

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: 25	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST James D.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/22/2026
	NICKNAME Jim	LAST Wright	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 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 The Honorable	FIRST Kent	MI	
	NICKNAME	LAST Hance	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 203 W. 10th St. Austin, TX 78701			
7 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 479-8888	EXTENSION	
8 REPORT TYPE	<input 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 checked="" 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 Day Year 01/23/2026	THROUGH		Month Day Year 02/21/2026
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <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

2 of 25

13 C / OH NAME Wright, James D. (The Honorable) **14** Filer ID (Ethics Commission Filers)
00084408

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	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)	\$	203,475.66
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	521,256.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	125,965.35
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**

3 of 25

18 FILER NAME Wright, James D. (The Honorable)		19 Filer ID (Ethics Commission Filers) 00084408
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 203,475.66
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	\$ 521,256.90
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: 1/7 Rpt: 4/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atmos Energy Corporation PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/12/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burgess, Michael <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy, Inc. PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77210	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleere, Kirk <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76902	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ConocoPhillips SPIRIT PAC	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Bartlesville, OK 74004	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	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 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DECPAC	Amount of Contribution (\$) \$10,000.00
	Contributor address; City; State; Zip Code Oklahoma City, OK 73102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dang, Kim	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Kinder Morgan
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deep Blue PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
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: 3/7 Rpt: 6/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diversified Gas & Oil Corporation PAC <hr/> 6 Contributor address; City; State; Zip Code Birmingham, AL 35242	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Energy Transfer Partners Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleet, Timothy <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Riverside Homebuilders
Date 02/19/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, JoAnn <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$525.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) unemployed
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg Traurig, PA PAC <hr/> Contributor address; City; State; Zip Code Albany, NY 12207	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPAAC of Texas <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallum, Raleigh <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoskins, Mark <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Woody <hr/> Contributor address; City; State; Zip Code El Paso, TX 79913	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Hunt Companies
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Richard <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Johnston & Cloud

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kalnin, Christopher <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) DEO		9 Employer (See Instructions) BKV Corporation
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modglin, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/14/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NGL Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78709	Amount of Contribution (\$) \$100,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovintiv USA PAC <hr/> Contributor address; City; State; Zip Code Denver, CO 80202	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips66 PAC <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20004	7 Amount of Contribution (\$) \$5,000.66
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poe, Larry <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) RRC
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poinsett PLLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Dax <hr/> Contributor address; City; State; Zip Code Dallas, TX 77019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/25
2 FILER NAME Wright, James D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXOGA Good Government Committee	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Targa Resources PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code San Antonio, TX 78269		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Clyde	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Sandia, TX 78383		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt: 11/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
---	---	--

4 Date 01/23/2026	5 Payee name Amarillo GOP
-----------------------------	-------------------------------------

6 Amount (\$) \$103.45	7 Payee address; City; State; Zip Code 4217 SW 21st Ave. Amarillo, TX 79101
----------------------------------	--

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 ticket
---------------------------------	---	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 01/31/2026	Payee name Anedot
--------------------	----------------------

Amount (\$) \$2,004.50	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 processing
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/05/2026	Payee name Bentwater Yacht Club
--------------------	------------------------------------

Amount (\$) \$30.00	Payee address; City; State; Zip Code 800 Bentwater Dr. Montgomery, TX 77356
------------------------	---

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 luncheon
-------------------------------	--	--

Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/15 Rpt: 12/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
---	---	--

4 Date 02/06/2026	5 Payee name Blue Cross Blue Shield
-----------------------------	---

6 Amount (\$) \$441.13	7 Payee address; City; State; Zip Code 1001 E. Lookout Dr. Richardson, TX 75082
----------------------------------	--

8 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
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 01/23/2026	Payee name Blue Cross Blue Shield
--------------------	--------------------------------------

Amount (\$) \$441.13	Payee address; City; State; Zip Code 1001 E. Lookout Dr. Richardson, TX 75082
-------------------------	---

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 insurance
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/17/2026	Payee name Buc-ees
--------------------	-----------------------

Amount (\$) \$35.22	Payee address; City; State; Zip Code 4155 N. General Bruce Dr. Temple, TX 76501
------------------------	---

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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 3/15 Rpt: 13/25	2	FILER NAME Wright, James D. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00084408
4	Date 01/28/2026	5	Payee name Central Texas Republican Women		
6	Amount (\$) \$256.25	7	Payee address; City; State; Zip Code PO Box 24 Belton, TX 76513		
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 ticket		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/02/2026		Payee name Chevron		
	Amount (\$) \$36.93		Payee address; City; State; Zip Code 15359 I-35 Buda, TX 78610		
	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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 02/10/2026		Payee name Collin County GOP		
	Amount (\$) \$275.00		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 ticket		
		Complete <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/15 Rpt: 14/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/28/2026	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 campaign staff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2026	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 01/26/2026	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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/15 Rpt: 15/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/24/2026	5 Payee name Embassy Suites	
6 Amount (\$) \$181.83	7 Payee address; City; State; Zip Code 1515 Dallas St. Houston, TX 77010	
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 01/29/2026	Payee name Fedex	
Amount (\$) \$18.25	Payee address; City; State; Zip Code 942 Shady Grove Rd S Memphis, TN 38120	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) shipping	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shipping
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/12/2026	Payee name Food Bucket	
Amount (\$) \$20.34	Payee address; City; State; Zip Code 15501 US 290 Elgin, TX 78621	
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/15 Rpt: 16/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/24/2026	5 Payee name Fort Worth Club	
6 Amount (\$) \$1,165.18	7 Payee address; City; State; Zip Code 306 W. 7th St. Fort Worth, TX 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraising luncheon
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Go Creative	
Amount (\$) \$350,000.00	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 advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Go Creative	
Amount (\$) \$17,811.87	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 advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/15 Rpt: 17/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/21/2026	5 Payee name Go Creative	
6 Amount (\$) \$85,000.00	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) 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 advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/23/2026	Payee name Golden Triangle Republican Women	
Amount (\$) \$36.32	Payee address; City; State; Zip Code PO Box 12902 Beaumont, TX 77726	
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 02/10/2026	Payee name HEB	
Amount (\$) \$4.18	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) supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense supplies
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/15 Rpt: 18/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/03/2026	5 Payee name HEB	
6 Amount (\$) \$19.58	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 02/06/2026	Payee name Hampton Inn	
Amount (\$) \$104.80	Payee address; City; State; Zip Code 19108 Moon Trail Humble, TX 77338	
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
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2026	Payee name Hampton Inn	
Amount (\$) \$246.47	Payee address; City; State; Zip Code 218 Promenade Way Sugar Land, TX 77469	
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
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/15 Rpt: 19/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/28/2026	5 Payee name Harris County Republican Party	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
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 02/11/2026	Payee name Holland Taucher Consulting Group	
Amount (\$) \$25,509.21	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	Office sought Office held
Date 01/30/2026	Payee name Internal Revenue Service	
Amount (\$) \$5,153.75	Payee address; City; State; Zip Code PO Box 1300 Charlotte, NC 28201	
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 employment taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/15 Rpt: 20/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
--	---	--

4 Date 02/11/2026	5 Payee name KRFE Inc. Radio
-----------------------------	--

6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 6602 Martin Luther King Blvd Lubbock, TX 79404
------------------------------------	--

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 radio ads
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 01/28/2026	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 campaign staff
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/01/2026	Payee name Nueces County GOP
--------------------	---------------------------------

Amount (\$) \$500.00	Payee address; City; State; Zip Code 5151 Flynn Corpus Christi, TX 78411
-------------------------	--

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 <u>ONLY</u> 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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/15 Rpt: 21/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/24/2026	5 Payee name Petroleum Club Of Houston	
6 Amount (\$) \$1,400.06	7 Payee address; City; State; Zip Code 1201 Louisiana Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name Petroleum Club Of Midland	
Amount (\$) \$1,081.10	Payee address; City; State; Zip Code PO Box 10527 Midland, TX 79702	
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 fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/26/2026	Payee name Primo Brands	
Amount (\$) \$65.11	Payee address; City; State; Zip Code 1150 Assembly Drive Tampa, FL 33607	
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 meals
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/15 Rpt: 22/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/10/2026	5 Payee name Prosperity Bank	
6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 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 bank fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/10/2026	Payee name San Patricio GOP	
Amount (\$) \$150.00	Payee address; City; State; Zip Code PO Box 153 Portland, TX 78374	
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 tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2026	Payee name Shell	
Amount (\$) \$38.26	Payee address; City; State; Zip Code 3201 I-35 Frontage Rd New Braunfels, TX 78130	
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/15 Rpt: 23/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/26/2026	5 Payee name Southwest Airlines	
6 Amount (\$) \$494.07	7 Payee address; City; State; Zip Code 2702 Love Field Drive Dallas, TX 75235	
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 flights
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Southwest Airlines	
Amount (\$) \$305.48	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 flight
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2026	Payee name Spectrum	
Amount (\$) \$237.77	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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/15 Rpt: 24/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 01/30/2026	5 Payee name Spectrum	
6 Amount (\$) \$143.89	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 02/10/2026	Payee name Speedy Stop	
Amount (\$) \$46.00	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 02/19/2026	Payee name Sunoco	
Amount (\$) \$38.39	Payee address; City; State; Zip Code 16050 Walden Rd. Montgomery, TX 77356	
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
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/15 Rpt: 25/25	2 FILER NAME Wright, James D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00084408
4 Date 02/06/2026	5 Payee name UPS Store	
6 Amount (\$) \$16.42	7 Payee address; City; State; Zip Code 1801 E. 51st St. Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) shipping cost	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shipping cost
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Uber	
Amount (\$) \$24.98	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103	
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 car service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2026	Payee name Uber	
Amount (\$) \$23.98	Payee address; City; State; Zip Code 1455 Market St San Francisco, CA 94103	
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 car service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held