FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00057712 45 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Stephen Craig NAME Date Received **ELECTRONICALLY FILED** 07/17/2023 NICKNAME LAST **SUFFIX** Smith CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2121 N. Pearl Street MAILING Amount Receipt # **ADDRESS** Suite 210, Mail Box No. 1 Change of Address Dallas, TX 75201-7321 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST ΜI **TREASURER** Mr. Thomas M. NAME NICKNAME LAST **SUFFIX** Melsheimer STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 2121 N. Pearl Street **ADDRESS** Suite 900 (Residence or Business) Dallas, TX 75201 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 453-6401 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

GO TO PAGE 2

Court Of Appeals, Justice Place 6 District 5

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 45

13 C / OH NAME	Smith, Stephen Craig	(The Honorable)	14 Filer ID 00057712	(Ethics Com	mission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. 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.							
Additional Pages	COMMITTEE TYPE	TYPE COMMITTEE NAME						
	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	<u> </u>					
		COMMITTEE GAME AIGH THEAGONEN ABBILE						
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00			
		ICAL CONTRIBUTIONS		\$	0.00			
EXPENDITURE	·	PLEDGES, LOANS, OR GUARANTEES OF LOAN ZED BOLITICAL EXPENDITURES	IS)	\$				
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	17,218.36			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	28,606.04			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.						
			able Stephen Craig S					
		Signature o	f Candidate or Officeho	older				
AFFIX NO	TARY STAMP / SEAL AB	DVE						
Sworn to and subso	cribed before me, by the s	aid	, this the		_ day			
of	, 20, to co	ertify which, witness my hand and seal of office.						
Signature of office	er administering oath	Printed name of officer administering oath	Title of office	er administerii	ng oath			
-	Č	Ç			-			

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 45						
	18 FILER NAME19 Filer ID(Ethics Commission Filers)Smith, Stephen Craig (The Honorable)00057712								
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT								
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 17,218.36						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$ 105,000.00						
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$						
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/41 Rpt: 4/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	04/27/2023	2811 McKinney Garage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.00	2811 McKinney
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Parking for in district travel
		Taking for in district dayor
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payee name
	01/02/2023	AA Citicard
	Amount (\$)	
	\$595.00	P.O. Box 6403
		Sioux Falls, SD 57117
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense ABOTA Ireland conference event deposit
		7.50 17 Tieland Contention Count deposit
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	01/04/2023	ABOTA
		Payee address; City; State; Zip Code
	Amount (\$) \$200.00	2001 Bryan St., Suite 3000
	Φ200.00	2001 Bryan St., Suite 3000
		D. II TV 75004
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		American Board of Trial Advocates annual dues
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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)

Credit Card Payment	The Instruction Guide explains how to c	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/41 Rpt: 5/45	Smith, Stephen Craig (The Honorable)	00057712
4 Date	5 Payee name	'
04/25/2023	AT&T	
6 Amount (\$)	7 Payee address; City; State; Zip C	code
\$25.00	P.O. Box 5014	
	Carol Stream, IL 60197	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Cellular service for iPad
		Celidial Service for it au
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lought Office held
expenditure to benefit C/O		
Date	Payee name	
02/20/2023	AT&T	
Amount (\$)	Payee address; City; State; Zip C	code
\$25.00	P.O. Box 5014	
	Carol Stream, IL 60197	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	·	Check if Austin, TX, officeholder living expense
		Cellular service for iPad
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		Cince neta
Date	Payee name	
03/01/2023	AT&T	
Amount (\$)	Payee address; City; State; Zip C	Code
\$25.00	P.O. Box 5014	
	Carol Stream, IL 60197	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense Cellular service for iPad
		Celiulal Service IVI Irau
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O		Since floid
		V : V0 5 4 40 0

SCHEDULE F1

Advertising Expense Eve Accounting/Banking Fee Consulting Expense Foo Contributions/ Donations Made By - Gift

