

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

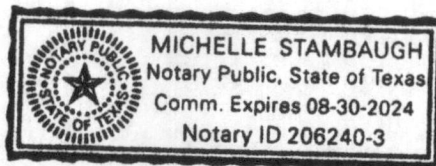
15 C/OH NAME <u>Erleigh N. Wiley</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>104,100.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>23,891.94</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>82,314.33</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 SIGNATURE 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.

Erleigh N. Wiley
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Erleigh N. Wiley this the 18th day of January, 20 22, to certify which, witness my hand and seal of office.
Michelle Stambaugh Michelle Stambaugh Notary, Texas
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.
My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)
Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Erleigh N. Wiley</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>104,100.00</i>
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 MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>21,734.94</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>2,157.00</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 1 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 08-04-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Teague	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 101 S. Kemp St. Mabank, TX 75147		
8 Principal occupation / Job title (See Instructions) Corp. Officer		9 Employer (See Instructions) TLH Enterprises
Date 08-05-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Humphrey	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 4720 Melissa Ln Dallas, TX 75229		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Laura Peterson, Esq.
Date 08-05-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall Isenberg	Amount of contribution (\$) 2,500.00
Contributor address; City; State; Zip Code 4303 N. Central Expwy Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08-05-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Williams	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5673 CR 400E Kemp, TX 75143		
Principal occupation / Job title (See Instructions) Architectural Design		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

pg 2 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

08-06-21

5 Full name of contributor out-of-state PAC (ID#: _____)

John Masley

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

201 W. Mulberry St. Kaufman, TX 75142

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

Date

08-06-21

Full name of contributor out-of-state PAC (ID#: _____)

Al Ray

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

1421 CR 280 Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

08-07-21

Full name of contributor out-of-state PAC (ID#: _____)

Henry Ackels

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

3030 LBJ Fwy #1550 Dallas, TX 75234

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

08-09-21

Full name of contributor out-of-state PAC (ID#: _____)

Grant St. Julian

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

3600 Oaklawn #110 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

Pg 3 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

08-09-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Bobby Stark

7 Amount of contribution (\$)

1,000.00

6 Contributor address; City; State; Zip Code

P.O. Box 911 Kemp, Tx 75143

8 Principal occupation / Job title (See Instructions)

Business Owner, Bailbond

9 Employer (See Instructions)

Aaron Bail Bond

Date

08-10-21

Full name of contributor out-of-state PAC (ID#: _____)

Toby Shock

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

2001 Bryan St #1905 Dallas, TX 75201

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

08-11-21

Full name of contributor out-of-state PAC (ID#: _____)

Jimmy Westcott

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

3901 Turtle Creek Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

Date

08-13-21

Full name of contributor out-of-state PAC (ID#: _____)

Carl Thomas

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

P.O. Box 883 Kaufman, Tx 75142

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 4 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 08-13-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Wood	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 302 Tower Circle Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) (N/A)
Date 08-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Able	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 6415 Clear Pond Rd Arlington, TX 76018		
Principal occupation / Job title (See Instructions) Semi-Retired Attorney		Employer (See Instructions) self
Date 08-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Bell	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code P.O. Box 1886 Forney, TX 75126		
Principal occupation / Job title (See Instructions) Rancher Business Owner		Employer (See Instructions) self ; state of TX
Date 08-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Timpa	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 633 Moraine Way Heath, TX 75032		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 5 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 08-18-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Breeden	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code P.O. Box 794 Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions) self
Date 08-18-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wayne Breeden	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code P.O. Box 794 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self
Date 08-18-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Jungman	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6890 FM 1388 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Kaufman ISD.
Date 08-18-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Meava, Jr.	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code P.O. Box 601328 Dallas, TX 75360		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 6 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 08-19-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin Weiner	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 219 S. Prairieville St. Athens, TX 75751		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 08-20-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Oakley	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 504 5th St. Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Congress Ave Consulting LLC
Date 08-21-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Breeden, Jr.	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 628 Rustic Ridge Dr. Heath, TX 75032		
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self
Date 08-23-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Code	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code P.O. Box 630 Crandall, TX 75114		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 7 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 08-23-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Dabos	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 1007 Mulberry St. Forney, TX 75126		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Kaufman Co. Farm Bureau
Date 08-25-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald Herrington	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 918 Sea Shell Dr. Mesquite, TX 75149		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 08-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben Miller	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 401 W. Mulberry St Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 09-02-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Harrison	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code P.O. Box 803 Forney, TX 75124		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 8 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 09-02-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed Prospero	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 8111 Preston Rd #500 Dallas, TX 75225		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 09-04-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Vess	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 1885 Mabank, TX 75147		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09-05-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patsy Bradicich	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 8081 FM 1836 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) (N/A)
Date 09-08-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Brown	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 100 N. Travis #205 Sherman, TX 75090		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

pg 9 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

09-08-21

5 Full name of contributor

Mike Head

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

219 S. Prairieville St. Athens, TX 75751

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

Date

09-09-21

Full name of contributor

Paul Huang

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

422 Ridgewood Richardson, TX 75080

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Self

Date

09-04-21

Full name of contributor

Annette Ratliff

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

7519 Spicewood Dr. Garland, TX 75044

Principal occupation / Job title (See Instructions)

Exec. Asst / Property Manager

Employer (See Instructions)

Associa

Date

09-10-21

Full name of contributor

Britt Murrey

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

8700 FM 2860 Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Car Sales

Employer (See Instructions)

Paul Murrey Ford

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 10 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 09-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J.P. Pickens	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code P.O. Box 519 Mabank, TX 75147		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Ford Dealership
Date 09-17-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paulette Mueller	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 10770 Inwood Rd Dallas, TX 75229		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Underwood Perkins
Date 09-21-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R.B. Pool	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 110 Tower Circle Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 09-21-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Schumpert	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 503 Griffith Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 11 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 09-23-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick Short	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 603 White Hills Dr. Rockwall, TX 75087		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 09-26-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney Evans	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5376 FM 987 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Kaufman Co Sheriff Dept
Date 09-27-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Aga	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1703 S. Houston St Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)
Date 10-05-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobby Rich	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 6005 S. Houston St Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Kaufman County

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

Pg 12 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

10-21-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Zahan Schlenkske

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

204 Jessica Ct Forney, TX 75126

8 Principal occupation / Job title (See Instructions)

Car Sales, Fleet

9 Employer (See Instructions)

Ford Dealership

Date

10-20-21

Full name of contributor out-of-state PAC (ID#: _____)

Nick Oberheiden

Amount of contribution (\$)

25,000.00

Contributor address; City; State; Zip Code

3821 Beverly Dr. Dallas, TX 75205

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Oberheiden P.C.

Date

10-28-21

Full name of contributor out-of-state PAC (ID#: _____)

Ronald Geri

Amount of contribution (\$)

5,000.00

Contributor address; City; State; Zip Code

220 Davis Rd Combine, TX 75159

Principal occupation / Job title (See Instructions)

Waste Mgmt/Bus Owner

Employer (See Instructions)

Spot-On Services LLC

Date

10-29-21

Full name of contributor out-of-state PAC (ID#: _____)

Michelle Cheney

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

1023 US Hwy 175 Crandall, TX 75114

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg. 13 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 10-29-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Murrey	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 1105 E. Mulberry St Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Car sales		9 Employer (See Instructions) Paul Murrey Ford
Date 11-01-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry Dyson	Amount of contribution (\$) 1,500.00
Contributor address; City; State; Zip Code P.O. Box 725 Seagrville, TX 75159		
Principal occupation / Job title (See Instructions) Police Officer/Investigator		Employer (See Instructions) Dallas County
Date 11-02-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Hughes	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 11340 Drummmond Dr. Dallas, TX 75228		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)
Date 11-02-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Matlock	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 485 Ramsey Combine, TX 75159		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 14 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-02-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy Thomas	7 Amount of contribution (\$) 2,600.00
6 Contributor address; City; State; Zip Code P.O. Box 883 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) President / CEO		9 Employer (See Instructions) Thomas Protective Services
Date 11-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade Helbo	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 7722 FM 1388 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Developer / Rancher		Employer (See Instructions) self
Date 11-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abigail Spain	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 101 E Buffalo St. Forney, TX 75126		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Guest & Gray
Date 11-04-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Ackerman	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1414 Brookshire Dr. Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ackerman Law Firm

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19 15 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-04-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Victoria Lucas

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

300 Laurel Trail Dr Terrell, TX 75140

8 Principal occupation / Job title (See Instructions)

Bank Executive

9 Employer (See Instructions)

American National Bank

Date

11-04-21

Full name of contributor out-of-state PAC (ID#: _____)

Linda Sewell

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

703 W. Grove St Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

Date

11-05-21

Full name of contributor out-of-state PAC (ID#: _____)

Kirk Willis

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

9 Dunrobin Garland, TX 75044

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-06-21

Full name of contributor out-of-state PAC (ID#: _____)

George York

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

14002 Bar Ten Ln Mabank, TX 75147

Principal occupation / Job title (See Instructions)

Forensic Investigation

Employer (See Instructions)

Kaufman Co Sheriff Office

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 16 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-07-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David & James Byrnes	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 740 Martin Ln Combine, TX 75159		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) (N/A)
Date 11-07-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lalon Peale	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 12636 Hiram Rd Wills Point, TX 75169		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11-08-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnny & Laura Murrey	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1301 Lewis Dr. Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)
Date 11-09-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay Cook	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 9591 FM 3094 SeLury, TX 75158		
Principal occupation / Job title (See Instructions) Lineman		Employer (See Instructions) Novinium

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 17 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-09-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cody Frazier	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 314 Countryview Ln Crandall, TX 75114		
8 Principal occupation / Job title (See Instructions) Sr VP Commercial Banking		9 Employer (See Instructions) BI Bank
Date 11-09-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Hulsey	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1717 Arts Plaza #2002 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) American National Bank of Texas
Date 11-09-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim Walker	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 3014 Granada Mesquite, TX 75181		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)
Date 11-10-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keith Bell	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 12290 FM 740 Forney, TX 75124		
Principal occupation / Job title (See Instructions) Business Owner; State Rep		Employer (See Instructions) Self; State of Texas

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-10-21

5 Full name of contributor

Robert Guest

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

1,000.00

6 Contributor address;

City;

State;

Zip Code

1008 Longhill Way Forney, TX 75126

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Guest & Gray

Date

11-10-21

Full name of contributor

Charles Maduka

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

3917 W Sublett Rd Arlington, TX 76017

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-10-21

Full name of contributor

William Meili

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

1005 Village Center Dr. Southlake, TX 75092

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-10-21

Full name of contributor

Caron Sherrard

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

4943 FM 2578 Terrell, TX 75160

Principal occupation / Job title (See Instructions)

Administrative Assistant

Employer (See Instructions)

Robillard Consulting LLC

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 19 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-11-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phil Miller	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 7046 FM 1398 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Center for Church Health - Baptist
Date 11-12-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taryn Davis	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 107-C.N. Jackson St. Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11-12-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Murphy	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5000 Old Railroad Trl Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) (N/A)
Date 11-12-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendy Risinger	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 4530 Mardebeach Grand Prairie, TX 75052		
Principal occupation / Job title (See Instructions) Asst Dist Atty		Employer (See Instructions) Dallas Co. Dist. Atty. Ofc.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: pg 20 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-14-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jana Syvrud	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 10026 FM 429 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Aquaron
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Barber	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code P.O. Box 744 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Kaufman County - Pct 3
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Bonner	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 6107 CR 149 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Asst. Dist. Atty		Employer (See Instructions) Kaufman County Dist. Atty. Ofc.
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gail Brand	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2151 Alamosa Dr. Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Guest and Gray

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 8/17/2020

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

pg 21 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-15-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Shirley Bruner

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

7127 FM 3396 Kemp, TX 75143

8 Principal occupation / Job title (See Instructions)

Victim Assistance Co-ordinator

9 Employer (See Instructions)

Kaufman Co. Dist. Atty. Cfc.

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

Jon Burt

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

404 S. Houston Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

Pam Corder

Amount of contribution (\$)

40.00

Contributor address; City; State; Zip Code

P.O. Box 43 Scurry, TX 75158

Principal occupation / Job title (See Instructions)

Administrative Support ^{staff}

Employer (See Instructions)

Kaufman County

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

Jody Deller

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

15124 CR 4018 Kemp, TX 75143

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: pg 22 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Eason	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 8612 Karen Ln Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Teacher / Educator		9 Employer (See Instructions) Crandall I.S.D.
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivan Elizarraras	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6313 Sudbury Ln. Mesquite, TX 75181		
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Crandall P.D.
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Harrison	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code P.O. Box 863 Forney, TX 75126		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashley Holman	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 617 Azalea Dr. Forney, TX 75126		
Principal occupation / Job title (See Instructions) Asst. Dist. Atty.		Employer (See Instructions) Kaufman Co. Dist. Atty.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: pg 23 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael & Alison Hunt	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code P.O. Box 422 Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) County Commissioner / Housewife		9 Employer (See Instructions) Kaufman County (N/A)
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Keierleber	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 14800 Tradewinds Cir. Forney, TX 75126		
Principal occupation / Job title (See Instructions) Cattle Farmer		Employer (See Instructions) KB Land & Cattle Company
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny & Sharon Kirbie	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code 125 Buffalo Creek Dr. Carroll, TX 75114		
Principal occupation / Job title (See Instructions) Retirees (both)		Employer (See Instructions) (N/A)
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betty Mayfield	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 10802 FM 1836 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

16 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-15-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Katie McBarron

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

11026 CR 213 Forney, TX 75126

8 Principal occupation / Job title (See Instructions)

Business Owner

9 Employer (See Instructions)

McBarron Livestock

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

Cappie McBeth

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

P.O. Box 724 Forney, TX 75126

Principal occupation / Job title (See Instructions)

Jewelry Sales

Employer (See Instructions)

Self

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

James Meara, Jr.

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

P.O. Box 601328 Dallas, TX 75360

Principal occupation / Job title (See Instructions)

Developer

Employer (See Instructions)

Self

Date

11-15-21

Full name of contributor out-of-state PAC (ID#: _____)

Leona Miller

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

305 W. Hickory St Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 25 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tammy Pargaud	7 Amount of contribution (\$) 600.00
6 Contributor address; City; State; Zip Code 1825 Northridge Dr. Forney, TX 75126		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Reach Child Protective Agency
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy Ratcliff	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 16005 FM 1389N Combine, TX 75159		
Principal occupation / Job title (See Instructions) City Council		Employer (See Instructions) City of Combine
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray Raymond	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 5080 FM 1830 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) (N/A)
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Rittenberry	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 1125 Woods Rd Forney, TX 75126		
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) Iron shore Environmental Ins.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Page 26 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Micky Rouvaldt	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 10190 FM 2932 Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) (N/A)
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg & Suzanne Schumpert	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 503 Griffith Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Self
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Self	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code P.O. Box 146 Forney, TX 75126		
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Paluxy
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond Shackelford	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 435 N. Gun Barrel Ln Gun Barrel, TX 75156		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 27 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-15-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Thomas	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 1114 E 1st North St Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) (N/A)
Date 11-15-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayrani Velazquez	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 99 Lamar St Terrell, TX 75160		
Principal occupation / Job title (See Instructions) City Council member		Employer (See Instructions) City of Terrell
Date 11-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benito Carrmona	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 1008 Glenda Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Mayor		Employer (See Instructions) City of Terrell
Date 11-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry & Pamela Eggert	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 7201 FM 1388 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retirees (Both)		Employer (See Instructions) (N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 28 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-16-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrell Grooms	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code P.O. Box 121 Forney, TX 75126		
8 Principal occupation / Job title (See Instructions) Owner/Publisher		9 Employer (See Instructions) Forney Messenger
Date 11-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Knox	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 900 Jackson St #650 Dallas, TX 75202		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Pharris	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1603 Mulberry St Forney, TX 75126		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Edward Jones
Date 11-16-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calabria & Calabria	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 201 W. Mulberry St Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 29 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-17-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Card Shields	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 10611 CR 110 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Engineering		9 Employer (See Instructions) Shields Engineering, Inc. (self)
Date 11-19-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney Kraft	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 200 Jessica Ct Forney, TX 75126		
Principal occupation / Job title (See Instructions) Director of Special Events		Employer (See Instructions) Scottish Rite for Children
Date 11-19-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan Langbein	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 3520 Hanover Dallas, TX 75225		
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Genesis Center
Date 11-20-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Elzner	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 345 W. Broadway 5th Flr New York, NY		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Skin Spa New York

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

pg 30 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-20-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Margaret Shiels

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

5427 FM 2515 Kaufman, TX 75142

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

(self)

Date

11-22-21

Full name of contributor out-of-state PAC (ID#: _____)

Leon Carter

Amount of contribution (\$)

5,000.00

Contributor address; City; State; Zip Code

8150 Central Expwy #500 Dallas, TX 75206

Principal occupation / Job title (See Instructions)

Partner / Attorney

Employer (See Instructions)

Carter & Arnett

Date

11-23-21

Full name of contributor out-of-state PAC (ID#: _____)

Gilbert Altom

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

1204 Overlook Dr. Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

Date

11-23-21

Full name of contributor out-of-state PAC (ID#: _____)

Jody Lay

Amount of contribution (\$)

50.00

Contributor address; City; State; Zip Code

10150 CR 2326 Terrell, TX 75140

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

(N/A)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

Pg 31 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-23-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Carole Parsons

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

158 April Waters Dr Montgomery, TX 77356

8 Principal occupation / Job title (See Instructions)

Sales Manager

9 Employer (See Instructions)

Advantage Solutions

Date

11-24-21

Full name of contributor out-of-state PAC (ID#: _____)

Dawn Estes

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

8185 San Benito Way Dallas, TX 75218

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Estes Thorne Carr

Date

11-26-21

Full name of contributor out-of-state PAC (ID#: _____)

Lisa Knight

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

P.O. Box 1355 Medina, TX 78055

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-26-21

Full name of contributor out-of-state PAC (ID#: _____)

John Myers

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

11018 Jennifer Forney, TX 75126

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg. 32 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-27-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy Oakley	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 600 Griffith Ave Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 11-27-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Oakley	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 816 First St Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Asst. Director - Communications		Employer (See Instructions) National Association of Dental Plans
Date 11-29-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arthur & Cheryl Browning	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code P.O. Box 625 Scurry, TX 75158		
Principal occupation / Job title (See Instructions) Business Owners		Employer (See Instructions) Self
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike Chitty	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 610 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 Pg. 33 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-30-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Altom, Jr.	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 1302 Lewis Dr Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Bradford	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 101 Walnut St. Terrell, TX 75160		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny Booth	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7514 CR 276 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lori Crow	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 804 E. Moore Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Clinical Director/Owner		Employer (See Instructions) Access 2 Recovery

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-30-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance Gooden	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code P.O. Box 2125 Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Congressman		9 Employer (See Instructions) U.S. Government
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenny Heisel	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 117 E. Moore Ave #100 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Executive Director of Technology		Employer (See Instructions) Terrell I.S.D.
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy & Karen Jones	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 1018 N. Frances St Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John & Sarah Kegerreis	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 402 Griffith Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages - Schedule A1:

19.35 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

11-30-21

5 Full name of contributor

Kenneth Lane

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

75.00

6 Contributor address;

City;

State;

Zip Code

408 Griffith Ave Terrell, TX 75160

8 Principal occupation / Job title (See Instructions)

Business Owner

9 Employer (See Instructions)

Self

Date

11-30-21

Full name of contributor

David Lewis

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City;

State;

Zip Code

P.O. Box 1017 Terrell, TX 75160

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

11-30-21

Full name of contributor

Terry Roberts

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

500.00

Contributor address;

City;

State;

Zip Code

608 Moraine Way Heath, TX 75032

Principal occupation / Job title (See Instructions)

Realtor

Employer (See Instructions)

ReMax Landmark

Date

11-30-21

Full name of contributor

Suzanne Shumpert

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

150.00

Contributor address;

City;

State;

Zip Code

503 Griffith Ave Terrell, TX 75160

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 11-30-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tisha Sims	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code P.O. Box 538 Forney, TX 75126		
8 Principal occupation / Job title (See Instructions) Bank Executive		9 Employer (See Instructions) CityBank
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Spain	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 407 Kaufman St. Forney, TX 75126		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 11-30-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Wilcott	Amount of contribution (\$) 2,600.00
Contributor address; City; State; Zip Code 207 Baker Park Dr. Sherman, TX 75092		
Principal occupation / Job title (See Instructions) Physician/Surgeon		Employer (See Instructions) Self
Date 12-02-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart Law Group PLLC	Amount of contribution (\$) 1,500.00
Contributor address; City; State; Zip Code 1722 Routh St. Suite 745 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney/Partner		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 12-03-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bette Carter	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 1005 N. Kaufman St. Seagoville, TX 75159		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 12-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Costello	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 9326 CR 158 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Self
Date 12-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk Myers	Amount of contribution (\$) 10,000.00
Contributor address; City; State; Zip Code 1919 Shiloh Rd #100 Garland, TX 75042		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 12-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Smith	Amount of contribution (\$) 400.00
Contributor address; City; State; Zip Code 210 E. Moore Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 38 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 12-03-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manly Thompson	7 Amount of contribution (\$) 2,400.00
6 Contributor address; City; State; Zip Code 209 Starcrest Corsicana, TX 75109		
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Neighborly, Inc.
Date 12-03-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Thompson	Amount of contribution (\$) 2,400.00
Contributor address; City; State; Zip Code 209 Starcrest Corsicana, TX 75109		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas
Date 12-04-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Davis	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 239 Elmo, TX 75118		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 12-04-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Wallace	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 8655 Karen Ln Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule A1:
Pg 39 of 40

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

12-08-21

5 Full name of contributor out-of-state PAC (ID#: _____)

Livia Francis

7 Amount of contribution (\$)

150.00

6 Contributor address; City; State; Zip Code

11028 CR 4028 Kemp, TX 75143

8 Principal occupation / Job title (See Instructions)

Visiting Judge

9 Employer (See Instructions)

Semi-retired

Date

12-08-21

Full name of contributor out-of-state PAC (ID#: _____)

Phillip Linder

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

3300 Oak Lawn #1700 Dallas, TX 75219

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

12-09-21

Full name of contributor out-of-state PAC (ID#: _____)

Carl Squibb

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

18639 Briarwood Dr. Kemp, TX 75143

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

12-13-21

Full name of contributor out-of-state PAC (ID#: _____)

Allyson Stark

Amount of contribution (\$)

1,000.00

Contributor address; City; State; Zip Code

7822 Fall Creek Rd Terrell, TX 75160

Principal occupation / Job title (See Instructions)

Business Owner

Employer (See Instructions)

Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Pg 40 of 40
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 12-14-21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Hitt	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 6190 CR 152 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Bailbonds		9 Employer (See Instructions) Aaron Bailbonds
Date 12-23-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Messer	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 313 Laurel Trail Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) American National Bank of Texas
Date 12-26-21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emberly Cross	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 10 Hilldale Ct Orinda, CA 94563		
Principal occupation / Job title (See Instructions) Unknown / Online Donor		Employer (See Instructions) N/A
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: Pg 1 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 07-02-21	5 Payee name Daley Professional Web Solutions	
6 Amount (\$) 29.00	7 Payee address; 211 Cardinal Dr. Montgomery NY	City; State; Zip Code NY 12549
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Webpage
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 07-08-21	Payee name USPS Post Office	
Amount (\$) 13.89	Payee address; 102 E. Broad St	City; State; Zip Code Forney TX 75126
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Overhead	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 08-02-21	Payee name Daley Professional Web Solutions	
Amount (\$) 29.00	Payee address; 211 Cardinal Dr. Montgomery NY	City; State; Zip Code NY 12549
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Web page
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Pg 2 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 08-30-21	5 Payee name Stephen F. Austin Hotel	
6 Amount (\$) 297.57	7 Payee address; City; State; Zip Code 701 Congress Ave Austin TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee	(b) Description to attend officeholder seminar (TAC)
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08-31-21	Payee name Latham Bakery	
Amount (\$) 140.17	Payee address; City; State; Zip Code 101 N. Jackson St Kaufman, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description lunch for volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09-01-29	Payee name Daley Professional Web Solutions	
Amount (\$) 29.00	Payee address; City; State; Zip Code 211 Cardinal Dr. Montgomery NY 12549	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Web Page
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: pg 3 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 09-10-21	5 Payee name USPS Post Office	
6 Amount (\$) 11.60	7 Payee address; 2231 S Washington St	City; State; Zip Code Kaufman, Tx 75142
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Overhead	(b) Description Postage expense
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 09-13-21	Payee name Clayton P. Henry	City; State; Zip Code
Amount (\$) 1386.79	Payee address; 9322 Moss Trail	Dallas, Tx 75231
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Mailer/Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 09-14-21	Payee name Tina Vanpanis	City; State; Zip Code
Amount (\$) 396.90	Payee address; 4631 Ridgelawn Dr.	Dallas, Tx 75214
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Consulting services
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages, Schedule F1: Pg 4 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 09-27-21	5 Payee name Tx District & County Atty Association Foundation	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 505 W. 12th St, Ste 100 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation	(b) Description to support CLE for OA offices
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 10-01-21	Payee name Daley Professional Web Solutions		
Amount (\$) 29.00	Payee address; City; State; Zip Code 211 Cardinal Dr. Montgomery, TX 12549		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Web page	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 10-02-21	Payee name Kaufman County Republican Women		
Amount (\$) 155.00	Payee address; City; State; Zip Code P.O. Box 1104 Kaufman, TX 75142		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description fundraiser event	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: pg 5 of 14		2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 10-04-21		5 Payee name Kaufman County Republican Women			
6 Amount (\$) 150.00		7 Payee address; City; State; Zip Code P.O. Box 1104 Kaufman, TX 75142			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation		(b) Description fundraiser		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10-05-21		Payee name Texas Bar Foundation - Fellows			
Amount (\$) 250.00		Payee address; City; State; Zip Code 515 Congress Ave, Ste 1755 Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation		Description Support state bar fellows foundation		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 10-12-21		Payee name USPS Post Office			
Amount (\$) 2.94		Payee address; City; State; Zip Code 102 E. Broad St Forney, TX 75124			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Overhead		Description postage		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>Page of 14</i>	2 FILER NAME <i>Erleigh N. Wiley</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>10-22-21</i>	5 Payee name <i>Apple. com</i>	
6 Amount (\$) <i>1.99</i>	7 Payee address; City; State; Zip Code <i>1 Apple Park Way Cupertino, CA 95014-0642</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Other-Tech Support/Advertising</i>	(b) Description <i>Media/online support</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>10-20-21</i>	Payee name <i>James Blocker</i>	
Amount (\$) <i>500.00</i>	Payee address; City; State; Zip Code <i>2008 Cologne Carrollton TX. 75007</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising/Consulting</i>	Description <i>digital ad/campaign planning</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>11-01-21</i>	Payee name <i>Daley Professional Web Solutions</i>	
Amount (\$) <i>29.00</i>	Payee address; City; State; Zip Code <i>211 Cardinal Dr. Montgomery, NY 12549</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>web page</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>Pg 7 of 14</i>	2 FILER NAME <i>Erleigh N. Wiley</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>11-02-21</i>	5 Payee name <i>Media and Entertainment Distribution</i>	
6 Amount (\$) <i>7.57</i>	7 Payee address; City; State; Zip Code <i>2500 Broadway Santa Monica, CA 90404</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>boost media ad</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>11-02-21</i>	Payee name <i>USPS Post Office</i>	
Amount (\$) <i>58.00</i>	Payee address; City; State; Zip Code <i>2231 S. Washington St Kaufman, Tx 75142</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Event Expense</i>	Description <i>postage - invitations</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>11-03-21</i>	Payee name <i>My Love's Diner</i>	
Amount (\$) <i>24.43</i>	Payee address; City; State; Zip Code <i>215 W. Mulberry St Kaufman, Tx 75142</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Food/Beverage Expense</i>	Description <i>lunch w/campaign worker to discuss campaign planning</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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: 198 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 11-03-21	5 Payee name Jana Curtis	
6 Amount (\$) 24.00	7 Payee address; City; State; Zip Code 2021 Peony St Heartland, TX 75126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Fees	(b) Description personalized campaign shirt
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 11-04-21	Payee name Apple.com
Amount (\$) 10.81	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Tech Support	Description media support
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 11-15-21	Payee name Apple.com
Amount (\$) 48.70	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Tech Support	Description media support
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: Pg 9 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 11-16-21	5 Payee name Apple.com	
6 Amount (\$) 5.40	7 Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other: Tech Support	(b) Description Media Support
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 11-17-21	Payee name Kauffman County Republican Party		
Amount (\$) 1,250.00	Payee address; City; State; Zip Code 2477 N. SH 34 Kauffman, TX 75142		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Candidate filing fee	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

Date 11-19-21	Payee name USPS Post Office		
Amount (\$) 116.00	Payee address; City; State; Zip Code 2231 S. Washington St Kauffman, TX 75142		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description fundraiser; thank postage - invitations; you card	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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: 16 of 14	2 FILER NAME Heleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 11-19-21	5 Payer name Mike Stevens	
6 Amount (\$) 14,650.00	7 Payee address; City; State; Zip Code 6923 Indiana Ave Box 292 Lubbock, TX 79413	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign consultant
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 11-22-21	Payee name Apple.com	
Amount (\$) 2.93	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Tech Support	Description Media Support
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 11-23-21	Payee name Harland Clark Checks	
Amount (\$) 146.32	Payee address; City; State; Zip Code 15955 LaCantera Pkwy San Antonio, TX 78256	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Overhead expense	Description Checks for campaign acct
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 12-01-21	5 Payee name Daley Professional Web Solutions	
6 Amount (\$) 29.00	7 Payee address; City; State; Zip Code 211 Cardinal Dr. Montgomery, NY 12549	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description web page
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-02-21	Payee name Media and Entertainment Distribution	
Amount (\$) 7.57	Payee address; City; State; Zip Code 2500 Broadway Santa Monica, CA 90404	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description boost media ad
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-06-21	Payee name Apple, Com	
Amount (\$) 10.81	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Tech Support	Description media support
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16/20/14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 12-09-21	5 Payee name Uncommon Goods	
6 Amount (\$) 59.34	7 Payee address; City; State; Zip Code online: uncommongoods.com	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description gifts for volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-09-21	Payee name Sandra Taylor - "Let's Eat"	
Amount (\$) 800.00	Payee address; City; State; Zip Code 16330 Scenic Circle Forney, TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Catering
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-10-21	Payee name Cyndi Wheless Campaign	
Amount (\$) 250.00	Payee address; City; State; Zip Code 4431 Ridgeland Dr. Dallas, TX 75214	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Campaign Contribution
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19/30 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 12-10-21	5 Payee name Bath & Bodyworks	
6 Amount (\$) 214.45	7 Payee address; City; State; Zip Code 2885 Market Center Dr. Rockwall, TX 75032	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description Volunteer gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 12-13-21	Payee name USPS Post Office	City; State; Zip Code
Amount (\$) 58.00	Payee address; City; State; Zip Code 2231 S. Washington Kaufman, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description fundraiser invitations postage - thank you cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 12-14-21	Payee name Shutterfly	City; State; Zip Code
Amount (\$) 155.77	Payee address; City; State; Zip Code 2800 Bridge Pkwy Redwood City, CA 94065	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description gifts for sponsors -
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Pg 14 of 14	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 12-16-21	5 Payee name USPS Post Office	
6 Amount (\$) 102.00	7 Payee address; City; State; Zip Code 2231 S. Washington St Kaufman, TX 75142	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Rental Expense	(b) Description P.O. Box rental
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 12-21-21	Payee name Apple.com	
Amount (\$) 2.99	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014-0642	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Tech Support	Description Media Support
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS**

SCHEDULE I

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 8 of 2	2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 09-30-21	5 Payee name Kaufman Chamber of Commerce			
6 Amount (\$) 82.00	7 Payee address; 607 E. Fair St	City Kaufman, TX	State TX	Zip Code 75142
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Donation		(b) Description (See instructions regarding type of information required.) fundraiser donation	
Date 10-20-21	Payee name Terrell Chamber of Commerce			
Amount (\$) 100.00	Payee address; 1314 W. Moore Ave	City Terrell, TX	State TX	Zip Code 75160
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) fundraiser donation	
Date 11-02-21	Payee name Kaufman County Child Welfare Board			
Amount (\$) 225.00	Payee address; 2525 E. Hwy 175, Ste. E	City Kaufman, TX	State TX	Zip Code 75142
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) purchase car seats	
Date 11-03-21	Payee name Phillips Elementary PTO			
Amount (\$) 450.00	Payee address; 1501 Royal Dr.	City Kaufman TX	State TX	Zip Code 75142
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) replace food for fundraiser that was lost due to power outage	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Pg 2 of 2		2 FILER NAME Erkigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 11-23-21		5 Payee name Forney FFA			
6 Amount (\$) 300.00		7 Payee address: 1800 College Ave		City Forney, TX	State Zip Code 75126
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories.) Donation		(b) Description (See instructions regarding type of information required.) Support fundraiser	
Date 12-08-21		Payee name Patrick McGuire			
Amount (\$) 500.00		Payee address: 6008 E. Boydston Ave.		City Rockwall, TX	State Zip Code 75087
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) Fundraiser - Scottish Rite for Child	
Date 12-16-21		Payee name Tammy Pargoud - REACH Placement Agency			
Amount (\$) 500.00		Payee address: 113 SH 205		City Terrell, TX	State Zip Code 75160
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) Christmas gifts for foster children	
Date		Payee name			
Amount (\$)		Payee address;		City	State Zip Code
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.)		Description (See instructions regarding type of information required.)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED