

**POLITICAL PARTY REPORT REGARDING FUNDS  
FROM CORPORATIONS AND LABOR ORGANIZATIONS**

**FORM PTY-CORP  
COVER SHEET PG 1**

The Form PTY-CORP Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00023974	2 Total pages filed 7
3 POLITICAL PARTY NAME	San Jacinto County Republican Party (P)		
4 STATE OR COUNTY PARTY	<input type="checkbox"/> State <input checked="" type="checkbox"/> County: San Jacinto		
5 POLITICAL PARTY TYPE	<input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Libertarian <input type="checkbox"/> Other: <span style="margin-left: 200px;">(Party name)</span>		
6 POLITICAL PARTY MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 370  Coldspring, TX 77331		
7 POLITICAL PARTY CHAIR	TITLE FIRST MI NICKNAME LAST SUFFIX Dwayne Wright		
8 CHAIR MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 100 S. Magnolia Dr.  Cleveland, TX 77328		
9 CHAIR STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 100 S. Magnolia Dr.  Cleveland, TX 77328		
10 CHAIR PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 966-1300		
11 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 8th day before primary election <input type="checkbox"/> July 15 <input type="checkbox"/> 50th day before general election		
12 PERIOD COVERED	Month 09/05/2025	Day	Year
	THROUGH		Month 12/31/2025
<b>OFFICE USE ONLY</b>			
Date Received <b>ELECTRONICALLY FILED</b> 01/05/2026			
Date Hand-delivered or Date Postmarked			
Receipt # <input type="text"/> Amount			
Date Processed			
Date Imaged			

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**POLITICAL PARTY REPORT:  
TOTALS AND AFFIDAVIT****FORM PTY-CORP  
COVER SHEET PG 2**

<b>13</b> POLITICAL PARTY NAME San Jacinto County Republican Party (P)	<b>14</b> Filer ID (Ethics Commission Filers) 00023974
<b>15</b> TOTALS	<b>1. TOTAL CONTRIBUTIONS FROM CORPORATE OR LABOR ORGANIZATIONS (OTHER THAN LOANS OR GUARANTEES OF LOANS)</b>  <b>2. TOTAL EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS</b>  <b>3. TOTAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</b>
	\$ 387.20
	\$ 6,734.29
	\$ 3,300.35

A political party must file a report on FORM PTY-CORP for any reporting period during which the party accepts corporate or labor organization contributions, maintains corporate or labor organization contributions, or makes expenditures from corporate or labor organization contributions.

**16 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 Dwayne Wright

\_\_\_\_\_  
Signature of Political Party Chair

**AFFIX NOTARY STAMP / SEAL**

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 oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - PTYCOPR****FORM PTY-CORP****COVER SHEET PG 3**

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<b>17</b> POLITICAL PARTY NAME San Jacinto County Republican Party (P)	<b>18</b> FILER ID (Ethics Commission Filers) 00023974
<b>19</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 387.20
2. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
3. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS	\$ 6,734.29
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

## SCHEDULE C1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 1/1 Rpt: 4/7
<b>2</b> FILER NAME San Jacinto County Republican Party (P)		<b>3</b> Filer ID (Ethics Commission Filers) 00023974
<b>4</b> Date 10/01/2025	<b>5</b> Corporation / Labor Organization name GoDaddy ..... <b>6</b> Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	<b>7</b> Amount of contribution (\$) \$102.21
Date 10/01/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$127.79
Date 10/01/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$93.22
Date 10/01/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$5.32
Date 09/30/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$5.32
Date 09/30/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$37.36
Date 09/30/2025	Corporation / Labor Organization name GoDaddy ..... Corporation / Labor Organization address; City; State; Zip Code  Tempe, AZ 85284	Amount of contribution (\$) \$15.98

# EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 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: 1/3 Rpt: 5/7	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 10/27/2025	5 Payee name Adobe System	
6 Amount (\$) \$21.64	7 Payee address; City; 345 Park Avenue  San Jose, CA 95110	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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.  Adobe Subscription for Office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/24/2025	Payee name Adobe System	
Amount (\$) \$21.64	Payee address; City; 345 Park Avenue  San Jose, CA 95110	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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.  Adobe Subscription for Office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/15/2025	Payee name GoDaddy	
Amount (\$) \$5.32	Payee address; City; 2155 E Godaddy Way  Tempe, AZ 85284	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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.  HQ website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

# EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 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: 2/3 Rpt: 6/7	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 11/19/2025	5 Payee name SJCRC	
6 Amount (\$) \$5,414.39	7 Payee address; City; PO Box 370  Coldspring, TX 77331	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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.  Reagan Dinner Catering Fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 11/05/2025	Payee name SJCRC	
Amount (\$) \$228.00	Payee address; City; PO Box 370  Coldspring, TX 77331	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(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.  AV for Office Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/10/2025	Payee name Wright, Dwayne (The Honorable)	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Cleveland, TX 77328	
<input checked="" type="checkbox"/> Expenditure from corporate funds	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  AV equipment purchase - Cameras - hardlines and installation for HQ - chairman used personal CC
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

# EXPENDITURES FROM CORPORATE OR LABOR ORGANIZATION 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: 3/3 Rpt: 7/7	2 FILER NAME San Jacinto County Republican Party (P)	3 Filer ID (Ethics Commission Filers) 00023974
4 Date 09/22/2025	5 Payee name microsoft	
6 Amount (\$) \$21.65	7 Payee address; City; One Microsoft Way  Redmond, WA 98052	
X Expenditure from corporate funds	(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.  Microsoft Office Subscription for Office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 10/20/2025	Payee name microsoft	Office held
Amount (\$) \$21.65	Payee address; City; One Microsoft Way  Redmond, WA 98052	
X Expenditure from corporate funds	(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.  Office sub for HQ
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held