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
1	Sch: 3/41 Rpt: 6/45	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712
4	Date	5 Payee name
	01/20/2023	Adelmos Ristorante
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$186.38	5450 W. Lovers Lane
	,	
		Dallas, TX 75209
Ļ	DUDDOCE	1
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	06/28/2023	Al Biernat's
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.37	4217 Oak Lawn Ave.
	Ψ00.01	4211 Our Edwit / WC.
		Dellas TV 75310
		Dallas, TX 75219
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/17/2023	Alankar Food Court
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$16.69	133 N. Riverfront Blvd.
	Ψ10.09	200 M. M. Olivoli, Divu.
		Dallas, TX 75207
_	PURPOSE	1
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages at courthouse
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 4/41 Rpt: 7/45	Smith, Stephen Craig (The Honorable) 00057712	
4	Date	5 Payee name	_
	02/07/2023	Alankar Food Court	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$8.51	133 N. Riverfront Blvd.	
		Dallas, TX 75207	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Food/Beverage Expense	
	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Food and beverages at courthouse	
_	0 1: 0 1: 0		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	01/30/2023	Alankar Food Court	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.50	133 N. Riverfront Blvd.	
		Dallas, TX 75207	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Food and beverages at courthouse with attorneys	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	_
	01/09/2023	Alankar Food Court	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$14.92	133 N. Riverfront Blvd.	
	Ψ14.3 <i>L</i>	100 N. KWellione Blvd.	
		Dallas, TX 75207	
	DUDDOOF		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Food and beverages at courthouse with attorneys	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 5/41 Rpt: 8/45	Smith, Stephen Craig (The Honorable) O0057712
4	Date	5 Payee name
	01/06/2023	Alankar Food Court
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.61	133 N. Riverfront Blvd.
		Dallas, TX 75207
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Food and beverages at courthouse with supporter
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/19/2023	American Inns of Court
	Amount (\$)	Payee address; City; State; Zip Code
	\$90.00	225 Reinekers Lane #770
		Alexandria, VA 22314
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Annual dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2023	Apple Online Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	Online
		Online, TX 99999
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/41 Rpt: 9/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/04/2023	Apple Online Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.57	Online
		Online, TX 99999
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFEINDITORE	Check if Austin, TX, officeholder living expense
		Office supplies
Ļ	0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	01/17/2023	Arts District Mansion
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.50	2101 Ross Ave.
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Food and beverages with supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	D :	
	Date	Payee name
	06/21/2023	At Bistro
	Amount (\$)	Payee address; City; State; Zip Code
	\$204.49	8305 Westchester Dr.
		Dallas, TX 75225
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Food and beverages with supporters
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		oove)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commiss	sion Filers)
	Sch: 7/41 Rpt: 10/45	Smith, Stephen Craig (The Honorable) 00057712	
4	Date	5 Payee name	
	05/14/2023	Bailey Bar & Cafe	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.08	Barrack St.	
		Enniscorthy	
		Co Wexford 00000 Ireland	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Food and beverages on ABOTA out of dist	rict travel
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
_	Date	Device serve	
	05/08/2023	Payee name Ballybunion Golf Club	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$224.77		
			
		Ballybunion Co. Kerry Ireland	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Expenses at Ballybunion Golf Club for trav district ABOTA trip	el out of
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
	05/08/2023	Ballybunion Golf Club	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$33.15	Sandhill Road	
		Ballybunion Co. Kerry Ireland	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Food and beverages at Ballybunion Golf C	lub for out
		of district travel for ABOTA trip	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	DH .	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By-Candidate/Officeholder/Political Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	<u> </u>	-
1	Sch: 8/41 Rpt: 11/45	Smith, Stephen Craig (The Honorable) Smith, Stephen Craig (The Honorable)	
4	Date	5 Payee name	
	05/08/2023	Ballybunion Golf Club	
6	Amount (\$) \$176.80	7 Payee address; City; State; Zip Code Sandhill Road	
		Ballybunion Co. Kerry Ireland	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Food and beverages at Ballybunion Golf Club on travel out of district ABOTA trip	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	01/25/2023	Barclays	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,605.36	P.O. Box 60517	
		City of Industry, CA 91716	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		American Airlines ticket for ABOTA Ireland	
		conference	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	Ξ
	01/30/2023	Belo Mansion	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.00	2101 Ross Ave.	
		Dallas, TX 75201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Jack Boles parking at Belo Mansion	
		Sack Boiles parking at Belo Mansion	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Wages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)	
1	Total pages Schedule F1:	I							3	Filer ID	(Ethics Commission Filers)	
L	Sch: 9/41 Rpt: 12/45	;	Smith, Stepl	nen Craig (The H	onorable)				L	00057712		
4	Date	5	Payee name									
	01/25/2023		Belo Mansio	on								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode					_
	\$20.00	2	2101 Ross A	Ave.								
			Dallas, TX 7	5201								
8	PURPOSE	(a) (Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description				_
	OF EXPENDITURE		Travel In Dis			,		·	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE							_		officeholder living		
								Parking for ev	ven	it at Belo Ma	ansion	
Ļ		<u> </u>				•	<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Offic	ceholder name	0	ffice sou	ught			Office he	eld	
	Date	Ī	Payee name					· · · · · · · · · · · · · · · · · · ·				Ī
	04/19/2023		Bernies Priv	ate Club								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode					_
	\$72.79	(6211 W. No	rthwest Hwy.								
			Dallas, TX 7	5225								
	PURPOSE	(a) (Category (Se	e Categories listed at the	ton of this sche	edule)	(b)	Description				_
	OF EXPENDITURE			age Expense	top of this serie	,uuic)			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							—		officeholder living		
								Food and bev	/era	ages with su	ipporters	
							<u> </u>					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Offic	ceholder name	0	ffice sou	ught			Office he	eld	
	OTTO											
	Date	l	Payee name									
	02/08/2023		Bernies Priv	ate Club								
	Amount (\$)	l	Payee addres	•	State;	Zip Co	ode					
	\$125.00	(6211 W. No	rthwest Hwy.								
			Dallas, TX 7	5225								
	PURPOSE	(a) (Category _{(Se}	e Categories listed at the	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			age Expense						de of Texas. Com		
								_		officeholder living		
								Food and bev	vera	ayes willi SU	ihhoirei2	
	Complete ONLY if direct	<u> </u>	andidato/Offic	ceholder name		ffice sou	ıabt			Office he	ald	_
	expenditure to benefit C/O		anunate/OIII	choluel Haille	O	1110E 20L	agrit			Onice He	Jiu	
												_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/41 Rpt: 13/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/16/2023	Boots Retail
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.65	2708 Dublin
		Dublin 00000 Ireland
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		ABOTA trip expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/06/2023	Carrousel Travel
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,811.00	6625 Lyndale Ave. S
		Minneapolis, MN 55423
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Fee for out of district travel to Ireland for ABOTA convention
	Complete ONLY if direct	
	expenditure to benefit C/OI	U
	Data	Developer
	Date 06/28/2023	Payee name Central Market
	Amount (\$) \$100.51	Payee address; City; State; Zip Code 5750 E. Lovers Lane
	φ100.31	3730 E. Loveis Laile
		Dallas, TX 75206
	DUDDOCE	To.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Dinner for supporters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientale to beliefft C/OI	'

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 11/41 Rpt: 14/45	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	
	05/15/2023	Chase Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.00	1700 Pacific	
		Dallas, TX 75201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 863	itside of Texas. Complete Schedule T.
	-	l — — — — — — — — — — — — — — — — — — —	TX, officeholder living expense
			TM fees for transactions while on travel or ABOTA conference in Ireland
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
-	Date	Payee name	
	05/13/2023	Chase Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$111.41	1700 Pacific	
		Dallas, TX 75201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel out of District	rtside of Texas. Complete Schedule T. FX, officeholder living expense
			TM fees for transactions while on travel
			or ABOTA conference in Ireland
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/08/2023	Chase Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	1700 Pacific	
	,		
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Traver out of District	itside of Texas. Complete Schedule T.
			TX, officeholder living expense TM fees for transactions while on travel
			or ABOTA conference in Ireland
-	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 12/41 Rpt: 15/45	Smith, Stephen Craig (The Honorable) 00057712	
4	Date	5 Payee name	_
	05/08/2023	Chase Bank	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$99.45	1700 Pacific	
	I		
		Dallas, TX 75201	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	I	Non-Chase ATM fees for transactions while on tra	/el
	l	out of district for ABOTA conference in Ireland	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit 5/5/		
	Date	Payee name	_
	05/08/2023	Chase Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$192.13	1700 Pacific	
	I		
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	I	Non-Chase ATM fees for transactions while on tra	/el
	1	out of district for ABOTA conference in Ireland	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	_
	05/03/2023	Chase Bank	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.00	1700 Pacific	
	I		
	l	Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
	l	Check if Austin, TX, officeholder living expense Non-Chase ATM fees for transactions while on tra	/el
	l	out of district for ABOTA conference in Ireland	С.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	. •	2 FILER NAME Smith Stephen Craig (The Henerable)	3 Filer ID (Ethics Commission Filers) 00057712
4	Sch: 13/41 Rpt: 16/45 Date	Smith, Stephen Craig (The Honorable) 5 Payee name	00037712
	05/03/2023	Chase Bank	
6	Amount (\$) \$37.55	7 Payee address; City; State; Zip Code 1700 Pacific Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Non-Chase ATM fees for transactions while on travel out of district for ABOTA conference in Ireland
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	Date 04/12/2023	Payee name Cheesecake Factory	
	Amount (\$) \$120.56	Payee address; City; State; Zip Code 7700 W. Northwest Hwy. Dallas, TX 75225	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverages with supporters post Inn of Court event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held
	Date 04/07/2023	Payee name Chevron	
	Amount (\$) \$44.01	Payee address; City; State; Zip Code 101 NW IH 35	
		Hillsboro, TX 76645	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Out of district travel to UT Austin for CLE
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/41 Rpt: 17/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/24/2023	Cindi's NY Deli
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.41	306 S. Houston St.
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Food and beverages with court house staff
Ļ	Operation ONLY if all part	On all data (Office helder marrie
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/25/2023	Cindi's NY Deli
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.37	306 S. Houston St.
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages at courthouse
		1 ood and beverages at countriouse
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Dove name
	05/19/2023	Payee name Circle K Kaufman
	Amount (\$)	Payee address; City; State; Zip Code
	\$31.06	2201 S. Washington St.
		Kaufman, TX 75142
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Travel in district expenses
		Traver in district expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 15/41 Rpt: 18/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	02/15/2023	Clift Elementary PTO
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.00	650 Parks School House Road
		Waxahachie, TX 75165
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Tanalassi senalen
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	04/10/2023	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$122.65	8055 Churchill Way
		Dallas, TX 75251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies
		Office Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/21/2023	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$188.27	8055 Churchill Way
		Dallas, TX 75251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Office supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/41 Rpt: 19/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/12/2023	Culloden Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$158.92	142 Bangor Road
		Belfast BT18 OEX Ireland
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Lodging for ABOTA trip out of district
		Loughing for ADOTA trip out of district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	05/12/2023	Cultra Inn
	Amount (\$)	Payee address; City; State; Zip Code
	\$22.83	1 Cultra Station Rd
		Holywood BT18 OAU Ireland
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meal on ABOTA travel out of district trip
		modi on ABO IV davor out or diodiot dip
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Para and a second secon
	Date 06/27/2023	Payee name Deluxe for Business
	Amount (\$)	Payee address; City; State; Zip Code
	\$109.82	online purchase
		online purchase, TX 99999
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Charge for new campaign account checks
		Charge for new campaigh account checks
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/41 Rpt: 20/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	01/25/2023	Democracy Toolbox
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	8552 Royal County Down Drive
		McKinney, TX 75070
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website hosting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/27/2023	Dream Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.78	2800 Routh Street
		Suite 170
		Dallas, TX 75201
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages with judges
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	d
	Date	Payee name
	01/26/2023	Escondido TexMex Patio
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.16	5950 Royal Lane A
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages with supporters
		1 ood and beverages with supporters
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/41 Rpt: 21/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	02/13/2023	Fachini
6	Amount (\$) \$538.88	7 Payee address; City; State; Zip Code 33a Highland Park Village
		Dallas, TX 75205
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverages with supporters
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/09/2023	Fifer, Amy (Ms.)
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 600 Commerce St. Dallas, TX 75202
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Merry Christmas and thank-you
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/03/2023	Fifth Court of Appeals Employee Fund
	Amount (\$) \$100.00	Payee address; City; State; Zip Code George L. Allen, Sr. Courts Bldg. 600 Commerce St., Suite 200 Dallas, TX 75202
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to Employee Fund
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/41 Rpt: 22/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	03/30/2023	Fish City Grill
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$155.05	10720 Preston Rd., Suite 1006
		Dallas, TX 75230
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporter
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/14/2023	Flying Fish
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.32	1838 Irving Blvd.
		Dallas, TX 75207
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/16/2023	Foreign Exchange
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.56	No address
		D-II TV 75004
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Foreign exchange rate adjustments for ABOTA travel out of district
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 20/41 Rpt: 23/45	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712	
4	Date 05/13/2023	5 Payee name Hugos Restaurant	
6	Amount (\$) \$208.31	7 Payee address; City; State; Zip Code 6 Merrion Row Dublin D02 T657 Ireland	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverages on ABOTA trip out of district travel	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 04/11/2023	Payee name Irving-Carrollton NAACP	
	Amount (\$) \$55.00	Payee address; City; State; Zip Code P.O. Box 166253 Irving, TX 75016	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Registration for NAACP event	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 02/02/2023	Payee name Kerry Harris Satellite	
	Amount (\$) \$129.90	Payee address; City; State; Zip Code 103 Lacosta St. Athens, TX 75751	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Internet access expense	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 21/41 Rpt: 24/45	Smith, Stephen Craig (The Honorable) Smith, Stephen Craig (The Honorable)
4 Date	5 Payee name
01/03/2023	Kerry Harris Satellite
6 Amount (\$) \$129.90	7 Payee address; City; State; Zip Code 103 Lacosta St. Athens, TX 75751
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Internet access service fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/09/2023	Killarney Park Hotel
Amount (\$)	Payee address; City; State; Zip Code
\$247.10	Town Centre, East Ave.
	Killarney V93 CF30 Ireland
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Lodging for travel out of district ABOTA trip
	Loughing for traver out of district ABOTA trip
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/12/2023	Lone Star 5
Amount (\$)	Payee address; City; State; Zip Code
\$13.71	N. Hwy 75
	Sherman, TX 75090
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Miscellaneous travel in district
Complete ONLY if direct	Our distance (Office health an arms and Office a country)
Complete ONLY if direct	
expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/41 Rpt: 25/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/15/2023	Madigans Pub Leeson Street
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.14	104-105 Leeson Street Lower
		Dublin D02 K710 Ireland
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meal on travel out of district ABOTA trip
		mod on dator od or district / LSS / / taip
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/10/2023	Mattitos Tex Mex
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.11	7778 Forest Lane
	•	
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Dayso name
	04/11/2023	Payee name NAACP Irving
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 166176
	Ψ200.00	1.0. Box 100170
		Irving, TX 75016
	PURPOSE	The state of the s
	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Contribution
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	pondition to bonone o/or	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political (

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ittee L	cood/Beverage Expense Sift/Awards/Memorials E legal Services The Instruction Gui	xpense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	l							3	Filer ID	(Ethics Commission Filers)
	Sch: 23/41 Rpt: 26/45	Sı	mith, Steph	en Craig (The H	lonorable)					00057712	
4	Date	5 Pa	ayee name								
	03/20/2023	N	eiman Mar	cus							
6	Amount (\$)	7 Pa	ayee address	s; City;	State;	Zip Co	ode				
	\$304.44	86	687 N. US	75 Central Expy							
		D	allas, TX 7	5225							
8	PURPOSE	(a) Ca	ategory (See	Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE	ı		Memorials Expe		,			outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE							_		officeholder living	g expense
								Gifts for supp	orte	ers	
_	Complete ONLY if direct		adidata/Off: -	oholdor norra		office car	lap+			Office	old.
9	Complete ONLY if direct expenditure to benefit C/OI		iuiuate/Offic	eholder name		office sou	igill			Office he	eiu
	Date	Pa	ayee name								
	04/13/2023	0	cean Prime)							
	Amount (\$)	Pá	ayee addres:	s; City;	State;	Zip Co	ode				
	\$96.08	21	101 Cedar	Springs Rd.							
		Sı	uite 150								
		D	allas, TX 7	5201							
	PURPOSE	(a) Ca	ategory (See	Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE	ı		ge Expense		•		□			plete Schedule T.
	LA LADITORL							ш		officeholder living	
								Food and bev	vera	ayes with St	ihhoirei
_	Complete ONLY if direct	Car	ndidate/Offic	eholder name		Office sou	laht			Office he	ald
	expenditure to benefit C/Oł		ididate/Offic	enoluei name		,,,,,,ce 200	igill			Office He	au .
	Date	Pa	ayee name								
L	04/06/2023	P	etro Max #4	1							
	Amount (\$)	l	ayee addres:		State;	Zip Co	ode				
	\$53.30	19	961 E. MLK	Blvd.							
		_		V ==4:5							
		C	orsicana, T	X 75110							
	PURPOSE OF	l .	•	Categories listed at the	top of this sche	edule)	(b)	Description	a	do of T C	plata Cabadul - T
	EXPENDITURE	Tr	ravel Out of	District						de of Texas. Com officeholder living	plete Schedule T.
								_			travel from UT Austin for
								CLE			
	Complete ONLY if direct		ndidate/Offic	eholder name	С	office sou	ıght			Office he	eld
	expenditure to benefit C/OI	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/41 Rpt: 27/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	03/21/2023	Platinum Parking FW
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	115 W. 6th St.
		Fort Worth, TX 76102
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking for travel out of district for CLE
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/20/2023	Quik Trip
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.69	109 E. Northside Dr.
		Fort Worth, TX 76164
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Travel out of district expenses for CLE in Fort Worth
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	01/03/2023	Reichek, Amanda (Judge)
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$222.00	P.O. Box 180551
		Dallas, TX 75218
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Reimbursement for Justice Myer's event
		Reinibulsement for Sustice Myer's event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/41 Rpt: 28/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	02/07/2023	Ring Multicam
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$108.25	Online
		Online, TX 99999
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Security camera expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/OI	
	Date	Dayso name
	03/28/2023	Payee name Sevy's Grill
		· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee address; City; State; Zip Code
	\$101.44	8201 Preston Rd.
		Dallas, TX 75225
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/09/2023	Shell Service Station
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.79	101 FM 148
		Crandall, TX 75114
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Travel in district expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 26/41 Rpt: 29/45	Smith, Stephen Craig (The Honorable) 00057712	
4	Date	5 Payee name	
	02/28/2023	Shinsei	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$240.26	7713 Inwood Rd.	
		Dallas, TX 75209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Food and beverages with supporters	
		1 ood and beverages with supporters	
9	Complete CNI V if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		
_	<u> </u>		
	Date	Payee name	
	02/28/2023	Shinsei	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$72.62	7713 Inwood Rd.	
		Dallas, TX 75209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Food and beverages with supporters	
		1 ood and beverages with supporters	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	. .		
	Date	Payee name	
	05/22/2023	Smith, Craig	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$39.00	6208 Waggoner Dr.	
		Dallas, TX 75230	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
	ZAI ZHOHORZ	Check if Austin, TX, officeholder living expense	
		Reimbursement for in district travel	
_	Complete ONLY if alias -t	Condidate/Officeholder name Office cought	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	·		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/41 Rpt: 30/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	03/20/2023	Smith, Craig
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$94.00	6208 Waggoner Dr.
		Dallas, TX 75230
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Travel to and expenses for conference in Fort Worth
		· ·
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/20/2023	Smith, Craig
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.00	6208 Waggoner Dr.
		Dallas, TX 75230
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for travel in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/26/2023	Smith, Craig
	Amount (\$)	Payee address; City; State; Zip Code
	\$323.00	6208 Waggoner Dr.
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Travel out of district to Texas Law School for CLE
		Traver out of district to Texas Law Scriot for CLL
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politic Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 28/41 Rpt: 31/45	Smith, Stephen Craig (The Honorable)	00057712
4 Date	5 Payee name	·
01/04/2023	Smith, Craig	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$90.00	6208 Waggoner Dr.	
	Dallas, TX 75230	
8 PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for travel in district mileage, etc.
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O	Н	
Date	Payee name	
01/04/2023	Smith, Craig	
Amount (\$)	Payee address; City; State; Zip Code)
\$97.74	6208 Waggoner Dr.	
	Dallas, TX 75230	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for books and news for office
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O	Н	
Date	Payee name	
01/04/2023	Smith, Craig	
Amount (\$)	Payee address; City; State; Zip Code	
\$75.00	6208 Waggoner Dr.	
	Dallas, TX 75230	
PURPOSE OF	, (, , , , , , , , , , , , , , , , , ,	Description
EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for miscellaneous in district travel
		expenses
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/O	Н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/41 Rpt: 32/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	01/23/2023	Smith, Craig
6	Amount (\$) \$270.00	7 Payee address; City; State; Zip Code6208 Waggoner Dr.
	Ψ270.00	0200 Waggoner Dr.
		Dallas, TX 75230
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Travel out of district for Austin Investiture
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-	Date	Payee name
	06/01/2023	Smith, Craig
_	Amount (\$)	Payee address; City; State; Zip Code
	\$95.00	6208 Waggoner Dr.
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for miscellaneous in district travel
		expenses
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	03/22/2023	TST Onesan Dim Sum Sushi
	Amount (\$)	Payee address; City; State; Zip Code
	\$289.38	12300 Inwood Rd. #180
		Dallas, TX 75244
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages with supporters
		1 ood and beverages with supporters
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comr

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/41 Rpt: 33/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	04/26/2023	Target
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$31.23	1021 W. University
		Georgetown, TX 78628
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Office supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/17/2023	Taverna
	Amount (\$)	Payee address; City; State; Zip Code
	\$152.20	3312 Knox St.
		Dallas, TX 75205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/30/2023	Texas Board of Legal Specialization
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	505 E. Huntland Drive.
		Suite 400
		Austin, TX 78752
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		TBLS fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	T	
1	Total pages Schedule F1:	
L	Sch: 31/41 Rpt: 34/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	01/14/2023	Texas Tech Law School Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$500.00	1802 Hartford Ave.
	Ψ300.00	1002 Hartiota Ave.
		Lubbock, TX 79409
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Donation to Texas Tech Law School
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
H	Date	Dayaa nama
	05/10/2023	Payee name The Dirty Duck Alehouse
		•
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.77	2-4 Kinnegar Rd
		Holywood BT18 9JN United Kingdom
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meal on ABOTA out of district travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1
H	Date	Payee name
	05/15/2023	The Loop T2 Co Dublin
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.41	Dublin Rd.
		Corballis, Co.
		Dublin K67 A0K7 Ireland
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Expense for ABOTA out of district trip
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	·

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nse Travel ense Travel ges/Contract Labor OTHER

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/41 Rpt: 35/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/23/2023	The Mercury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$67.12	11909 Preston Road
		Dallas, TX 75230
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/13/2023	The Mercury
	Amount (\$)	Payee address; City; State; Zip Code
	\$207.66	11909 Preston Road
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
		. Sou and soverages man cappended
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/16/2023	The Shelbourne
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$46.71	27 St. Stephen's Green
		Dublin 00000 Ireland
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages on out of district travel on
		ABOTA trip to Ireland
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 33/41 Rpt: 36/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	01/10/2023	Tom Thumb
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.48	11920 Preston Rd.
L		Dallas, TX 75230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Miscellaneous office supplies
		Wilderian edg office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	06/27/2023	Total Wine & More
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$312.73	9350 N. Central Expressway
		Dallas, TX 75230
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages for dinner for supporters
		1 ood and beverages for diffice for supporters
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
⊨	Date	Payee name
	04/07/2023	UT Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	Unknown
	Ψ13.00	Olikilowii
		Aughin TV 00000
		Austin, TX 99999
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Parking - out of district travel to CLE at UT Austin
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г		
1		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 34/41 Rpt: 37/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/16/2023	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.18	unknown
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber for ABOTA out of district travel
		OBEL TO ABOTA out of district travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
\vdash	Data	
	Date	Payee name
	05/16/2023	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$71.22	unknown
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Uber for ABOTA out of district travel
		Ober 101 / Bo 1/1 dat of district travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	05/16/2023	Payee name Uber
		111
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.10	unknown
		_ "
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber for ABOTA out of district travel
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/41 Rpt: 38/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	05/16/2023	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$86.41	Unknown
_		Dallas, TX 75201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District Check if Austin, TX, officeholder living expense
		Uber for ABOTA out of district travel
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/20/2023	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.40	Unknown
		D. II TV 75004
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber services for travel in district
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/20/2023	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.29	Unknown
		Dallas, TX 75201
	DUDDOCE	Tu.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Uber services for travel in district
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 36/41 Rpt: 39/45	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	03/20/2023	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.23	unknown
		Dallas, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber services for travel in district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davido namo
	03/08/2023	Payee name Uber
	Amount (\$)	
	` '	Payee address; City; State; Zip Code unknown
	\$53.56	UIIKIIOWII
		D-II TV 75004
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Chapter to Taylor Camplete Categories
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Uber for in district travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/08/2023	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.56	Unknown
		Dallas, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Uber for in district travel
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 37/41 Rpt: 40/45	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	
	03/07/2023	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$16.70	unknown	
		Dallar TV 75004	
_		Dallas, TX 75201	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 Haver in District	n, TX, officeholder living expense
		Uber for in di	strict travel
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought H	Office held
_	<u> </u>		
	Date	Payee name	
	03/07/2023	Uber City Code	
	Amount (\$) \$66.83	Payee address; City; State; Zip Code unknown	
	φ00.83	unknown	
		Dallas, TX 75201	
	PURPOSE		
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		Uber for in di	strict travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	U	Office Held
	Date	Payee name	
	03/03/2023	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5.78	unknown	
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense for in district travel
		33.35.105	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 38/41 Rpt: 41/45	Smith, Stephen Craig (The Honorable) 00057712	
4	Date	5 Payee name	
	03/02/2023	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$29.63	Unknown	
		Dallas, TX 75201	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Uber service for in district travel	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
Г	Date	Payee name	=
	02/28/2023	Uber	
Г	Amount (\$)	Payee address; City; State; Zip Code	_
	\$23.06	Unknown	
		Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Uber service for in district travel	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI		
F	Date	Payee name	=
	02/13/2023	Uber	
H	Amount (\$)	Payee address; City; State; Zip Code	-
	\$53.44	Unknown	
		Dallas, TX 75201	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Uber service for in district travel	
		Ober Service for itt district traver	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/OI	o	
\vdash			_
I			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 39/41 Rpt: 42/45	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712
4	Date 02/06/2023	5 Payee name Uber
6	Amount (\$) \$29.14	7 Payee address; City; State; Zip Code unknown Dallas, TX 75201
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber service for in district travel
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/06/2023	Payee name Uber
	Amount (\$) \$27.75	Payee address; City; State; Zip Code unknown Dallas, TX 75201
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Uber service for in district travel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 05/16/2023	Payee name WH Smith InMotion
	Amount (\$) \$25.10	Payee address; City; State; Zip Code Dublin Airport
		Dublin 00000 Ireland
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Electronics used on ABOTA out of district trip
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed a	lbove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commis	sion Filers)
L	Sch: 40/41 Rpt: 43/45		phen Craig (The Ho	norable)				00057712		
4	Date	5 Payee name	е							
	03/29/2023	Walmart S	upercenter							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode					
l	\$68.70	9301 Fore:	st Lane							
		Dallas, TX	75243							
8	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE	Office Ove	rhead/Rental Expen	ise				ide of Texas. Com , officeholder livinç	plete Schedule T.	
						Office equipm			g expense	
						Onice equipir				
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	<u>l</u> ught			Office he	eld	
⊨	D-4-									
l	Date	Payee name	9							
L	03/21/2023	Wendy's								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$11.88	1500 East	chase Pkwy							
		Fort Worth	, TX 76120							
Г	PURPOSE	(a) Category	See Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE		erage Expense	, ,		_	outs	ide of Texas. Com	plete Schedule T.	
	LAFENDITORE					ш		, officeholder living		
						Meal during to	rav	el out of dis	trict for CLE	
L										
l	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	ught			Office h	eld	
L		-								
	Date	Payee name	е							
	04/19/2023	еВау								
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
l	\$24.30	Online con	npany							
		San Jose,	CA 99999							
	PURPOSE		See Categories listed at the to		(b)	Description	_			
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise					plete Schedule T.	
l								, officeholder living	g expense	
						Office supplie	35			
\vdash	Complete CNII V If allows	Com all al - t - 101	ficebolder reserve	Offi	10.6.			Off:!	ald	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office so	uynt			Office h	c iu	
$ldsymbol{ldsymbol{ldsymbol{eta}}}$										
_										

SCHEDULE F1

Solicitation/Fundraising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - al Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expen Legal Services	Polling Exp se Printing Ex	rnead/Rental Expense bense pense ages/Contract Labor		Travel in Distric Travel Out of Di		
	Credit Card Payment		The Instruction Guide e	xplains how to co	mplete this form.				
1	Total pages Schedule F1:	2 FILER NAM	E			3	iler ID	(Ethics Commission File	ers)
	Sch: 41/41 Rpt: 44/45	Smith, Step	ohen Craig (The Hond	orable)		(00057712		
4	Date	5 Payee name	<u> </u>						
	04/18/2023	eBay	•						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co					
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		San Jose,	CA 99999						
8	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b) Description				
	OF EXPENDITURE		rhead/Rental Expens		Check if trav	el outside	e of Texas. Con	plete Schedule T.	
	LAFENDITORE						fficeholder livin	g expense	
					Office supp	lies			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Off H	ficeholder name	Office sou	ght		Office h	eld	

ate The Honorable 00057712 Somethin, Stephen Craig (The Honorable) 00057712 The Honorable 00057712	FILER NAME Smith, Stephen Craig (The Honorable) Date 04/26/2023 5 Name of person from whom investment is purchased Chase Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 8111 Preston Rd. Dallas, TX 75225 7 Description of investment Transfer of funds to CD at Chase Bank 8 Amount of investment (\$)	FILER NAME Smith, Stephen Craig (The Honorable) Date 04/26/2023 5 Name of person from whom investment is purchased Chase Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 8111 Preston Rd. Dallas, TX 75225 7 Description of investment Transfer of funds to CD at Chase Bank 8 Amount of investment (\$)	FILER NAME Smith, Stephen Craig (The Honorable) Date 04/26/2023 5 Name of person from whom investment is purchased Chase Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 8111 Preston Rd. Dallas, TX 75225 7 Description of investment Transfer of funds to CD at Chase Bank 8 Amount of investment (\$)	FILER NAME Smith, Stephen Craig (The Honorable) Date 04/26/2023 5 Name of person from whom investment is purchased Chase Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 8111 Preston Rd. Dallas, TX 75225 7 Description of investment Transfer of funds to CD at Chase Bank 8 Amount of investment (\$)	FILER NAME Smith, Stephen Craig (The Honorable) Date 04/26/2023 5 Name of person from whom investment is purchased Chase Bank 6 Address of person from whom investment is purchased; City; State; Zip Code 8111 Preston Rd. Dallas, TX 75225 7 Description of investment Transfer of funds to CD at Chase Bank 8 Amount of investment (\$)	PURCHASE O CONTRIBUTION	F INVESTMENTS FROM POLITICAL DNS	SCHEDULE
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