

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 55
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs. NICKNAME	FIRST Erleigh LAST Wiley	MI N. SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (4)		PHONE NUMBER 202-391-6000
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs. NICKNAME	FIRST Janas LAST Byrnes	MI SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 740 Martin Ln. Combine, TX 75159		
8 CAMPAIGN TREASURER PHONE	AREA CODE (214)		
9 REPORT TYPE		EXTENSION	
<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED		MONTH DAY YEAR	
		01 / 01 / 2022 THROUGH 06 / 30 / 2022	
11 ELECTION		ELECTION TYPE	
ELECTION DATE Month Day Year / / 		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE		13 OFFICE SOUGHT (if known)	
OFFICE HELD (if any) Criminal District Attorney			
14 NOTICE FROM POLITICAL COMMITTEE(S) <small>THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</small>			
<input type="checkbox"/> Additional Pages		COMMITTEE TYPE	
		<input type="checkbox"/> GENERAL	
		<input type="checkbox"/> SPECIFIC	
		COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

FILED FOR RECORD
KALFMIN CO. TEXAS
2022 JUL 13 PM 1:48
BY: LAURA A. WRIGHT
COUNTY CLERK

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME <i>Erleigh N. Wiley</i>		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)	\$ <i>44,404.29</i>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>116,205.98</i>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <i>8,461.62</i>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

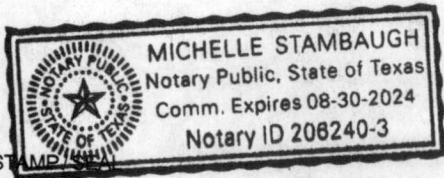
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Handwritten Signature]

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



Sworn to and subscribed before me by *Erleigh N. Wiley* this the *13th* day of *July*, 20*22*, to certify which, witness my hand and seal of office.

Michelle Stambaugh *Michelle Stambaugh* *Notary, State of 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>41,751.00</i>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>2,653.29</i>
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>112,545.69</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>3,660.29</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:

1 of 19

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

01-01-22

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

Andrew Wirmani

7 Amount of contribution (\$)

250.00

6 Contributor address; City; State; Zip Code

3030 Hester Ave Dallas, TX 75205

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Reese Marketos

Date

01-03-22

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

Joy Weaver

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

80038 Wood Ln. Terrell, TX 75160

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Socially Savvy

Date

01-04-22

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

Vic Sasso

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

6112 Copperhill Dr Ste. 100 Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

01-06-22

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

Russell Wilson

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

123 Shamandoh Murphy, TX 75094

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:

2 of 19

2 FILER NAME

Erleigh N. Wiley

3 Filer ID (Ethics Commission Filers)

4 Date

01-07-22

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

Knox Fitzpatrick

7 Amount of contribution (\$)

1,000.00

6 Contributor address; City; State; Zip Code

500 N Akard St, Ste 2150, Dallas, TX 75201

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

Self

Date

01-09-22

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

Rachel Rossler

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

1350 CR 280 Kaufman, TX 75142

Principal occupation / Job title (See Instructions)

Business Owner

Employer (See Instructions)

Circle M Trailers

Date

01-10-22

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

Scott Palmer

Amount of contribution (\$)

500.00

Contributor address; City; State; Zip Code

5530 Westgrove Dr, Ste 540 Dallas, TX 75248

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self

Date

01-11-22

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

Mary Carter

Amount of contribution (\$)

250.00

Contributor address; City; State; Zip Code

P.O. Box 1932 Melbank, TX 75147

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A1: 3 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-11-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Chappell	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 418 Kempner St Mabank, TX 75141		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daren Day	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 419 Splitrail Dr. Kemp, TX 75143		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Premium Fuel
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lance Herrell	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code P.O. Box 705 Kemp, TX 75143		
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Evertech Resources, Inc
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy Manning	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 17401 FM 90 Mabank, TX 75141		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Manning Brothers Dairy

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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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: 4 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-11-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeffrey Norman	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 123 Oakbend Tr Mabank, TX 75147		
8 Principal occupation / Job title (See Instructions) Mayor		9 Employer (See Instructions) City of Mabank
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Peace	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 275 Kemp, TX 75143		
Principal occupation / Job title (See Instructions) Chief Juvenile Probation Officer		Employer (See Instructions) Kaufman County
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carl Squibb	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 18039 Briarwood Dr Kemp, TX 75143		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robby Teague	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code P.O. Box 609 Mabank, TX 75141		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) Teague Chevrolet

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-11-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Teague	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code P.O. Box 252 Mahanok, TX 75147		
8 Principal occupation / Job title (See Instructions) Realtor, Owner		9 Employer (See Instructions) Teague Real Estate
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Teague	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code P.O. Box 609 Mahanok, TX 75147		
Principal occupation / Job title (See Instructions) Owner, President		Employer (See Instructions) Teague Chevrolet
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Thompson	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 527 Autry Way Mahanok, TX 75147		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence Boyd	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 4303 N. Central Expwy Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Burrows	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 4420 Steden Island Dr. Okano, TX 75024		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Corrigan	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 311 E. I-20, St. 1d Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenda Culpepper	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 110 S. Galia Rd Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) District Attorney		Employer (See Instructions) Rockwall County
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Gussio	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1012 Ridge Rd Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin Hall	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 328 W. I-30, Ste. 2 Garland, TX 75043		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall Isenberg	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 4300 N. Central Expwy Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosalind Jeffers	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2913 Sunrise Dr. Rowlett, TX 75088		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Johnson	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 3200 Oaklawn Ste 600 Dallas, TX 75219		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C.H. Judin III	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 8111 Preston Rd Ste. 500 Dallas, TX 75225		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camille Knight	Amount of contribution (\$) 350.00
Contributor address; City; State; Zip Code 7419 Bluefield Dr. Dallas, TX 75248		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin Lenoir	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 3300 Oak Lawn Ste 600 Dallas, TX 75249		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Mulder	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 1905 Bryan St. Ste. 1905 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A1: 9 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 04-2-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Pace	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 2750 Majorie Ave Dallas, TX 75206		
8 Principal occupation / Job title (See Instructions) Owner, Builder		9 Employer (See Instructions) Pace Custom Homes
Date 04-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neil Pask	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 2001 Bryan St Ste. 1905 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent Poyner	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1616 N. Central Expy Ste 605 Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04-2-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed Prospere	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 811 Preston Rd Ste 500 Dallas, TX 75225		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Koopers	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 2719 Daniel Ave Dallas, TX 75205		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Lyon Gorsky & Gilbert
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joe Shearin	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 8150 N Central Expwy Ste M110 Dallas, TX 75206		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toby Shock	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2001 Bryan St Ste 1105 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cody Skipper	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 3131 McKinney Ave Ste 800 Dallas, TX 75204		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 04-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Stafford	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3142 Ross Ave #1 Dallas, TX 75224		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 04-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Todd	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 700 N. Pearl St Ste 2170 Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janet Traylor	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 215 W. Franklin St Ste 300 Waco, TX 76705		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 04-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ezekiel Tyson	Amount of contribution (\$) 300.00
Contributor address; City; State; Zip Code 342 W. Montana Ave Dallas, TX 75224		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-12-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Uhl	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 48216 Gulf Stream Dr Dallas, TX 75244		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah Wirskye	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 4409 Purdue Ave Dallas, TX 75225		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady Wyatt III	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 3300 Oak Lawn St Dallas, TX 75219		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-13-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George Milner, III	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 2828 N. Harwood St Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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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 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-14-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton Massar	7 Amount of contribution (\$) 200.00
6 Contributor address; City; State; Zip Code 310 E. I-30 #100 Garland, TX 75043		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 01-14-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Oberheiden	Amount of contribution (\$) 5,000.00
Contributor address; City; State; Zip Code 3821 Beverly Dr Dallas, TX 75205		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-17-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Beasley	Amount of contribution (\$) 1,200.00
Contributor address; City; State; Zip Code P.O. Box 176 Rosser, TX 75157		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Trinity Claims Service LLC
Date 01-20-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Clancy	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1100 West Ave Austin, TX 78701		
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: 14 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-19-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery Bennett	7 Amount of contribution (\$) 2,000.00
6 Contributor address; City; State; Zip Code 14185 Dallas Pkwy Ste 100 Dallas, TX 75254		
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Ashford, Inc
Date 01-19-22	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 75126		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 01-20-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Hendrickson	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 8072 FM 1308 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Roxann Hendrickson Shipky & Rymer
Date 01-20-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosay Risinger	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 28329 FM 429N Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Self

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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: 15 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-21-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Dearing	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 28329 FM 429 N Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 01-23-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marianne Briggs	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code P.O. Box 1205 Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01-24-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Dearing	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 15874 Jacks Dr. Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01-24-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank Deel	Amount of contribution (\$) 2,000.00
Contributor address; City; State; Zip Code P.O. Box 309 Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

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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 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 01-25-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Greenslade	7 Amount of contribution (\$) 5,000.00
6 Contributor address; City; State; Zip Code 1042 Ashley Way, Ste 100, Tyler, TX 75708		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Biggs & Greenslade, LLC
Date 01-25-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sean McKenna	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 2200 Ross Ave Ste 4000 Dallas, TX 75201		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Spencer Fare LLP
Date 01-29-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nancy Crow	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 10161 FM 429N Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 01-31-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VonCarl Thomas	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1114 E. 1st North St Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Hopewell Baptist Church

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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: 17 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 02-02-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Leonard	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 4115 FM 513 Lone Oak, TX 75153		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02-04-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen Weiland	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 8712 Lakemont Dr. Dallas, TX 75209		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Squire Patton Boggs
Date 02-08-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) J.C. Jackson	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 508 West End St Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02-10-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deandra Grant	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2804 LaCompte Dr Dallas, TX 75227		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

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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: 18 of 19
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)
4 Date 02-11-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick Lemon (Cameron, OK 74432)	7 Amount of contribution (\$) 2,000.00
6 Contributor address; City; State; Zip Code 13183 SH 120		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Rick's Food Mart
Date 02-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samir Bhatt	Amount of contribution (\$) 501.00
Contributor address; City; State; Zip Code 7811 Park Ave Terrell, TX 75160		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Seven Days Drive-It
Date 02-12-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward Johnson	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 304 Chimacherry Trail Forney, TX 75126		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 02-23-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dallas Police Officer PAC	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1412 Griffin St East Dallas, TX 75215		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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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 19
2 FILER NAME Erleigh N. Wilky		3 Filer ID (Ethics Commission Filers)
4 Date 02-23-22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Shields	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 6427 FM 2816 Kaufman, TX 75142		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03-03-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katherine Snyder	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 9956 Dresden Dr. Dallas, TX 75220		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kaufman County
Date 06-28-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Russell	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 109 N. Jackson St. Kaufman, TX 75142		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
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.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1 of 2	
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 01-11-22	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenny Parks	8 Amount of Contribution \$ 942.29	9 In-kind contribution description food at fund-raising event
7 Contributor address; City; State; Zip Code 15821 Hwy 175 Kemp, TX 75143		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Attorney		11 Employer (FOR NON-JUDICIAL)(See Instructions) Self	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 01-11-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy Teague	Amount of Contribution \$ 75.00	In-kind contribution description postage for fundraise invites
Contributor address; City; State; Zip Code P.O. Box 609 Mabank, TX 75147		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Owner, President		Employer (FOR NON-JUDICIAL)(See Instructions) Teague Chevrolet	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 2 of 2	
2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 02-06-22	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierre Wilson	8 Amount of Contribution \$ 400.00	9 In-kind contribution description video production for advertising
7 Contributor address; City; State; Zip Code P.O. Box 2093 Terrell, TX 75160		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Construction		11 Employer (FOR NON-JUDICIAL) (See Instructions) Pete's Construction	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 02-10-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennard Burley	Amount of Contribution \$ 1230.00	In-kind contribution description signs
Contributor address; City; State; Zip Code 553 CR 4100 Grandall, TX 75114		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Business Owner		Employer (FOR NON-JUDICIAL) (See Instructions) KB Janitorial Services	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-03-22	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 01-03-22	Payee name Facebook	
Amount (\$) 146.96	Payee address; City; State; Zip Code 1601 Willow Ave Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description ad & host 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 01-03-22	Payee name Media and Entertainment Distribution	
Amount (\$) 7.51	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 host 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

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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: 2 of 26		2 FILER NAME Erleigh N. Wilky		3 Filer ID (Ethics Commission Filers)	
4 Date 01-04-22		5 Payee name Apple.com			
6 Amount (\$) 10.81		7 Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014			
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 ONLY if direct expenditure to benefit C/OH					
Date 01-04-22		Payee name Raise the Money, Inc.			
Amount (\$) 12.50		Payee address; City; State; Zip Code P.O. Box 264466 Little Rock, AR 72221			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description svc charge for online donations		
	<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					
Date 01-09-22		Payee name Raise the Money, Inc.			
Amount (\$) 24.75		Payee address; City; State; Zip Code P.O. Box 264466 Little Rock, AR 72221			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description svc charge for online donations		
	<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	

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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: 3 of 26	2 FILER NAME Freigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-10-22	5 Payee name Western Media LLC	
6 Amount (\$) 4000.00	7 Payee address; City; State; Zip Code 11154 Huron St #104 Northglenn, CO 80234	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Advertising ad
	(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 01-11-22	Payee name Raise the Money, Inc.	City; State; Zip Code
Amount (\$) 24.75	Payee address; P.O. Box 26460 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description svc charge for online donations
	<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 01-12-22	Payee name Raise the Money, Inc.	City; State; Zip Code
Amount (\$) 24.75	Payee address; P.O. Box 26460 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description svc charge for online donations
	<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

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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: 4 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-13-22	5 Payee name Facebook	
6 Amount (\$) 20.00	7 Payee address; City; State; Zip Code 1601 Willow Ave Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description boost ad 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 01-13-22	Payee name Facebook
Amount (\$) 20.00	Payee address; City; State; Zip Code 1601 Willow Ave Menlo Park, CA 94025
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense
	Description boost ad page
(c) <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 01-13-22	Payee name Raise the Money, Inc
Amount (\$) 29.90	Payee address; City; State; Zip Code P.O. Box 21440 Little Rock, AR 72221
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees
	Description SVK charge for online donations
(c) <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

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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: 5 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-13-22	5 Payee name Mike Stevens	
6 Amount (\$) 20,650.00	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 Advertising Exp	(b) Description consulting fee/signs
	(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 01-14-22	Payee name Wells Fargo Bank	
Amount (\$) 15.00	Payee address; City; State; Zip Code 2100 S. Washington St Kaufman, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank Fee	Description wire transfer SVC charge
	<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 01-17-22	Payee name Raise the Money, Inc.	
Amount (\$) 17.05	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description svc charge for online donations
	<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

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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: 6 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
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4 Date 01-24-22	5 Payee name Apple.com
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6 Amount (\$) 2.99	7 Payee address; 1 Apple Park Way City; Cupertino, CA State; Zip Code 95014
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 01-24-22	Payee name Wells Fargo Bank
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Amount (\$) 30.00	Payee address; 2100 S. Washington St City; Kaufman, TX State; Zip Code 75142
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking / Fees	Description Wire transfer fees
	<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
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Date 01-24-22	Payee name Silverstar Strategies LLC (Hunter Green)
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Amount (\$) 10,000.00	Payee address; 250 Yellowstone Rd City; Cleveland, TX State; Zip Code 77328
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	<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
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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: 7 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-26-22	5 Payee name Donny's	
6 Amount (\$) 31.00	7 Payee address; City; State; Zip Code 2200 S Washington St. Kaufman, TX 75142	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food Expense	(b) Description breakfast w/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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 01-28-22	Payee name Eno's Pizza Tavern	
Amount (\$) 50.50	Payee address; City; State; Zip Code 215 Bois D'Arc St. Forney, TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Beverage Expense w/volunteers	Description Campaign planning
	<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 01-28-22	Payee name Shari's Berries	
Amount (\$) 77.92	Payee address; City; State; Zip Code one Old Country Rd Ste 500 Carle Place, NY 11514	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift Expense	Description Volunteer gifts
	<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

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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 Expense | 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: 8 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 01-31-22	5 Payee name Pot O'Gold Multi-Cinema Productions, Inc	
6 Amount (\$) 1,809.00	7 Payee address; City; State; Zip Code 1629 Bearskin Ln Jacksonville, FL 32225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign advertisements during movie previews
	(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 02-01-22	Payee name Dinky 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02-02-22	Payee name Domino's Pizza	
Amount (\$) 57.88	Payee address; City; State; Zip Code 1102 Raven Rd Ste. 214 Farnay, TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description food 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 9 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
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4 Date 02-02-22	5 Payee name Raise the Money, Inc.
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6 Amount (\$) 262.90	7 Payee address; P.O. Box 26446 Little Rock, AR 72221	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description svc charge for online donations
	(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
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Date 02-03-22	Payee name Apple.com
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Amount (\$) 1298	Payee address; 1 Apple Park Way Cupertino, CA 95014	City;	State;	Zip Code
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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
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Date 02-04-22	Payee name Apple.com
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Amount (\$) 10.81	Payee address; 1 Apple Park Way Cupertino, CA 95014	City;	State;	Zip Code
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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
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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: 10 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-08-22	5 Payee name Medig One, LLC	
6 Amount (\$) 381.00	7 Payee address; City; State; Zip Code 1316 S. 3rd St Malbank, TX 75147	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Newspaper ad - The Monitor
	<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 02-10-22	Payee name VanZandt Newspapers LLC	
Amount (\$) 780.00	Payee address; City; State; Zip Code P.O. Box 319 WilbPoint, TX 75169	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Newspaper ad - Terrell Tribune
	<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 02-10-22	Payee name Latham Bakery	
Amount (\$) 51.34	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 Expense	Description Food/coffee 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

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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: 11 of 26	2 FILER NAME Ericaigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-10-22	5 Payee name Raise the Money, Inc	
6 Amount (\$) 24.75	7 Payee address; City; State; Zip Code P.O. Box 24460 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description svc charge for online donations
	(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 02-14-22	Payee name The Kaufman Herald	
Amount (\$) 1,735.00	Payee address; City; State; Zip Code P.O. Box 460 Kaufman, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description newspaper ad-Kaufman Herald
	<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 02-14-22	Payee name Antonio Barber	
Amount (\$) 800.00	Payee address; City; State; Zip Code 16905 Robin Rd Dallas, TX 75209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 12 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-10-22	5 Payee name Amazon Marketplace	
6 Amount (\$) 40.95	7 Payee address; 440 Terry Ave N City: Seattle, WA State: WA Zip Code: 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift Expense	(b) Description Volunteer gift
	(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 02-18-22	Payee name Van Zandt Newspapers LLC	
Amount (\$) 724.50	Payee address; P.O. Box 319 City: Willis Point, TX State: TX Zip Code: 75769	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Political ad
	<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 02-18-22	Payee name Bivets Printing & Copies	
Amount (\$) 407.28	Payee address; 208 S. East St City: Arlington, TX State: TX Zip Code: 76010	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description push 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

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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: 13 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-22-22	5 Payee name Apple.com	
6 Amount (\$) 2.99	7 Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014	
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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02-22-22	Payee name Antonio Barber	
Amount (\$) 800.00	Payee address; City; State; Zip Code 6905 Robin Rd Dallas, TX 75209	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food 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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02-24-22	Payee name Wells Fargo Bank	
Amount (\$) 30.00	Payee address; City; State; Zip Code 2100S. Washington St Kaufman, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Bank Fee	Description Wire transfer fee
	<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

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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: 14 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-24-22	5 Payee Video Direct	
6 Amount (\$) 10.81	7 Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description media ad
	(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 02-24-22	Payee name Silverstar Strategies LLC (Hunter Green)	
Amount (\$) 10,000.00	Payee address; City; State; Zip Code 250 Yellowstone Rd. Cleveland, TX 77328	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description
	(c) <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 02-24-22	Payee name Mike Stevens	
Amount (\$) 20,000.00	Payee address; City; State; Zip Code 6923 Indiana Ave. Box 292 Lubbock, TX 79413	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Advertising Exp	Description Consulting fee/signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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: 15 of 26		2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 02-25-22		5 Payee name Microsoft			
6 Amount (\$) 75.76		7 Payee address; City; State; Zip Code One Microsoft Way Redmond, WA 98052			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other: Office Expense		(b) Description Software purchase		
	<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	
Date 02-25-22		Payee name Visible Dialogue			
Amount (\$) 10,000.00		Payee address; City; State; Zip Code 5435 N. Garland Ave, Ste. 140 Garland, TX 75040			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing/Postage Expense		Description mail		
	<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	
Date 02-28-22		Payee name Mike Holley			
Amount (\$) 300.00		Payee address; City; State; Zip Code 701 Johnson St Terrell, TX 75760			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description reimbursement - volunteer watch reception		
	<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	

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 26	2 FILER NAME Erleigh N. Wilkey	3 Filer ID (Ethics Commission Filers) 817/2020
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4 Date 02-28-22	5 Payee name Feed Ex
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6 Amount (\$) 132.52	7 Payee address; City; State; Zip Code 3905 Airways, Module G Memphis, TN 38116
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description postage
	(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
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Date 03-01-22	Payee name Daley Professional Web Solutions
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Amount (\$) 29.00	Payee address; City; State; Zip Code 211 Cardinal Dr. Montgomery, TN 38149
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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
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Date 03-01-22	Payee name Apple.com
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Amount (\$) 12.98	Payee address; City; State; Zip Code 1 Apple Park Way Cupertino, CA 95014
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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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: 17 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 03-01-22	5 Payee name Tokiyu I Stop	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 6905 Robin Rd Dallas, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Catering
	(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 03-01-22	Payee name Video Direct	
Amount (\$) 9.73	Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 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 03-02-22	Payee name Video Direct	
Amount (\$) 6.40	Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 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

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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: 18 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 03-02-22	5 Payee name Antonio Barber	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 6905 Robin Rd Dallas, TX 75209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description catering
	(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 03-03-22	Payee name Raise the Money, Inc.	
Amount (\$) 24.75	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description svc charge for online donations
	<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 03-03-22	Payee name Anchor Printing	
Amount (\$) 150.00	Payee address; City; State; Zip Code 6005 W. Moore Ave Terrell, TX 75160	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign material
	<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

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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: 19 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 03-04-22	5 Payee name Apple. Com	
6 Amount (\$) 10.81	7 Payee address; 1 Apple Park Way	City; State; Zip Code Cupertino, CA 95014
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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 03-09-22	Payee name Lone Star Casa		
Amount (\$) 650.00	Payee address; 108 Kenway St	City; State; Zip Code Rockwall, TX 75087	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description	
	(c) <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
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Date 03-14-22	Payee name Sandra Taylor		
Amount (\$) 650.00	Payee address; 16330 Scenic Circle	City; State; Zip Code Forney, TX 75126	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense Food	Description Catering	
	(c) <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
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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: 20 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 03-15-22	5 Payee name Forney Messenger	
6 Amount (\$) 718.00	7 Payee address; City; State; Zip Code 201 W. Broad St Forney, TX 76126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description newspaper ad
	(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 03-24-22	Payee name Video Direct
Amount (\$) 10.81	Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense
	<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 03-29-22	Payee name Video Direct
Amount (\$) 9.73	Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense
	<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

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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: 21 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 04-01-22	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04-12-22	Payee name Mike Stevens	
Amount (\$) 19,971.00	Payee address; City; State; Zip Code 6923 Indiana Ave. Box 292 Lubbock, TX 79413	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description campaign consultant
	<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 05-02-22	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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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: 22 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 05-12-22	5 Payee name Forney Computer	
6 Amount (\$) 449.22	7 Payee address; City; State; Zip Code 425 Pinson Rd. Ste.K Forney, TX 75126	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other: Office Expense	(b) Description Computer repair
	(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 05-18-22	Payee name Daley Professional Web Solutions
Amount (\$) 35.00	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

Date 05-23-22	Payee name Renaissance Hotel - The Worthington
Amount (\$) 46.34	Payee address; City; State; Zip Code 200 Main St. Ft. Worth, TX 76102
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense
	Description Tarrant Co Black Republican 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

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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: 23 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 05-24-22	5 Payee name Video Direct	
6 Amount (\$) 10.81	7 Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description media
	(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 05-31-22	Payee name Texas GOP	
Amount (\$) 409.00	Payee address; City; State; Zip Code 211 E. 7th St. 915 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Texas Convention Registration
	<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 05-31-22	Payee name Video Direct	
Amount (\$) 9.73	Payee address; City; State; Zip Code 410 Terry Ave N. Seattle, WA 98109	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description media
	<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

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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: 24 of 26	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 04-01-22	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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 04-02-22	Payee name Latham Bakery	
Amount (\$) 58.38	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 Expense	Description
	<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 06-14-22	Payee name Michael's	
Amount (\$) 425.42	Payee address; City; State; Zip Code 1655 N. Town East Blvd. #100 Mesquite, TX 75150	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Office	Description framing
	<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

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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: 25 of 26	2 FILER NAME Erleich N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 06-15-22	5 Payee name Texas Federation of Republican Women	
6 Amount (\$) 82.19	7 Payee address; City; State; Zip Code P.O. Box 171146 Austin, TX 78717-0041	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description tickets
	(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 06-16-22	Payee name U.S. Postal Service	
Amount (\$) 116.00	Payee address; City; State; Zip Code 2231 S. Washington St. Kautzron, TX 75142	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description PO Box rental
	<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 06-21-22	Payee name Hilton Hotel Americas	
Amount (\$) 1315.08	Payee address; City; State; Zip Code 1600 Lamar Houston, TX 77010	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel	Description GOP Convention Lodging
	<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

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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>26 of 26</i>	2 FILER NAME <i>Erleigh N. Wiley</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>06-29-22</i>	5 Payee name <i>Video Direct</i>	
6 Amount (\$) <i>9.73</i>	7 Payee address; City; State; Zip Code <i>410 Terry Ave N. Seattle, WA 98109</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>media</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	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

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

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**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: 1 of 5		2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 01-14-22		5 Payee name Lions Club			
6 Amount (\$) 200.00		7 Payee address; 801 W. 10th St		City Kaufman, Tx	State TX
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories.) Donations		(b) Description (See instructions regarding type of information required.) donation/dues	
Date 01-18-22		Payee name Crandall FFA			
Amount (\$) 400.00		Payee address; 400 W. Lewis St		City Crandall, Tx	State TX
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation		Description (See instructions regarding type of information required.) Support fundraiser	
Date 01-26-22		Payee name Kaufman Chamber of Commerce			
Amount (\$) 30.40		Payee address; 1001 E. Fair St		City Kaufman, Tx	State TX
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Event Expense		Description (See instructions regarding type of information required.) banquet ticket	
Date 01-28-22		Payee name Chelsey Scurer			
Amount (\$) 150.00		Payee address; 9241 S. Evans St.		City Scurry, Tx	State TX
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation Expense		Description (See instructions regarding type of information required.) donated item for FFA Auction	

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SCHEDULE I

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1 Total pages Schedule I: 2 of 5	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 02-03-22	5 Payee name Terrell Chamber of Commerce	
6 Amount (\$) 20.00	7 Payee address; 1314 W. Moore Ave	City State Zip Code Terrell, TX 75160
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Event Expense	(b) Description (See instructions regarding type of information required.) ticket for event
Date 02-07-22	Payee name Summy Russor Parents & Friends PFA	
Amount (\$) 150.00	Payee address; 8321 TX-311	City State Zip Code Summy, TX 75158
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation Expense	Description (See instructions regarding type of information required.) donation
Date 02-10-22	Payee name Kauffman County Leadership (Kauffman Chamber)	
Amount (\$) 123.89	Payee address; 607 E. Fair St.	City State Zip Code Kauffman, TX 75142
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Event Expense(s)	Description (See instructions regarding type of information required.) tickets for events (KCCACE, Lone Star (asa))
Date 03-11-22	Payee name Calvin A. Sloan Memorial Fund	
Amount (\$) 100.00	Payee address; P.O. Box 50	City State Zip Code Kauffman, TX 75142
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation Expense	Description (See instructions regarding type of information required.) donation

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1 Total pages Schedule I: 3 of 5		2 FILER NAME Erleigh N. Wiley		3 Filer ID (Ethics Commission Filers)	
4 Date 03-30-22		5 Payee name Reach Child Placement Agency			
6 Amount (\$) 250.00		7 Payee address; 113 SH 205 Terrell, TX 75160		City	State Zip Code
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories.) Donation Expense		(b) Description (See instructions regarding type of information required.) donation	
Date 04-00-22		Payee name Terrell FFA			
Amount (\$) 150.00		Payee address; P.O. Box 1394 Terrell, Tx 75160		City	State Zip Code
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation Expense		Description (See instructions regarding type of information required.) donation	
Date 04-26-22		Payee name Kemp FFA			
Amount (\$) 250.00		Payee address; 905 S. Main St Kemp, Tx 75143		City	State Zip Code
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation Expense		Description (See instructions regarding type of information required.) donation	
Date 05-12-22		Payee name Kemp Area Sports Association			
Amount (\$) 450.00		Payee address; P.O. Box 411 Kemp, TX 75143		City	State Zip Code
PURPOSE OF EXPENDITURE		Category (See instructions for examples of acceptable categories.) Donation Expense		Description (See instructions regarding type of information required.) uniforms for kids	

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1 Total pages Schedule I: 4 of 5	2 FILER NAME Erleigh N. Wiley	3 Filer ID (Ethics Commission Filers)
4 Date 05-23-22	5 Payee name Kaufman Co. Children's Advocacy Center	
6 Amount (\$) 80.00	7 Payee address; 3001 S. Washington St	City State Zip Code Kaufman, TX 75142
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) Donation Expense	(b) Description (See instructions regarding type of information required.) donation
Date 05-31-22	Payee name Renny Colley (St. Jude)	
Amount (\$) 600.00	Payee address; 1602 E. US Hwy 175	City State Zip Code Crandall, TX 75114
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation Expense	Description (See instructions regarding type of information required.) donation
Date 06-14-22	Payee name Forney Juneteenth	
Amount (\$) 150.00	Payee address; P.O. Box 2507	City State Zip Code Forney, TX 75126
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation Expense	Description (See instructions regarding type of information required.) donation
Date 06-17-22	Payee name Kaufman Lions Club	
Amount (\$) 200.00	Payee address; 801 W. 6th St	City State Zip Code Kaufman, TX 75142
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) Donation Expense	Description (See instructions regarding type of information required.) donation

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1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
5 of 5	Erleigh M. Wiley	
4 Date	5 Payee name	
01-23-22	Mabank Fire Department	
6 Amount (\$)	7 Payee address;	City State Zip Code
360.00	111 E Mason St	Mabank, Tx 75147
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
	Donation Expense	donation
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.)
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.)
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.)

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