

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

| | | | | | | |
|---|--|------------------------------------|---|--|--------|----------|
| The C/OH Instruction Guide explains how to complete this form. | | | 1 Filer ID (Ethics Commission Filers) 00084408 | 2 Total pages filed: 56 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | FIRST The Honorable James D. | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Jim Wright | SUFFIX | Date Received ELECTRONICALLY FILED 01/15/2026 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 11540 Austin, TX 78711 | | | Date Hand-delivered or Date Postmarked | | |
| | | | | Receipt # | Amount | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST The Honorable Kent | MI | | | |
| | NICKNAME | LAST Hance | SUFFIX | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 203 W. 10th St. Austin, TX 78701 | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 479-8888 | | | | | |
| 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 09/04/2025 | Day | Year | Month 12/31/2025 | Day | Year |
| 10 ELECTION | ELECTION DATE Month 03/03/2026 | | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 11 OFFICE | OFFICE HELD (if any) Railroad Commissioner | | | 12 OFFICE SOUGHT (if known) Railroad Commissioner | | |

GO TO PAGE 2

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

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

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| | | | |
|--|--|--------------------------------------|---|
| 13 C / OH NAME | Wright, James D. (The Honorable) | | 14 Filer ID (Ethics Commission Filers) 00084408 |
| 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) | | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 518,450.66 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 211,245.25 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 655,846.32 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 0.00 |

17 AFFIDAVIT

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

The Honorable James D. Wright

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) 00084408 |
| Wright, James D. (The Honorable) | |
| 20 SCHEDULE SUBTOTALS | |
| NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 518,450.66 |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 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 | \$ 211,245.25 |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. <input 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: 1/19 Rpt: 4/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahuja, Avinash | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Align Public Affairs LLC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apache Corporation PAC | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77042 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aycock, Brian | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BP North America Employee PAC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77079 | |
| 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: 2/19 Rpt: 5/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best, Tom 6 Contributor address; City; State; Zip Code Kingsville, TX 78364 | 7 Amount of Contribution (\$) \$3,000.00 |
| | 8 Principal occupation / Job title (See Instructions) Principal | 9 Employer (See Instructions) Rockin B |
| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bluntzer, Shay Contributor address; City; State; Zip Code San Antonio, TX 78260 | Amount of Contribution (\$) \$500.00 |
| | Principal occupation / Job title (See Instructions) Owner | Employer (See Instructions) Marlin Blue Strategists |
| Date 09/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolling, Harrison Contributor address; City; State; Zip Code Houston, TX 77024 | Amount of Contribution (\$) \$5,000.00 |
| | Principal occupation / Job title (See Instructions) Executive | Employer (See Instructions) Water Bridge |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchard, Richard Contributor address; City; State; Zip Code Corpus Christi, TX 77994 | Amount of Contribution (\$) \$500.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boss, Daniel Contributor address; City; State; Zip Code Houston, TX 77007 | Amount of Contribution (\$) \$5,000.00 |
| | Principal occupation / Job title (See Instructions) Executive Vice President | Employer (See Instructions) Enterprise Products |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/19 Rpt: 6/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Amanda | 7 Amount of Contribution (\$) \$5,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77027 | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Aris Water |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, John | Amount of Contribution (\$) \$200.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78746 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Scott, Douglass & McConnico |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Cody | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| Principal occupation / Job title (See Instructions) Co-CEO and Founder | | Employer (See Instructions) Double Eagle |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Geren Campaign Account | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76101 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevron Employees PAC | Amount of Contribution (\$) \$10,000.00 |
| | 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

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/19 Rpt: 7/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/09/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, James | 7 Amount of Contribution (\$) \$1,500.00 |
| | 6 Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657 | |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Self |
| Date 09/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ConocoPhillips Spirit PAC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Bartlesville, OK 74004 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danos, Hank | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Cut Off, LA 70345 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Danos |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jim | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Marshall, TX 75671 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) Davis Elite Energy |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diamondback Energy TX PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79701 | |
| 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: 5/19 Rpt: 8/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Donaldson, Susannah & Briggs | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Midland, TX 79707 | |
| 8 Principal occupation / Job title (See Instructions) Manager | | 9 Employer (See Instructions) Purvis Operating Co. |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ExxonMobil PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Irving, TX 75039 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Fasken Management LLC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79707 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ferenz, Jake | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Fulshear, TX 77441 | |
| Principal occupation / Job title (See Instructions) Executive | | Employer (See Instructions) Water Bridge |
| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Garza, Rudy D | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78258 | |
| Principal occupation / Job title (See Instructions) MGMT | | Employer (See Instructions) CPS Energy |
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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: 6/19 Rpt: 9/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Angela | 7 Amount of Contribution (\$) \$250.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halliburton Company PAC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77072 | |
| 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#: _____) Hancock, Travis | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77008 | |
| Principal occupation / Job title (See Instructions) CFO | | Employer (See Instructions) EnerVest |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Cole | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79705 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Julie | Amount of Contribution (\$) \$100.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76147 | |
| Principal occupation / Job title (See Instructions) Interior Designer | | Employer (See Instructions) Julie Hayes |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/19 Rpt: 10/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hines, Scott | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78410 | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Occidental |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollub, Vicki | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code Galveston, TX 77554 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Occidental |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Pilots PAC | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Deer Park, TX 77536 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard Energy Partners State PAC | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78256 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes Jr., Dan Allen | Amount of Contribution (\$) \$1,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Principal occupation / Job title (See Instructions) Investor | | Employer (See Instructions) Self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/19 Rpt: 11/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hummell, Michael | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78466 | |
| 8 Principal occupation / Job title (See Instructions) CEO | | 9 Employer (See Instructions) Hunt Oil |
| Date 12/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Ray | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75201 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Hunt Oil |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huseman Law Firm PLLC | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| 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#: _____) Jackson Walker L.L.P. PAC | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78701 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOCHPAC | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Wichita, KS 67220 | |
| 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: 9/19 Rpt: 12/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, John | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78401 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 12/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Gosselink Rochelle & Townsend, P.C. | 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 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loeb, David | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallick, Stephen | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Ft. Worth, TX 76185 | |
| Principal occupation / Job title (See Instructions) Builder | | Employer (See Instructions) Mallick Construction |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manufacturers PAC of Texas | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78711 | |
| 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: 10/19 Rpt: 13/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marathon Petroleum Corporation PAC 6 Contributor address; City; State; Zip Code Findlay, OH 45840 | 7 Amount of Contribution (\$) \$5,000.00 |
| | 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Date 10/30/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGinnis Lochridge Contributor address; City; State; Zip Code Austin, TX 78703 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 12/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuireWoods PAC Contributor address; City; State; Zip Code Richmond, VA 23219 | Amount of Contribution (\$) \$2,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 12/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQueen, Ken Contributor address; City; State; Zip Code Tulsa, OK 74105 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) Petroleum Engineer Kenenergy Consulting | |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Greg Contributor address; City; State; Zip Code Corpus Christi, TX 78409 | Amount of Contribution (\$) \$25,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) President MEYER | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/19 Rpt: 14/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/22/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Jeff | 7 Amount of Contribution (\$) \$25,000.00 |
| | 6 Contributor address; City; State; Zip Code Sandia, TX 78383 | |
| 8 Principal occupation / Job title (See Instructions) Vice President | | 9 Employer (See Instructions) MEYER |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, John | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Lawrence | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78412 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mintz, Michael | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78735 | |
| Principal occupation / Job title (See Instructions) Director, State Government Affairs | | Employer (See Instructions) Occidental |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/19 Rpt: 15/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor Moore, Julie Austin, TX 78735 | 7 Amount of Contribution (\$) \$500.00 |
| | 6 Contributor address; City; State; Zip Code | |
| 8 Principal occupation / Job title (See Instructions) Director, State Government Affairs | | 9 Employer (See Instructions) Occidental |
| Date 11/12/2025 | Full name of contributor NGL Texas PAC Austin, TX 78709 | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/01/2025 | Full name of contributor NRG Energy Inc PAC Houston, TX 77002 | Amount of Contribution (\$) \$3,000.00 |
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 10/30/2025 | Full name of contributor Nolen, Wesley Borger, TX 79008 | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/13/2025 | Full name of contributor North American Coal Corp PAC (Texas) Plano, TX 75024 | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code | |
| 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: 13/19 Rpt: 16/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/30/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North Houston Pole Line 6 Contributor address; City; State; Zip Code Spring, TX 77389 | 7 Amount of Contribution (\$) \$2,500.00 |
| | 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuss, Patricia Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | Amount of Contribution (\$) \$500.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ONEOK Employees PAC Contributor address; City; State; Zip Code Austin, TX 78701 | Amount of Contribution (\$) \$2,500.00 |
| | Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ocko, Matthew Contributor address; City; State; Zip Code Sugar Land, TX 77479 | Amount of Contribution (\$) \$25,000.00 |
| | Principal occupation / Job title (See Instructions) Venture Capital Investor | Employer (See Instructions) Matthew Ocko |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovintiv USA PAC Contributor address; City; State; Zip Code Denver, CO 80202 | Amount of Contribution (\$) \$4,000.00 |
| | 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: 14/19 Rpt: 17/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Robert | 7 Amount of Contribution (\$) \$2,500.00 |
| | 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78469 | |
| 8 Principal occupation / Job title (See Instructions) Chairman | | 9 Employer (See Instructions) REP Holdings |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Tyler, TX 75711 | |
| Principal occupation / Job title (See Instructions) President | | Employer (See Instructions) Citizens 1st Bank |
| Date 12/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot Jr., Ross | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75219 | |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Hillwood |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips 66 PAC | Amount of Contribution (\$) \$2,500.66 |
| | Contributor address; City; State; Zip Code Houston, TX 77042 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pletcher, Tony | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code Corpus Christi, TX 78418 | |
| 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: 15/19 Rpt: 18/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/12/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rees-Jones, Trevor | 7 Amount of Contribution (\$) \$25,000.00 |
| | 6 Contributor address; City; State; Zip Code Dallas, TX 75225 | |
| 8 Principal occupation / Job title (See Instructions) Founder | | 9 Employer (See Instructions) Chief Oil and Gas |
| Date 09/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kirk | Amount of Contribution (\$) \$10,000.00 |
| | Contributor address; City; State; Zip Code Lubbock, TX 79424 | |
| Principal occupation / Job title (See Instructions) Owner | | Employer (See Instructions) SK Rogers |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Bob | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77002 | |
| Principal occupation / Job title (See Instructions) Executive Vice President | | Employer (See Instructions) Enterprise Products |
| Date 11/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savage, Leif | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Midland, TX 79705 | |
| Principal occupation / Job title (See Instructions) Owner / CEO | | Employer (See Instructions) Tall City Brine LLC |
| Date 12/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, John | Amount of Contribution (\$) \$25,000.00 |
| | Contributor address; City; State; Zip Code Fort Worth, TX 76107 | |
| Principal occupation / Job title (See Instructions) Co-CEO and Founder | | Employer (See Instructions) Double Eagle |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/19 Rpt: 19/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/04/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheffield, Bryan | 7 Amount of Contribution (\$) \$25,000.00 |
| | 6 Contributor address; City; State; Zip Code Austin, TX 78701 | |
| 8 Principal occupation / Job title (See Instructions) Partner | | 9 Employer (See Instructions) Formentera |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheikh, Mohammad | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Longview, TX 75604 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 09/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spreen, Lauren | Amount of Contribution (\$) \$5,000.00 |
| | Contributor address; City; State; Zip Code Austin, TX 78703 | |
| Principal occupation / Job title (See Instructions) Consulting | | Employer (See Instructions) Self |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamper, Calvin | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Longview, TX 75606 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 12/22/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susser, Sam | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75220 | |
| 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: 17/19 Rpt: 20/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC-Texas Realtors PAC 6 Contributor address; City; State; Zip Code Austin, TX 78768 | 7 Amount of Contribution (\$) \$10,000.00 |
| | 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXOGA Good Government Committee Austin, TX 78701 | Amount of Contribution (\$) \$25,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Targa Resources Texas PAC Houston, TX 77002 | Amount of Contribution (\$) \$1,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Randy Austin, TX 78746 | Amount of Contribution (\$) \$5,000.00 |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Pinnacle Potash | |
| Date 11/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Alliance for Life PAC Austin, TX 78754 | Amount of Contribution (\$) \$100.00 |
| | 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: 18/19 Rpt: 21/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/18/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Williams Companies PAC 6 Contributor address; City; State; Zip Code Tulsa, OK 74172 | 7 Amount of Contribution (\$) \$2,500.00 |
| | 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
| Date 10/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Threlkeld, Todd Contributor address; City; State; Zip Code Tyler, TX 75701 | | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Threlkeld & Co Insurance |
| Date 10/16/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Cliff Contributor address; City; State; Zip Code Longbranch, TX 75669 | | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trolley, Dolly Contributor address; City; State; Zip Code Corpus Christi, TX 78411 | | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/19/2025 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks, Linda Contributor address; City; State; Zip Code Premont, TX 78375 | | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) Board Member | | Employer (See Instructions) First Community Bank |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | |
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| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule A1: Sch: 19/19 Rpt: 22/56 |
| 2 FILER NAME Wright, James D. (The Honorable) | | | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/22/2025 | 5 Full name of contributor Weeks, Linda | 6 Contributor address; City; State; Zip Code Premont, TX 78375 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) Board Member | | 9 Employer (See Instructions) First Community Bank | |
| Date 09/05/2025 | Full name of contributor Weitzel, Harry | □ out-of-state PAC (ID#): _____ | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77005 | | |
| Principal occupation / Job title (See Instructions) Executive Vice President | | Employer (See Instructions) Enterprise Products | |

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: 1/34 Rpt: 23/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/26/2025 | 5 Payee name 7 Eleven | |
| 6 Amount (\$) \$15.41 | 7 Payee address; City; 22553 I-35 Kyle, TX 78640 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/19/2025 | Payee name 7 Eleven | |
| Amount (\$) \$37.60 | Payee address; City; 22553 I-35 Kyle, TX 78640 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/08/2025 | Payee name Alamo City Republican Women | |
| Amount (\$) \$30.00 | Payee address; City; 2186 Jackson Keller Road, Ste 129 San Antonio, TX 78213 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ticket |
| 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: 2/34 Rpt: 24/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/08/2025 | 5 Payee name Amazon | |
| 6 Amount (\$) \$158.17 | 7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office 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 supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/19/2025 | Payee name American Airlines | |
| Amount (\$) \$32.00 | Payee address; City; State; Zip Code 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 travel expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/26/2025 | Payee name American Airlines | |
| Amount (\$) \$24.90 | Payee address; City; State; Zip Code 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 travel expenses |
| 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: 3/34 Rpt: 25/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/26/2025 | 5 Payee name American Airlines | |
| 6 Amount (\$) \$696.97 | 7 Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 8 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 travel expenses |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/20/2025 | Payee name American Airlines | |
| Amount (\$) \$504.97 | Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 travel expenses |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/08/2025 | Payee name American Airlines | |
| Amount (\$) \$237.06 | Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 ticket |
| 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.

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|---|--|--|
| 1 Total pages Schedule F1: Sch: 4/34 Rpt: 26/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/08/2025 | 5 Payee name American Airlines | |
| 6 Amount (\$) \$219.71 | 7 Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 8 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 ticket |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/08/2025 | Payee name American Airlines | |
| Amount (\$) \$554.49 | Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 ticket |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/04/2025 | Payee name American Airlines | |
| Amount (\$) \$229.00 | Payee address; City; 1 Skyview Dr. Fort Worth, TX 76155 | |
| 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 ticket |
| 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: 5/34 Rpt: 27/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/31/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$323.80 | 7 Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| 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 credit card fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/30/2025 | Payee name Anedot | |
| Amount (\$) \$1,118.10 | Payee address; City; State; Zip Code 1340 Poydras Street Suite 1770 New Orleans, LA 70112 | |
| 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 credit card fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/04/2025 | Payee name Avis | |
| Amount (\$) \$82.72 | Payee address; City; State; Zip Code 379 Interpace Pkwy Parsippany, NJ 07054 | |
| 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 rental car |
| 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: 6/34 Rpt: 28/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/17/2025 | 5 Payee name Bee County Republican Women | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; 2675 Airport Beeville, TX 78102 | State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/20/2025 | Payee name Blue Cross Blue Shield | |
| Amount (\$) \$477.90 | Payee address; City; 1001 E. Lookout Dr. Richardson, TX 75082 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) insurance | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense insurance |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/04/2025 | Payee name Blue Cross Blue Shield | |
| Amount (\$) \$441.13 | Payee address; City; 1001 E. Lookout Dr. Richardson, TX 75082 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) insurance | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense insurance |
| 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: 7/34 Rpt: 29/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/20/2025 | 5 Payee name Buc-ees | |
| 6 Amount (\$) \$32.91 | 7 Payee address; City; State; Zip Code 10484 US-59 Wharton, TX 77488 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/06/2025 | Payee name Central Texas Republican Women | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code PO Box 24 Belton, TX 76513 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ticket |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/05/2025 | Payee name Collin County GOP | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 2963 W 15th St Plano, TX 75075 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsorship |
| 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: 8/34 Rpt: 30/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/05/2025 | 5 Payee name Courtyard Marriott | |
| 6 Amount (\$) \$217.00 | 7 Payee address; City; 3150 Riverfront Dr. Fort Worth, TX 76107 | |
| 8 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 hotel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/11/2025 | Payee name Courtyard Marriott | |
| Amount (\$) \$258.11 | Payee address; City; 916 Dallas Houston, TX 77002 | |
| 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 hotel stay |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/10/2025 | Payee name Davis, Michael | |
| Amount (\$) \$565.25 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 reimbursements |
| 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: 9/34 Rpt: 31/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/26/2025 | 5 Payee name Davis, Michael | |
| 6 Amount (\$) \$82.27 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 8 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 reimbursements |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | Office sought Office held |
| Date 09/18/2025 | Payee name Davis, Michael | |
| Amount (\$) \$107.29 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 reimbursements |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | Office sought Office held |
| Date 09/10/2025 | Payee name Davis, Michael | |
| Amount (\$) \$19.76 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 reimbursement |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | 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: 10/34 Rpt: 32/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/31/2025 | 5 Payee name Davis, Michael | |
| 6 Amount (\$) \$4,784.00 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 salary |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | Office sought Office held |
| Date 12/02/2025 | Payee name Davis, Michael | |
| Amount (\$) \$4,784.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 salary |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | Office sought Office held |
| Date 10/31/2025 | Payee name Davis, Michael | |
| Amount (\$) \$4,784.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 salary |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Davis, Michael | 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: 11/34 Rpt: 33/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/30/2025 | 5 Payee name Davis, Michael | |
| 6 Amount (\$) \$4,784.00 | 7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Austin, TX 78723 | |
| 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 salary |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/18/2025 | Payee name Dudley Group | |
| Amount (\$) \$10,000.00 | Payee address; City; State; Zip Code 1605 W 35th St Austin, TX 78703 | |
| 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 consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/19/2025 | Payee name Dudley Group | |
| Amount (\$) \$10,000.00 | Payee address; City; State; Zip Code 1605 W 35th St Austin, TX 78703 | |
| 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 consulting |
| 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: 12/34 Rpt: 34/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 | |
| 4 Date 10/22/2025 | 5 Payee name Dudley Group | | |
| 6 Amount (\$) \$10,000.00 | 7 Payee address; City; 1605 W 35th St Austin, TX 78703 | | |
| 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 consulting | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Dudley Group | Office sought Austin, TX 78703 | Office held |
| Date 10/01/2025 | Payee name Dudley Group | | |
| Amount (\$) \$10,000.00 | Payee address; City; 1605 W 35th St Austin, TX 78703 | | |
| 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 consulting | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Embassy Suites | Office sought | Office held |
| Date 12/04/2025 | Payee name Embassy Suites | | |
| Amount (\$) \$252.74 | Payee address; City; 1515 Dallas St. Houston, TX 77010 | | |
| 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 hotel stay | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Embassy Suites | 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: 13/34 Rpt: 35/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/27/2025 | 5 Payee name Fairfield Inn | |
| 6 Amount (\$) \$357.61 | 7 Payee address; City; 422 Bonham San Antonio, TX 78205 | |
| 8 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 hotel stay |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/18/2025 | Payee name Fedex | |
| Amount (\$) \$28.50 | Payee address; City; 942 Shady Grove Rd S Memphis, TN 38120 | |
| 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 printing expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/10/2025 | Payee name Fedex | |
| Amount (\$) \$114.90 | Payee address; City; 942 Shady Grove Rd S Memphis, TN 38120 | |
| 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 printing |
| 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: 14/34 Rpt: 36/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/08/2025 | 5 Payee name Go Creative | |
| 6 Amount (\$) \$7,541.25 | 7 Payee address; City; State; Zip Code 5511 Parkcrest Dr. Ste. 103 Austin, TX 78731 | |
| 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 digital services |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/10/2025 | Payee name Go Creative | |
| Amount (\$) \$7,541.25 | Payee address; City; State; Zip Code 5511 Parkcrest Dr. Ste. 103 Austin, TX 78731 | |
| 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 digital services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/08/2025 | Payee name Go Creative | |
| Amount (\$) \$26,330.00 | Payee address; City; State; Zip Code 5511 Parkcrest Dr. Ste. 103 Austin, TX 78731 | |
| 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 digital services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | | |
|---|---|---|----------------------------|
| 1 Total pages Schedule F1: Sch: 15/34 Rpt: 37/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 | |
| 4 Date 09/15/2025 | 5 Payee name Go Creative | | |
| 6 Amount (\$) \$22,541.25 | 7 Payee address; City; 5511 Parkcrest Dr. Ste. 103 Austin, TX 78731 | | |
| 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 digital services | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |
| Date 12/23/2025 | Payee name Godaddy | | |
| Amount (\$) \$166.04 | Payee address; City; 14455 N Hayden Rd Suite 100 Scottsdale, AZ 85260 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) website | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |
| Date 12/01/2025 | Payee name Google | | |
| Amount (\$) \$35.82 | Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 16/34 Rpt: 38/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/03/2025 | 5 Payee name Google | |
| 6 Amount (\$) \$35.82 | 7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/02/2025 | Payee name Google | |
| Amount (\$) \$35.82 | Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/27/2025 | Payee name Grand Hyatt | |
| Amount (\$) \$1,122.29 | Payee address; City; State; Zip Code 600 E. Market San Antonio, TX 78205 | |
| 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 hotel stay |
| 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: 17/34 Rpt: 39/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/16/2025 | 5 Payee name HEB | |
| 6 Amount (\$) \$30.19 | 7 Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/20/2025 | Payee name HEB | |
| Amount (\$) \$37.44 | Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/08/2025 | Payee name HEB | |
| Amount (\$) \$44.77 | Payee address; City; State; Zip Code 701 S Capital of Texas Hwy West Lake Hills, TX 78746 | |
| 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 fuel |
| 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: 18/34 Rpt: 40/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/04/2025 | 5 Payee name Holland Taucher Consulting Group | |
| 6 Amount (\$) \$2,500.00 | 7 Payee address; City; State; Zip Code PO Box 684281 Austin, TX 78768 | |
| 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 fundraising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Holland Taucher Consulting Group | Office sought Office held |
| Date 10/08/2025 | Payee name Holland Taucher Consulting Group | |
| Amount (\$) \$2,536.19 | Payee address; City; State; Zip Code PO Box 684281 Austin, TX 78768 | |
| 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 fundraising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Holland Taucher Consulting Group | Office sought Office held |
| Date 09/17/2025 | Payee name Holland Taucher Consulting Group | |
| Amount (\$) \$12,749.99 | Payee address; City; State; Zip Code PO Box 684281 Austin, TX 78768 | |
| 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 fundraising |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Holland Taucher Consulting Group | 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: 19/34 Rpt: 41/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/08/2025 | 5 Payee name Holland Taucher Consulting Group | |
| 6 Amount (\$) \$2,758.00 | 7 Payee address; City; State; Zip Code PO Box 684281 Austin, TX 78768 | |
| 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 fundraising |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/20/2025 | Payee name Humn Behavior | |
| Amount (\$) \$10,000.00 | Payee address; City; State; Zip Code 2310 Fountain Way San Antonio, TX 78248 | |
| 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 data services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/13/2025 | Payee name Hyatt Regency Lost Pines | |
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code Lost Pines Blvd. Bastrop, TX 78612 | |
| 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 hotel stay |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 20/34 Rpt: 42/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/23/2025 | 5 Payee name La Gloria | |
| 6 Amount (\$) \$66.58 | 7 Payee address; City; 100 E. Grayson San Antonio, TX 78215 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 travel meal |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Leander Area Republican Women | Office sought Office held |
| Date 10/22/2025 | Payee name Leander Area Republican Women | |
| Amount (\$) \$26.25 | Payee address; City; PO Box 551 Leander, TX 78646 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event ticket |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Look Ahead Strategies | Office sought Office held |
| Date 10/27/2025 | Payee name Look Ahead Strategies | |
| Amount (\$) \$2,500.00 | Payee address; City; 1500 Wilson Blvd Fl 5 Arlington, VA 22209 | |
| 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 consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Look Ahead Strategies | 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: 21/34 Rpt: 43/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 | |
| 4 Date 11/13/2025 | 5 Payee name Los Reyes | | |
| 6 Amount (\$) \$25.20 | 7 Payee address; City; State; Zip Code 5050 Cypress Creek Pkwy Houston, TX 77069 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 travel meal | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |
| Date 12/17/2025 | Payee name Mailchimp | | |
| Amount (\$) \$47.97 | Payee address; City; State; Zip Code 405 N Angier Atlanta, GA 30308 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |
| Date 11/17/2025 | Payee name Mailchimp | | |
| Amount (\$) \$47.97 | Payee address; City; State; Zip Code 405 N Angier Atlanta, GA 30308 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Candidate/Officeholder name | Office sought Office sought | Office held Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 22/34 Rpt: 44/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/17/2025 | 5 Payee name Mailchimp | |
| 6 Amount (\$) \$47.97 | 7 Payee address; City; State; Zip Code 405 N Angier Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Mailchimp | Office sought Office held |
| Date 09/17/2025 | Payee name Mailchimp | |
| Amount (\$) \$47.97 | Payee address; City; State; Zip Code 405 N Angier Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) email service | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Moore, Megan | Office sought Office held |
| Date 12/31/2025 | Payee name Moore, Megan | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735 | |
| 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 salary |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Moore, Megan | 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: 23/34 Rpt: 45/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/31/2025 | 5 Payee name Moore, Megan | |
| 6 Amount (\$) \$500.00 | 7 Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735 | |
| 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 salary |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Moore, Megan | Office sought Office held |
| Date 09/30/2025 | Payee name Moore, Megan | |
| Amount (\$) \$500.00 | Payee address; City; State; Zip Code 2305 Barton Creek Blvd Unit 45 Austin, TX 78735 | |
| 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 salary |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Moore, Megan | Office sought Office held |
| Date 12/12/2025 | Payee name Office Depot | |
| Amount (\$) \$45.43 | Payee address; City; State; Zip Code 5425 S Padre Island Dr Ste 151 Corpus Christi, TX 78411 | |
| 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 supplies |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Moore, Megan | 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: 24/34 Rpt: 46/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/23/2025 | 5 Payee name Perception Insights | |
| 6 Amount (\$) \$34,200.00 | 7 Payee address; City; 1108 Lavaca Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling 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 poll |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 09/08/2025 | Payee name Petroleum Club Of Houston | |
| Amount (\$) \$1,050.00 | Payee address; City; 1201 Louisiana Houston, TX 77002 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense event expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 11/06/2025 | Payee name Primo Brands | |
| Amount (\$) \$65.11 | Payee address; City; 1150 Assembly Drive Tampa, FL 33607 | |
| 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 water service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

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: 25/34 Rpt: 47/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 12/11/2025 | 5 Payee name Prosperity Bank | |
| 6 Amount (\$) \$22.50 | 7 Payee address; City; 900 Congress Austin, TX 78701 | |
| 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 wire fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 12/11/2025 | Payee name QuikTrip | |
| Amount (\$) \$24.76 | Payee address; City; 4802 S 183 Austin, TX 78744 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |
| Date 11/12/2025 | Payee name QuikTrip | |
| Amount (\$) \$37.48 | Payee address; City; 4802 S 183 Austin, TX 78744 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought |

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: 26/34 Rpt: 48/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/20/2025 | 5 Payee name QuikTrip | |
| 6 Amount (\$) \$37.44 | 7 Payee address; City; State; Zip Code 4802 S 183 Austin, TX 78744 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/17/2025 | Payee name Republican Party Of Texas | |
| Amount (\$) \$3,750.00 | Payee address; City; State; Zip Code PO Box 2206 Austin, TX 78768 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) filing fee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense filing fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/10/2025 | Payee name Rosa's | |
| Amount (\$) \$72.12 | Payee address; City; State; Zip Code 4945 E. 42nd St. Odessa, TX 79762 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 travel meal |
| 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: 27/34 Rpt: 49/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 10/02/2025 | 5 Payee name Shell | |
| 6 Amount (\$) \$43.20 | 7 Payee address; City; State; Zip Code 3201 I-35 Frontage Rd New Braunfels, TX 78130 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/20/2025 | Payee name Southwest Airlines | |
| Amount (\$) \$363.96 | Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235 | |
| 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 travel expenses |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/08/2025 | Payee name Southwest Airlines | |
| Amount (\$) \$189.00 | Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235 | |
| 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 ticket |
| 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: 28/34 Rpt: 50/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/14/2025 | 5 Payee name Spark by Hilton | |
| 6 Amount (\$) \$239.76 | 7 Payee address; City; State; Zip Code 4424 Westway Park Blvd. Houston, TX 77041 | |
| 8 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 hotel stay |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/30/2025 | Payee name Spectrum | |
| Amount (\$) \$143.89 | Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/01/2025 | Payee name Spectrum | |
| Amount (\$) \$143.89 | Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

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: 29/34 Rpt: 51/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/03/2025 | 5 Payee name Spectrum | |
| 6 Amount (\$) \$196.28 | 7 Payee address; City; PO Box 60074 City Of Industry, CA 91716 | |
| 8 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 internet service |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/30/2025 | Payee name Spectrum | |
| Amount (\$) \$143.89 | Payee address; City; PO Box 60074 City Of Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/03/2025 | Payee name Spectrum | |
| Amount (\$) \$196.28 | Payee address; City; PO Box 60074 City Of Industry, CA 91716 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense internet service |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

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: 30/34 Rpt: 52/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/30/2025 | 5 Payee name Spectrum | |
| 6 Amount (\$) \$229.31 | 7 Payee address; City; State; Zip Code PO Box 60074 City Of Industry, CA 91716 | |
| 8 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 internet service |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/18/2025 | Payee name Speedy Stop | |
| Amount (\$) \$35.82 | Payee address; City; State; Zip Code 1660 E. 51st Austin, TX 78723 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/26/2025 | Payee name Speedy Stop | |
| Amount (\$) \$27.22 | Payee address; City; State; Zip Code 1660 E. 51st Austin, TX 78723 | |
| 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 fuel |
| 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: 31/34 Rpt: 53/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 11/20/2025 | 5 Payee name Speedy Stop | |
| 6 Amount (\$) \$42.60 | 7 Payee address; City; State; Zip Code 1660 E. 51st Austin, TX 78723 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/10/2025 | Payee name Speedy Stop | |
| Amount (\$) \$38.46 | Payee address; City; State; Zip Code 1660 E. 51st Austin, TX 78723 | |
| 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 fuel |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/27/2025 | Payee name Speedy Stop | |
| Amount (\$) \$34.60 | Payee address; City; State; Zip Code 1660 E. 51st Austin, TX 78723 | |
| 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 fuel |
| 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: 32/34 Rpt: 54/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/10/2025 | 5 Payee name Texaco | |
| 6 Amount (\$) \$15.46 | 7 Payee address; City; State; Zip Code 800 E. Florida Midland, TX 79701 | |
| 8 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 fuel |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/24/2025 | Payee name Texas Federation Of Republican Women | |
| Amount (\$) \$1,500.00 | Payee address; City; State; Zip Code 13740 N Highway 183 Ste J4 Austin, TX 78750 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sponsorship |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/06/2025 | Payee name Tiger Mart | |
| Amount (\$) \$40.31 | Payee address; City; State; Zip Code 1020 S. 5th Waco, TX 76706 | |
| 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 fuel |
| 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: 33/34 Rpt: 55/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 | |
| 4 Date 09/08/2025 | 5 Payee name TownePlace Odessa | | |
| 6 Amount (\$) \$384.10 | 7 Payee address; City; 4412 Tanglewood Odessa, TX 79762 | State; Zip Code | |
| 8 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 hotel stay | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 10/24/2025 | Payee name U. S. Postal Service | | |
| Amount (\$) \$420.00 | Payee address; City; 802 N Tancahua St Corpus Christi, TX 78401 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) postage | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| Date 11/07/2025 | Payee name US Postal Service | | |
| Amount (\$) \$15.64 | Payee address; City; 802 N Tancahua St Corpus Christi, TX 78401 | State; Zip Code | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) postage | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | | | |

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: 34/34 Rpt: 56/56 | 2 FILER NAME Wright, James D. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00084408 |
| 4 Date 09/10/2025 | 5 Payee name Whitehouse Meat Market | |
| 6 Amount (\$) \$65.91 | 7 Payee address; City; 7270 TX-191 Odessa, TX 79765 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 travel meal |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/12/2025 | Payee name Wyndham | |
| Amount (\$) \$178.53 | Payee address; City; 117 W. Wall Midland, TX 79701 | |
| 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 hotel stay |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |