86314 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/33 Rpt: 19/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Richard | 7 Amount of Contribution (\$) \$26.35 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) Cpa | | 9 Employer (See Instructions) Self |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Elouise | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | |
| Principal occupation / Job title (See Instructions) Homemaker | | Employer (See Instructions) Homemaker |
| Date 10/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingston-Bishop, Mary | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Tarrant |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, William | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76196 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/33 Rpt: 20/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/06/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krishna, Linda | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Berna | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Hidden Lake Group |
| Date 11/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Peter | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Mansfield, TX 76063 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lies, Douglas | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code Aledo, TX 76008 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftus, Jeffrey | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Florissant, MO 63033 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/33 Rpt: 21/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mach, Steven | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77219 | |
| 8 Principal occupation / Job title (See Instructions) Vp Finance | | 9 Employer (See Instructions) Mach Industrial Group Lp |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mady, Charles | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahrouq, Sam | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Arlington, TX 76006 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) MEI Inc. |
| Date 11/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marinko, Tom | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Kershaw, SC 29067 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLaughlin, Donald | Amount of Contribution (\$) \$1,041.98 |
| | Contributor address; City; State; Zip Code Uvalde, TX 78802 | |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) DKM Enterprises |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/33 Rpt: 22/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/27/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccarron, Adele | 7 Amount of Contribution (\$) \$36.77 |
| | 6 Contributor address; City; State; Zip Code Rockwall, TX 75087 | |
| 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#: _____) Mccarron, Adele | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Rockwall, TX 75087 | |
| 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#: _____) McClelland, David | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76137 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) The McClelland Law Firm |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinney, Michael | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Bristol, TN 37620 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Gregory Management Co., Llc |
| Date 12/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metroplex Republican Women | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Arlington, TX 76017 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/33 Rpt: 23/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/07/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milani, Chris | 7 Amount of Contribution (\$) \$104.48 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirza, Ali | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Finance | | Employer (See Instructions) District 5 |
| Date 11/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modica, Michael | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Hurst, TX 76054 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mogged, Charles | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monfrief, Richard | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76102 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Moncrief Energy |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/33 Rpt: 24/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/11/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrison, Peter | 7 Amount of Contribution (\$) \$2,000.00 |
| | 6 Contributor address; City; State; Zip Code Lumberton, TX 77657 | |
| 8 Principal occupation / Job title (See Instructions) Real Estate Developer | | 9 Employer (See Instructions) Self |
| Date 12/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Jeffrey | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code Keller, TX 76244 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pack, Tony | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Sam Pack Auto Group |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panek, Richard | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Richland Hills, TX 76128 | |
| Principal occupation / Job title (See Instructions) Project Manager | | Employer (See Instructions) Richard Panek |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Lea | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| Principal occupation / Job title (See Instructions) Outreach Director | | Employer (See Instructions) Us House Of Representatives |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/33 Rpt: 25/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James | 7 Amount of Contribution (\$) \$10,000.00 |
| | 6 Contributor address; City; State; Zip Code Tyler, TX 75711 | |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Citizens 1st Bank |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plamondon, Peggy | Amount of Contribution (\$) \$1,041.98 |
| | Contributor address; City; State; Zip Code Westlake, TX 76262 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Planzer, Bobby | Amount of Contribution (\$) \$21.17 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76109 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Political Action Committee of The Independened Insurance Agents of | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78768 | |
| 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#: _____) Polunsky, Allan | Amount of Contribution (\$) \$3,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78257 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Self |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 23/33 Rpt: 26/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontius, Frederick | 7 Amount of Contribution (\$) \$521.15 |
| | 6 Contributor address; City; State; Zip Code Riverside, CA 92503 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 12/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pontius, Frederick | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Aubrey, TX 76227 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Andy | Amount of Contribution (\$) \$21.15 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76147 | |
| Principal occupation / Job title (See Instructions) State District Judge | | Employer (See Instructions) |
| Date 11/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potenza, David | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Ceo | | Employer (See Instructions) Smg |
| Date 11/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Provider Coalition for Care PAC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Lewisville, TX 75057 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 24/33 Rpt: 27/69 |
| 2 FILER NAME Wambsganss, Leigh | | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puckett, James | 7 Amount of Contribution (\$) \$25.00 | |
| | 6 Contributor address; City; State; Zip Code Bullhead City, AZ 86442 | | |
| 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#: _____) Raffety, Clyde | Amount of Contribution (\$) \$30.00 | |
| | Contributor address; City; State; Zip Code Arlington, VA 76017 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rakes, David | Amount of Contribution (\$) \$50.00 | |
| | Contributor address; City; State; Zip Code Arlington, TX 76001 | | |
| 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#: _____) Rauch, Erick | Amount of Contribution (\$) \$10.73 | |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76137 | | |
| 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#: _____) Raymer, Dave | Amount of Contribution (\$) \$100.00 | |
| | Contributor address; City; State; Zip Code Watauga, TX 76148 | | |
| Principal occupation / Job title (See Instructions) Devsecops Architect | | Employer (See Instructions) Siriysxm | |
| | | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 25/33 Rpt: 28/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, James | 7 Amount of Contribution (\$) \$104.48 |
| | 6 Contributor address; City; State; Zip Code Fort Worth, TX 76244 | |
| 8 Principal occupation / Job title (See Instructions) Pilot | | 9 Employer (See Instructions) Aal |
| Date 12/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Horace | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Dwg, TX 76016 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Rusty | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Hurst, TX 76054 | |
| Principal occupation / Job title (See Instructions) Retail | | Employer (See Instructions) Sw Parts |
| Date 12/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rutherford, Teresa | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Colleyville, TX 76034 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/01/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Patrick | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 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: 26/33 Rpt: 29/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sansone, Joseph | 7 Amount of Contribution (\$) \$260.73 |
| | 6 Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savaryn, Oscar | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Westminster, MD 21157 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaver, Jean | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Rincon, GA 31326 | |
| Principal occupation / Job title (See Instructions) Business Owner | | Employer (See Instructions) Moms Against Gambling |
| Date 12/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segal, Lori | Amount of Contribution (\$) \$41.98 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanahan, Raymond | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Leonardtown, MD 20650 | |
| 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: 27/33 Rpt: 30/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Judith | 7 Amount of Contribution (\$) \$104.48 |
| | 6 Contributor address; City; State; Zip Code Irving, TX 75061 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Judith | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Irving, TX 75061 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelton, Dr.Don | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code Haltom City, TX 76117 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sigmund, Ruth | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Blue Bell, PA 19422-2406 | |
| 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#: _____) Smith, David | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Keller, TX 76244 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 28/33 Rpt: 31/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Kim | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Granbury, TX 76048 | |
| 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#: _____) Staggs, Mark | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Houston, TX 77079 | |
| Principal occupation / Job title (See Instructions) Banking | | Employer (See Instructions) Bokf,Na |
| Date 11/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stainbrook, Dennis | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Keller, TX 76248 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/27/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starcevich, Carolynn | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Northville, MI 48168 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TEXPAC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 29/33 Rpt: 32/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/03/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Frederick | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Lakeland, FL 33807 | |
| 8 Principal occupation / Job title (See Instructions) Accountant | | 9 Employer (See Instructions) Wayson Financial |
| Date 12/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans For Lawsuit Reform PAC | Amount of Contribution (\$) \$200,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77027 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Farm Bureau AgFund | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Waco, TX 76702 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/29/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Senate Leadership Fund | Amount of Contribution (\$) \$100,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77046 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thane, John | Amount of Contribution (\$) \$156.56 |
| | Contributor address; City; State; Zip Code Southlake, TX 76092 | |
| Principal occupation / Job title (See Instructions) Financial Advisor | | Employer (See Instructions) Self |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 30/33 Rpt: 33/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: The Beer Alliance of Texas PAC | 7 Amount of Contribution (\$) \$2,500.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78701 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: The Posey Law Firm | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Thomas, David | Amount of Contribution (\$) \$7.60 |
| | Contributor address; City; State; Zip Code Carlisle, PA 17013 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Thomas, John | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Rockwall, TX 75032 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Tobie Ceja, Melissa | Amount of Contribution (\$) \$10.73 |
| | Contributor address; City; State; Zip Code Stoughton, WI 53589 | |
| Principal occupation / Job title (See Instructions) Sales | | Employer (See Instructions) Nunya |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 31/33 Rpt: 34/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/28/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Brenda | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Indio, CA 92203-3172 | |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Sean | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Roanoke, TX 76262 | |
| Principal occupation / Job title (See Instructions) Agent | | Employer (See Instructions) Buffers Insurance |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TxANA PAC | Amount of Contribution (\$) \$2,012.00 |
| | 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#: _____) Union Pacific Corporation Fund For Effective Government | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Washington, DC 20004 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/11/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visel, Barbi | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code Pearl City, IL 61062 | |
| 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: 32/33 Rpt: 35/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visel, David | 7 Amount of Contribution (\$) \$50.00 |
| | 6 Contributor address; City; State; Zip Code Pearl City, IL 61062 | |
| 8 Principal occupation / Job title (See Instructions) University Executive Administration | | 9 Employer (See Instructions) State Of Texas |
| Date 11/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, James | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code Houston, TX 77002 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 12/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilde, John | Amount of Contribution (\$) \$26.35 |
| | Contributor address; City; State; Zip Code North Richland Hills, TX 76182 | |
| Principal occupation / Job title (See Instructions) Investor | | Employer (See Instructions) Kyle Wilks |
| Date 11/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilks, Kyle | Amount of Contribution (\$) \$260.73 |
| | Contributor address; City; State; Zip Code Cisco, TX 76437 | |
| Principal occupation / Job title (See Instructions) Cpa | | Employer (See Instructions) Tarrant County |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

| | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 33/33 Rpt: 36/69 |
| 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/27/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witmer, John 6 Contributor address; City; State; Zip Code Houston, TX 77095-3228 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) Retired |

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: 37/69</p> |
| <p>2 FILER NAME Wambsganss, Leigh</p> | | <p>3 Filer ID (Ethics Commission Filers) 00089820</p> |
| <p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p> | | <p>\$</p> |
| <p>5 Date 12/13/2025</p> | <p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eck, Stephen</p> <p>7 Contributor address; City; State; Zip Code Fort Worth, TX 76179</p> | <p>8 Amount of contribution (\$) \$200.00</p> <p>9 In-kind contribution description Block Walking</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 12/13/2025</p> <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Derek</p> <p>Contributor address; City; State; Zip Code Arlington, TX 76015</p> | | <p>Amount of contribution (\$) \$200.00</p> <p>In-kind contribution description Block Walking</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: 1/26 Rpt: 38/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/20/2025 | 5 Payee name Advantage Direct | |
| 6 Amount (\$) \$865.00 | 7 Payee address; City; State; Zip Code 6609 Willow Park Drive Ste 100 Naples, FL 34109 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Walk Program |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/04/2025 | Payee name Advantage Direct | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 6609 Willow Park Drive Ste 100 Naples, FL 34109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Walk Program |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/19/2025 | Payee name Advantage Direct | |
| Amount (\$) \$1,283.55 | Payee address; City; State; Zip Code 6609 Willow Park Drive Ste 100 Naples, FL 34109 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone Bank |
| 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: 2/26 Rpt: 39/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/03/2025 | 5 Payee name American Express | |
| 6 Amount (\$) \$16,681.61 | 7 Payee address; City; PO Box 96001 El Paso, TX 79998 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (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 Credit Card Payment |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/02/2025 | Payee name American Express | |
| Amount (\$) \$3,430.81 | Payee address; City; PO Box 96001 El Paso, TX 79998 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Credit Card Payment | (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 Credit Card Payment |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/28/2025 | Payee name Anedot | |
| Amount (\$) \$2.23 | Payee address; City; 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 3/26 Rpt: 40/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/31/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$12.60 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/01/2025 | Payee name Anedot | |
| Amount (\$) \$505.60 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/04/2025 | Payee name Anedot | |
| Amount (\$) \$4.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 4/26 Rpt: 41/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/06/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$7.90 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/07/2025 | Payee name Anedot | |
| Amount (\$) \$13.38 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/12/2025 | Payee name Anedot | |
| Amount (\$) \$4.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 5/26 Rpt: 42/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/13/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$2.30 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/17/2025 | Payee name Anedot | |
| Amount (\$) \$20.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/20/2025 | Payee name Anedot | |
| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 6/26 Rpt: 43/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/24/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$47.30 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/25/2025 | Payee name Anedot | |
| Amount (\$) \$2.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/26/2025 | Payee name Anedot | |
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 7/26 Rpt: 44/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/28/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$44.60 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/02/2025 | Payee name Anedot | |
| Amount (\$) \$8.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/10/2025 | Payee name Anedot | |
| Amount (\$) \$48.90 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 8/26 Rpt: 45/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/11/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$7.10 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/12/2025 | Payee name Anedot | |
| Amount (\$) \$9.90 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/26/2025 | Payee name Anedot | |
| Amount (\$) \$40.30 | Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 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: 9/26 Rpt: 46/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/26/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$22.90 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 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 Campaign Online Fundraising Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/03/2025 | Payee name Axiom | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code 800 W 47th St Ste 200 Kansas City, MO 64112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/01/2025 | Payee name Blakemore & Associates | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fees |
| 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: 10/26 Rpt: 47/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/01/2025 | 5 Payee name Blakemore & Associates | |
| 6 Amount (\$) \$5,000.00 | 7 Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Case Hall And Company | Office sought Office held |
| Date 10/29/2025 | Payee name Case Hall And Company | |
| Amount (\$) \$12,045.03 | Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Case Hall And Company | Office sought Office held |
| Date 10/31/2025 | Payee name Case Hall And Company | |
| Amount (\$) \$22,454.35 | Payee address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Case Hall And Company | 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: 11/26 Rpt: 48/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Payee name Department of the Treasury | |
| 6 Amount (\$) \$612.56 | 7 Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/31/2025 | Payee name Department of the Treasury | |
| Amount (\$) \$612.64 | Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/31/2025 | Payee name Department of the Treasury | |
| Amount (\$) \$324.56 | Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 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: 12/26 Rpt: 49/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/15/2025 | 5 Payee name Department of the Treasury | |
| 6 Amount (\$) \$324.56 | 7 Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/30/2025 | Payee name Department of the Treasury | |
| Amount (\$) \$324.56 | Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/15/2025 | Payee name Department of the Treasury | |
| Amount (\$) \$324.56 | Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 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: 13/26 Rpt: 50/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/31/2025 | 5 Payee name Department of the Treasury | |
| 6 Amount (\$) \$324.56 | 7 Payee address; City; State; Zip Code 1500 Pennsylvania Ave NW Washington, DC 20220 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/30/2025 | Payee name John Doner And Associates | |
| Amount (\$) \$2,923.94 | Payee address; City; State; Zip Code 1005 Congress Ave Ste 580 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Push Cards |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/03/2025 | Payee name John Doner And Associates | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code 1005 Congress Ave Ste 580 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Research Fees |
| 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: 14/26 Rpt: 51/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/07/2025 | 5 Payee name John Doner And Associates | |
| 6 Amount (\$) \$2,421.31 | 7 Payee address; City; 1005 Congress Ave Ste 580 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Voter Contact Mail |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/16/2025 | Payee name John Doner And Associates | |
| Amount (\$) \$2,500.00 | Payee address; City; 1005 Congress Ave Ste 580 Austin, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Research Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/17/2025 | Payee name Morrison, Luke | |
| Amount (\$) \$60.41 | Payee address; City; 11320 Beauvoir Ln Lumberton, TX 77657 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Mileage |
| 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: 15/26 Rpt: 52/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Payee name Morrison, Luke | |
| 6 Amount (\$) \$2,093.69 | 7 Payee address; City; 11320 Beauvoir Ln Lumberton, TX 77657 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Morrison, Luke | Office sought Office held |
| Date 12/31/2025 | Payee name Morrison, Luke | |
| Amount (\$) \$2,093.65 | Payee address; City; 11320 Beauvoir Ln Lumberton, TX 77657 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Niki's Italian Bistro | Office sought Office held |
| Date 11/30/2025 | Payee name Niki's Italian Bistro | |
| Amount (\$) \$1,949.09 | Payee address; City; 5249 David Blvd North Richland Hills, TX 76180 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Election Night Facilities Rental |
| 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: 16/26 Rpt: 53/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 10/31/2025 | 5 Payee name Parks, Tatum | |
| 6 Amount (\$) \$1,290.19 | 7 Payee address; City; 1112 La Paloma Ct Southlake, TX 76092 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/15/2025 | Payee name Parks, Tatum | |
| Amount (\$) \$1,794.18 | Payee address; City; 1112 La Paloma Ct Southlake, TX 76092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/30/2025 | Payee name Parks, Tatum | |
| Amount (\$) \$1,794.18 | Payee address; City; 1112 La Paloma Ct Southlake, TX 76092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| 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: 17/26 Rpt: 54/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Payee name Parks, Tatum | |
| 6 Amount (\$) \$1,794.18 | 7 Payee address; City; 1112 La Paloma Ct Southlake, TX 76092 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/31/2025 | Payee name Parks, Tatum | |
| Amount (\$) \$1,794.18 | Payee address; City; 1112 La Paloma Ct Southlake, TX 76092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/01/2025 | Payee name Patriot Mobile | |
| Amount (\$) \$250.00 | Payee address; City; 1111 South Main St Ste 101 Grapevine, TX 76051 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Rent |
| 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: 18/26 Rpt: 55/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Payee name Paychex | |
| 6 Amount (\$) \$181.71 | 7 Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | Office sought Office held |
| Date 12/31/2025 | Payee name Paychex | |
| Amount (\$) \$181.71 | Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | Office sought Office held |
| Date 10/31/2025 | Payee name Paychex | |
| Amount (\$) \$179.43 | Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | 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: 19/26 Rpt: 56/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/15/2025 | 5 Payee name Paychex | |
| 6 Amount (\$) \$179.43 | 7 Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | Office sought Office held |
| Date 11/30/2025 | Payee name Paychex | |
| Amount (\$) \$179.43 | Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | Office sought Office held |
| Date 12/15/2025 | Payee name Paychex | |
| Amount (\$) \$179.43 | Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Paychex | 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: 20/26 Rpt: 57/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/31/2025 | 5 Payee name Paychex | |
| 6 Amount (\$) \$179.43 | 7 Payee address; City; State; Zip Code 8605 Freeport Parkway Ste 100 Irving, TX 75063 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign PEO Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/07/2025 | Payee name Raconteur Media Company | |
| Amount (\$) \$3,250.00 | Payee address; City; State; Zip Code PO Box 26511 Austin, TX 78755 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Display Advertising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/05/2025 | Payee name Raconteur Media Company | |
| Amount (\$) \$3,310.00 | Payee address; City; State; Zip Code PO Box 26511 Austin, TX 78755 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Display Advertising |
| 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: 21/26 Rpt: 58/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 11/04/2025 | 5 Payee name Republican Party Of Texas | |
| 6 Amount (\$) \$1,250.00 | 7 Payee address; City; PO Box 2206 Austin, TX 78768 | |
| 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 Campaign Filing Fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/19/2025 | Payee name Ryan Data And Research | |
| Amount (\$) \$2,500.00 | Payee address; City; PO Box 202675 Austin, TX 78720-2675 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Research |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/31/2025 | Payee name South State Bank | |
| Amount (\$) \$2.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges |
| 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: 22/26 Rpt: 59/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 | |
| 4 Date 11/04/2025 | 5 Payee name South State Bank | | |
| 6 Amount (\$) \$15.00 | 7 Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 11/12/2025 | Payee name South State Bank | | |
| Amount (\$) \$105.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 11/25/2025 | Payee name South State Bank | | |
| Amount (\$) \$15.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| 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: 23/26 Rpt: 60/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 | |
| 4 Date 11/28/2025 | 5 Payee name South State Bank | | |
| 6 Amount (\$) \$2.00 | 7 Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 12/03/2025 | Payee name South State Bank | | |
| Amount (\$) \$12.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 12/03/2025 | Payee name South State Bank | | |
| Amount (\$) \$12.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges | |
| 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: 24/26 Rpt: 61/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/09/2025 | 5 Payee name South State Bank | |
| 6 Amount (\$) \$65.00 | 7 Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 12/16/2025 | Payee name South State Bank | Office held |
| Amount (\$) \$15.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 12/31/2025 | Payee name South State Bank | Office held |
| Amount (\$) \$2.00 | Payee address; City; 4120 Bellaire Blvd Houston, TX 77025 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Bank Charges |
| 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: 25/26 Rpt: 62/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 Date 12/15/2025 | 5 Payee name Texas Workforce Commission | |
| 6 Amount (\$) \$147.75 | 7 Payee address; City; 101 E 15th St Austin, TX 78778 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/31/2025 | Payee name Texas Workforce Commission | |
| Amount (\$) \$147.75 | Payee address; City; 101 E 15th St Austin, TX 78778 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Payroll Taxes |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/29/2025 | Payee name Weeks And Co. | |
| Amount (\$) \$173,153.00 | Payee address; City; 5701 W Slaughter Ste A-130-500 Austin, TX 78749 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Television Advertising |
| 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: 26/26 Rpt: 63/69 | 2 FILER NAME Wambsganss, Leigh | 3 Filer ID (Ethics Commission Filers) 00089820 | |
| 4 Date 10/31/2025 | 5 Payee name Weeks And Co. | | |
| 6 Amount (\$) \$4,500.00 | 7 Payee address; City; State; Zip Code 5701 W Slaughter Ste A-130-500 Austin, TX 78749 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Video Production Fees | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F4: Sch: 1/6 Rpt: 64/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution American Express | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$1,043.27 | (b) Date of Charge 10/27/2025 | (c) Date(s) Credit Card Issuer Paid 12/02/2025 |
| 7 PAYEE | (a) Payee name Richey Company | | (b) Payee address; City, State, Zip Code 3910 Teleport Blvd Irving, TX 75039 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Campaign Logoed Shirts |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$152.70 | (b) Date of Charge 11/09/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Evoice | | (b) Payee address; City, State, Zip Code 2231 South Barrington Ave Los Angeles, CA 90064 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Voicemail |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$29.99 | (b) Date of Charge 11/19/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Sign Up Genius | | (b) Payee address; City, State, Zip Code 1213 West Morehead St Suite 500 Charlotte, NC 28208 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Software Subscription |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F4: Sch: 2/6 Rpt: 65/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$15.14 | (b) Date of Charge 11/25/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Fedex Office | | (b) Payee address; City, State, Zip Code 7900 Legacy Dr Plano, TX 75024 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Delivery Fees |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$10.00 | (b) Date of Charge 12/02/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name PMC Parking | | (b) Payee address; City, State, Zip Code 3713 Charlotte Ave Nashville, TN 37209 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | | (b) Description Candidate Parking |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$8.50 | (b) Date of Charge 12/02/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name PMC Parking | | (b) Payee address; City, State, Zip Code 3713 Charlotte Ave Nashville, TN 37209 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | | (b) Description Tips For Valet At Event |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 3/6 Rpt: 66/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$39.44 | (b) Date of Charge 12/03/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Amazon | | (b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Office Supplies |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$15.14 | (b) Date of Charge 12/03/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Fedex Office | | (b) Payee address; City, State, Zip Code 7900 Legacy Dr Plano, TX 75024 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Delivery Fees |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$15.14 | (b) Date of Charge 12/03/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Fedex Office | | (b) Payee address; City, State, Zip Code 7900 Legacy Dr Plano, TX 75024 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Delivery Fees |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 4/6 Rpt: 67/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$48.40 | (b) Date of Charge 12/05/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Microsoft | | (b) Payee address; City, State, Zip Code 1 Microsoft Way Redmond, WA 98052 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Email Hosting |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$53.05 | (b) Date of Charge 12/06/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name McDonald's | | (b) Payee address; City, State, Zip Code 12540 North Bch St Keller, TX 76248 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Staff Meeting |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$76.76 | (b) Date of Charge 12/08/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Tarrant County Courthouse | | (b) Payee address; City, State, Zip Code 100 West Weatherford St Fort Worth, TX 76196-0204 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Maps |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 |
| | 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 F4: Sch: 5/6 Rpt: 68/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$19.45 | (b) Date of Charge 12/11/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Tarrant County Courthouse | | (b) Payee address; City, State, Zip Code 100 West Weatherford St Fort Worth, TX 76196-0204 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Maps |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$1,616.28 | (b) Date of Charge 12/12/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name First Graphics | | (b) Payee address; City, State, Zip Code 229 Garvon St Garland, TX 75040 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Campaign Yard Signs |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$38.58 | (b) Date of Charge 12/13/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Chick-Fil-A | | (b) Payee address; City, State, Zip Code 1505 North Collins St Unit 1307 Arlington, TX 76011 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description Campaign Staff Meeting |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F4: Sch: 6/6 Rpt: 69/69 | 2 FILER NAME Wambsganss, Leigh | | 3 Filer ID (Ethics Commission Filers) 00089820 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT | (a) Amount Charged \$29.99 | (b) Date of Charge 12/19/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Sign Up Genius | | (b) Payee address; City, State, Zip Code 1213 West Morehead St Suite 500 Charlotte, NC 28208 |
| 8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description Campaign Software Subscription |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$45.83 | (b) Date of Charge 12/20/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Family Donut | | (b) Payee address; City, State, Zip Code 7505 Davis Blvd Ste 200 North Richland Hills, TX 76182-7460 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | | (b) Description Campaign Staff Meeting |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |
| PAYMENT | (a) Amount Charged \$3,515.42 | (b) Date of Charge 12/18/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name First Graphics | | (b) Payee address; City, State, Zip Code 229 Garvon St Garland, TX 75040 |
| PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description Campaign Yard Signs |
| | | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought Office held |