### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM JC/OH COVER SHEET PG 1

Th	e JC/OH Instruction	Guide explains how to o	complete this form.	1	Filer ID (Ethics Commission Filers) 00082126		2 Total page	s filed: 18
3	CANDIDATE /	MS / MRS / MR	FIRST			MI		E USE ONLY
	OFFICEHOLDER	The Honorable	Edward S.					
	NAME		Edward O.				Date Received	
							ELECTRON	ICALLY FILED
		NICKNAME	LAST			SUFFIX	01/16/2024	
			Smith					
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; CI	TY;		ZIP CODE	Date Hand-deliver	ed or Date Postmarked
	MAILING						Dessint #	Amount
	ADDRESS	REDACTED PER	254.0313, GOV'T	CO	DE		Receipt #	Amount
	Change of Address							
							Date Processed	
							Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST				MI	
ľ	TREASURER							
	NAME	Mr.	Edward S.					
		NICKNAME	LAST				SUFFIX	
			Smith					
6	CAMPAIGN	STREET ADDRESS (NO	) PO BOX PLEASE);		APT / SUITE	#; CITY;	5	STATE; ZIP CODE
	TREASURER	, ,	,,					
	ADDRESS		054.0040, 00)//T	00				
	(Residence or Business)	REDACTED PER	254.0313, GOV'T	CO	DE			
7	CAMPAIGN	AREA CODE F	HONE NUMBER	EVI	ENSION			
Ľ	TREASURER		HONE NOWBER		LINSION			
	PHONE	(512) 524-1136						
	DEDODT							
8	REPORT TYPE	X January 15	30th day befor	ام ما	ction Runoff	Г	15th day after	campaign treasurer
		X January 15		e eie		L		(officeholder only)
		July 15	8th day before	elec	tion Exceeded	d modified	Final Report (	Attach C/OH-FR)
					reporting	limit		
9	PERIOD	Month Day Y	ear		М	onth Day	Year	
	COVERED	07/01/2023		HRC	UGH	12/31/202		
		01/01/2020				12/01/202	0	
10	ELECTION	ELECTION DAT	_ I					
110	ELECTION		····   —			TION TYPE	<b>—</b>	
		1 1	ear X	Prim		inoff	Other	
		03/05/2024		Gene	ral Sp	ecial		
11	OFFICE	OFFICE HELD (if any)			12 05	-ICE SOUGHT	(if known)	
1		Court Of Appeals, Jus	tico Diaco 2 Distric	+ 2			s, Justice Plac	o 2 District 2
		Tour Or Appeals, Jus	DICE FIACE 2 DISUIC	лJ		un on Appeak	s, Justice Fide	
L								
			GO	то	PAGE 2			
	me provided by Te	exas Ethics Commissior						ersion V3.5.1.0bfcfb6
ΓU	ins provided by Te	nas Eurics Commission	• ••••••••••••••••••••••••••••••••••••	unc	s.state.tx.us		v	CISIOLI AS'S'T'ONICIDO

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 18

I

13 C / OH NAME	Smith, Edward S. (T	he Honorable)	14 Filer ID 00082126	(Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	eholder's knowledge or			
Additional Pages		COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	COMMITTEE CAMPAIGN TREASURER NAME						
	COMMITTEE CAMPAIGN TREASURER ADDRESS						
16 CONTRIBUTION TOTALS							
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	16)	<b>\$</b> 12,000.00			
EXPENDITURE TOTALS							
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 18,792.38			
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	<b>\$</b> 0.00			
17 AFFIDAVIT							
		I swear, or affirm, under penali true and correct and includes a under Title 15, Election Code.					
		The Hono	orable Edward S. Sm	nith			
		Signature o	f Candidate or Officeho	lder			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subso	cribed before me, by the s	aid	, this the	day			
of	, 20, to c	ertify which, witness my hand and seal of office.					
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath			
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67			

#### JC/OH ET PG 3 VER

F	ORM	•
COVER	SHE	F

3 of 18

18 FILER NAM Smith, Ed	(Ethics Commission Filers)		
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1. X	<b>\$</b> 12,000.00		
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	5	<b>\$</b> 8,954.64
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$</b> 6,568.87
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 3,268.87
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

SUBTOTALS - JC/OH

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

The Instruc	tion Guide explains how to complete th	1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 4/18		
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)		
Smith, Edwa	rd S. (The Honorable)	00082126		
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)	
12/12/2023	Baker Botts Amicus Fund		\$5,000.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77002			
8 Contributor's F	rincipal Occupation	9 Contributor's Job Title		
10 Contributor's e	mployer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)	
12 If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	
12/12/2023	Dingman, Kyle		\$2,500.00	
	Contributor address; City; State; Zip Code			
	Austin, TX 78756			
	rincipal Occupation	Contributor's Job Title		
Attorney		Attorney		
	mployer/law firm	Law firm of contributor's sp	pouse (if any)	
Scott + Scott				
	a child, law firm of parent(s) (if any)			
Date 12/11/2023	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)	
12/11/2023	Fernandez, David		\$500.00	
	Contributor address; City; State; Zip Code			
	Temple, TX 76504			
Contributor's F	rincipal Occupation	Contributor's Job Title		
Attorney		Attorney		
	mployer/law firm	Law firm of contributor's s	nouse (if any)	
Self-employe				
	a child, law firm of parent(s) (if any)			
Forms provided	ov Texas Ethics Commission www.e	ethics state tx us	Version V3 5 1 0bfcfb67	

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

The Instruc	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 5/18		
2 FILER NAME Smith Edwa	rd S. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00082126		
4 Date 11/05/2023	<ul> <li>5 Full name of contributor out-of-state PAC (ID# Franklin, Joyce Ann</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$350.00	
	Alexandria, KY 41001			
8 Contributor's F Retired	Principal Occupation	9 Contributor's Job Title Retired		
10 Contributor's e N/A	mployer/law firm	11 Law firm of contributor's sp	bouse (if any)	
	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#	: )	Amount of Contribution (\$)	
12/30/2023	Jackson Walker PAC		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Dallas, TX 75201			
Contributor's F	rincipal Occupation	Contributor's Job Title		
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#	)	Amount of Contribution (\$)	
12/05/2023	Petty, Melissa		\$150.00	
	Contributor address; City; State; Zip Code			
	Honolulu, HI 96825			
	Principal Occupation	Contributor's Job Title		
MSW		Social worker		
	mployer/law firm	Law firm of contributor's sp	bouse (if any)	
Self-employe				
If contributor is	a child, law firm of parent(s) (if any)			
	ay Toyoo Ethios Commission	os stoto turio		
Forms provided	by Texas Ethics Commission www.ethi	cs.state.tx.us	Version V3.5.1.0bfcfb67	

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 6/18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Smith, Edward S. (The Honorable) 00082126 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 12/14/2023 **Terrazas PLLC** \$2,500.00 6 Contributor address; City; State; Zip Code Austin, TX 78746 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any)

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	oayme erhea kpens Expens Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
_	Sch: 1/4 Rpt: 7/18		Smith, Edward S. (The Honorable)					00082126	(
4	Date	5	Payee name						
	12/13/2023		Collective Compaigns						
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode				
	\$265.00		11124 Desert Willow Loop						
			Austin, TX 78748						
8	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF		Consulting Expense	,			outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		5					officeholder living	) expense
						Campaign co	onsi	ulting.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ught			Office he	eld
	Date		Payee name						
	12/29/2023		Collective Compaigns						
	Amount (\$)	⊢		e; Zip Co	ahe				
	.,			.e, zip ct	Jue				
	\$1,749.85		11124 Desert Willow Loop						
			Austin, TX 78748						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	EXPENDITURE		Consulting Expense					de of Texas. Com	
								officeholder living	j expense
						Campaign co	1150	ulung.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ught			Office he	eld
	experiditure to benefit C/OI								
	Date		Payee name						
	12/29/2023		Collective Compaigns						
	Amount (\$)	┝	Payee address; City; Stat	e; Zip Co	ode				
	\$1,015.15		11124 Desert Willow Loop						
	\$1,010.10								
			Austin, TX 78748						
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description			
	OF EXPENDITURE		Consulting Expense			Check if travel	outsi	de of Texas. Com	plete Schedule T.
	LAFENDITORE							officeholder living	) expense
						Campaign co	onsi	ulting.	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office he	eld
	expenditure to benefit C/OI	Н							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     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)				
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 2/4 Rpt: 8/18	Smith, Edward S. (The Honorable)	00082126				
4	Date 09/29/2023	Payee name     HBAA Charitable Foundation					
6	Amount (\$)	Payee address; City; State; Zip Code					
Ū	\$250.00	P.O. Box 12692 Austin, TX 78711					
8	PURPOSE OF EXPENDITURE		nutside of Texas. Complete Schedule T. TX, officeholder living expense INCheON.				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/20/2023	Objectif East, LLC					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3,000.00	PO Box 6724 Austin, TX 78762					
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense J <b>N.</b>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/12/2023	Texas Democratic Party					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$2,500.00	PO Box 15707					
		Austin, TX 78761					
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     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)					
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)					
	Sch: 3/4 Rpt: 9/18	Smith, Edward S. (The Honorable)	00082126					
4	Date 12/05/2023	Payee name WePay Inc.						
	Amount (\$) \$7.48	Payee address; City; State; Zip Code 3223 Hanover St. Palo Alto, CA 94304						
8	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense rocessing fee for online donation.					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/12/2023	WePay Inc.						
	Amount (\$) \$24.95	Payee address;City;State;Zip Code3223 Hanover St.Palo Alto, CA 94304						
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense rocessing fee for online donation.					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/14/2023	WePay Inc.						
	Amount (\$) \$124.75	Payee address;City;State;ZipCode3223 Hanover St.						
		Palo Alto, CA 94304						
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. , TX, officeholder living expense rocessing fee for online donation.					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Lo Fees O Food/Beverage Expense P Gift/Awards/Memorials Expense P I Committee Legal Services Sa	oan Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense rinting Expense alaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Sabadula E1:			Filer ID (Ethics Commission Filers)
		3	00082126
-			00002120
Date 11/11/2023	<ul> <li>Payee name</li> <li>WePay Inc.</li> </ul>		
Amount (\$) \$17.46	<ul> <li>7 Payee address; City; State; Z</li> <li>3223 Hanover St.</li> <li>Palo Alto, CA 94304</li> </ul>	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Fees	Check if travel out	side of Texas. Complete Schedule T. X, officeholder living expense cessing fee for online donation.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Offic	ce sought	Office held
	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment Total pages Schedule F1: Sch: 4/4 Rpt: 10/18 Date 11/11/2023 Amount (\$) \$17.46 PURPOSE OF EXPENDITURE	Advertising Expense       Event Expense       Li         Accounting/Banking       Fees       O         Consulting Expense       Food/Beverage Expense       P         Contributions/ Donations Made By- Candidate/Officeholder/Political Committee       Fill       Food/Beverage Expense       P         Credit Card Payment       The Instruction Guide explains how       The Instruction Guide explains how       S         Total pages Schedule F1:       2       FILER NAME       S       S         Sch: 4/4 Rpt: 10/18       Smith, Edward S. (The Honorable)       The Instruction Guide explains how       S         Date       5       Payee name       WePay Inc.       S         Amount (\$)       7       Payee address;       City;       State;       Z         \$17.46       3223 Hanover St.       Palo Alto, CA 94304       Fees       Fees       Fees         OF       OF       Image: State instruction of this schedule       Fees       Fees       Fees       Fees	Accounting/Banking Consulting Expense Contributions/ Donations Made By- Candidate/Officeholder/Political Committee       Fees Food/Beverage Expense Giff/Awards/Memorials Expense Legal Services       Office Overhead/Rental Expense Polling Expense Salaries/Wages/Contract Labor         Total pages Schedule F1: Sch: 4/4 Rpt: 10/18       2       FILER NAME Smith, Edward S. (The Honorable)       3         Date       5       Payee name WePay Inc.       3         Amount (\$)       7       Payee address; City; State; Zip Code 3223 Hanover St.       State; Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description Credit card pro         Complete QNLY if direct       Candidate/Officeholder name       Office sought

	EXP	ENDITURE CATEGOR	IES FOR BOX 10(a)	)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimbu Office Overhead/Rental E Polling Expense Printing Expense Salaries/Wages/Contract	xpense Tra Tra Tra	licitation/Fundraising E Insportation Equipmer Ivel in District Ivel Out of District HER (enter a category	t & Related I		
	The Inst	ruction Guide explains h	now to complete this f	orm.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)	
Sch: 1/6 Rpt: 11/18	Smith, Edward S. (	(The Honorable)			00082126			
4 CREDIT CARD ISSUER	Name of fina	ncial institution	5 TOTAL OF U EXPENDITU CHARGED CARD		\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid			
	\$6.40	11/05/2023						
7 PAYEE	(a) Payee name	•	(b) Payee addr	ess;	City,	State,	Zip Code	
	Coogle Demoine		1600 Amphith	heatre Pkwy				
	Google Domains							
			Mountain Vie	w, CA 94043				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Email					
	G Suite Services							
Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. C	Check if Austin, TX, o	officeholder living expe	ense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicendider	name O	flice sought		Office field			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid			
	\$6.40	12/06/2023	(0) Date(0) 010					
	Φ0.40	12/00/2023						
PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code	
			1600 Amphith	heatre Pkwy	-			
	Google Domains							
			Mountain Vie	w, CA 94043				
PURPOSE OF	(a) Category	of this school (10)	(b) Description					
	(See Categories listed at the top G Suite Services	of this schedule)	Email					
X Political								
Non-Political		of Texas. Complete Schedule		Check if Austin, TX, o	officeholder living expe	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought		Office held			
expenditure to benefit C/OH	(a) Amount Chargod	(b) Date of Charge	(a) Data(a) Cra	dit Card Issuer	Doid			
PAYMENT	(a) Amount Charged		(c) Date(s) Cre	uil Caru Issuer	Palu			
	\$6.40	08/05/2023						
PAYEE	(a) Payee name		(b) Payee addr	A22.	City,	State,	Zip Code	
	(u) r uyee name		1600 Amphith		City,	Olule,		
	Google Domains		2000 /p					
			Mountain Vie	w, CA 94043				
PURPOSE OF	(a) Category		(b) Description					
	(See Categories listed at the top G Suite Services	of this schedule)	Email					
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т с	Check if Austin, TX, o	officeholder living expe	ense		
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held			
expenditure to benefit C/OH								

	EXPE	ENDITURE CATEGORIE	S FOR BOX	10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	/- Gift/Award	erage Expense Pros s/Memorials Expense Pr	an Repayment/R fice Overhead/Re olling Expense inting Expense	ental Expense Tra Tra Tra	blicitation/Fundraising E ansportation Equipmer avel in District avel Out of District	t & Related E	
Candidate/Officeholder/Politica	0	ruces Sa ruction Guide explains hov	alaries/Wages/Col		THER (enter a category	y not listed at	oove)
<b>1</b> Total pages Schedule F4:	i				3 Filer ID (Ethic	s Commiss	ion Filers)
Sch: 2/6 Rpt: 12/18	Smith, Edward S. (	(The Honorable)			00082126		
4 CREDIT CARD ISSUER	Name of fina	ncial institution	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$1,000.00	07/17/2023					
7 PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Hays County Demo	ocratic Party	PO Box 2	204			
			San Marc	cos, TX 78667			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descrip				
X Political	Advertising Expense		Event sp	onsor.			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.			officeholder living expe	ense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	e sought		Office held		
expenditure to benefit C/OH			-				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$250.00	09/30/2023					
PAYEE	(a) Payee name Hays County Tejan	o Democrats	(b) Payee PO Box 7	781	City,	State,	Zip Code
			Buda, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Hays Tejano Dems Hispanic Heritage Fiesta sponsorship.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH	(a) Amount Charged	(h) Data at Charge		Credit Card Jacua	- Daid		
PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 10/27/2023	(c) Date(s)	Credit Card Issue	r Pald		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Liberal Austin Dem	ocrats	PO Box 4				·
			Austin, T				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)		ustin Democrats	9th Annual Fur	ndraiser	
X Political			sponsors	anp			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held		

	:5 MADE BY C			SCHEDULE F4			
EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	rage Expense s/Memorials Expense	Office Overhead/Rental Expense Tolling Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)			
	The Inst	ruction Guide explains h	now to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 3/6 Rpt: 13/18	Smith, Edward S. (	The Honorable)		00082126			
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	_ I er Paid			
	\$250.00	10/27/2023					
7 PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
			2408 Leon Street				
	University Democra	ats PAC (TX)	Apt 203				
			Austin, TX 78705				
8 PURPOSE OF	(a) Category		(b) Description				
	(See Categories listed at the top of this schedule) Advertising Expense		70th Anniversary Gala s	oonsorship.			
X Political	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held						
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$275.00	(b) Date of Charge 10/27/2023	(c) Date(s) Credit Card Issue	er Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			PO Box 413				
	Capital Area Progressive						
			Austin, TX 78767				
PURPOSE OF	(a) Category		(b) Description				
	(See Categories listed at the top Advertising Expense	of this schedule)	Kick Ass Awards sponso	rship.			
X Political	5 5 5 5 7 5 7						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	K, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name O	office sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$1,650.00	12/01/2023					
PAYEE	(a) Payee name	-	(b) Payee address;	City, State, Zip Code			
	Toyac Domogratic I	Dorty	PO Box 15707				
	Texas Democratic I	arty					
			Austin, TX 78761				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Fees	·····,	Fee for VAN access.				
X Political							
Non-Political		of Texas. Complete Schedule		K, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held			

	5 MADE BY		D		SCH	EDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expr Fees Food/Beve / - Gift/Award I Committee Legal Serv	erage Expense s/Memorials Expense	Loan Repayment/Reimburs: Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract La	ense Tra Tra Tra bor OT	licitation/Fundraising Exp Insportation Equipment & Wel in District Wel Out of District HER (enter a category no	Related Expense
<b>1</b> Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics C	Commission Filers)
Sch: 4/6 Rpt: 14/18	Smith, Edward S. (	(The Honorable)			00082126	
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UI EXPENDITUF CHARGED TO CARD	RES	\$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	Paid	
	\$1,650.00	12/28/2023				
7 PAYEE	(a) Payee name	•	(b) Payee addres	SS;	City,	State, Zip Code
		_	PO Box 15707			
	Texas Democratic	Party				
			Austin, TX 787	61		
8 PURPOSE OF	(a) Category		(b) Description			
	(See Categories listed at the top Fees	of this schedule)	Fee for VAN a	ccess.		
X Political						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			T. Che	eck if Austin, TX, o	officeholder living expens	e
9 Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held	
expenditure to benefit C/OH		_				
PAYMENT	(a) Amount Charged \$6.40	(b) Date of Charge 07/06/2023	(c) Date(s) Credi	t Card Issuer	Paid	
PAYEE	(a) Payee name		(b) Payee addres	SS;	City,	State, Zip Code
			1600 Amphithe	1600 Amphitheatre Pkwy		
	Google Domains					
			Mountain View	, CA 94043		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top G Suite Services	of this schedule)	Email			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Che	eck if Austin, TX, o	officeholder living expens	e
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held	
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	Paid	
	\$6.40	09/05/2023				
PAYEE	(a) Payee name		(b) Payee addres	SS;	City,	State, Zip Code
			1600 Amphitheatre Pkwy			
	Google Domains	Google Domains				
			Mountain View	, CA 94043		
PURPOSE OF	(a) Category (See Categories listed at the top	of this schedulo)	(b) Description			
	G Suite Services		Email			
X Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Che	eck if Austin, TX, o	officeholder living expens	e
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held	
expenditure to benefit C/OH						

EXPENDITURE CATEGORIES FOR BOX 10(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	olicitation/Fundraising Ex ansportation Equipment avel in District avel Out of District THER (enter a category	& Related I	
	The Inst	truction Guide explains h	ow to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	s Commiss	sion Filers)
Sch: 5/6 Rpt: 15/18	Smith, Edward S.	(The Honorable)			00082126		
4 CREDIT CARD ISSUER	Name of fina	ncial institution	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issue	r Paid		
	\$6.40	10/05/2023					
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Google Domains		1600 Am	1600 Amphitheatre Pkwy			
				n View, CA 94043	3		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descrij Email	plion			
X Political	G Suite Services		Lindi				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	т	Check if Austin TX	officeholder living expe	nso	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		fice sought		Office held	1130	
expenditure to benefit C/OH			0				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issue	r Paid		
	\$263.47	07/20/2023					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Austin Toiona Domosrata		307 Cott	onwood Lane			
	Austin Tejano Dem	locials					
			Pflugerville, TX 78660				
PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule)						
X Political	Advertising Expense		011501.				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder		fice sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	) Credit Card Issue	r Paid		
	\$15.00	08/27/2023					
PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
	Hays County Demo	ocratic Party	PO Box 2	204			
			San Mar	COS TX 79667			
PURPOSE OF	(a) Category		(b) Descri	cos, TX 78667			
EXPENDITURE	(See Categories listed at the top	,		e expense at LBJ	J Birthday Bash.		
X Political	Food/Beverage Expe	ense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	 т.	Check if Austin TX	officeholder living expe	nse	
Complete <u>ONLY</u> if direct	Candidate/Officeholder		fice sought		Office held		
expenditure to benefit C/OH		-	÷				

		EXP	ENDITURE CATEGOR	RIES FOR BOX 10	(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	ense erage Expense Is/Memorials Expense	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	bursement I Expense	Tran: Trave Trave	itation/Fundraising sportation Equipme el in District el Out of District ER (enter a categoi	nt & Related	
			ruction Guide explains	how to complete this	s form.				
	Total pages Schedule F4:	4: 2 FILER NAME					Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 6/6 Rpt: 16/18	Smith, Edward S.	(The Honorable)				0082126		
4	CREDIT CARD ISSUER	Name of fina	ncial institution	EXPENDI	= UNITEMIZ TURES D TO A CRE	1	6		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Is	suer F	Paid		
		\$927.00	09/30/2023						
7	PAYEE	(a) Payee name		(b) Payee ad	dress;		City,	State,	Zip Code
				PO Box 684					
		Travis County Dem	ocratic Party						
				Austin, TX	78768				
8	PURPOSE OF	(a) Category		(b) Descriptio	n				
	EXPENDITURE	(See Categories listed at the top	JBR Dinner sponsorship.						
	X Political	Advertising Expense							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	ет.	Check if Austir	n, TX, of	ficeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought	-		Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 1/2 Rpt: 17/18	2 FILER NAME Smith, Edward S. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082126			
4 Date 08/17/2023	5 Payee name American Express					
6 Amount (\$) \$1,269.87 X political contributions intended	7 Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for Austin Tejano Dems, Hays d Google G Suite.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date	Payee name					
07/17/2023	American Express					
Amount (\$) \$6.40	Payee address; City; State; Zip Code PO Box 650448					
intended	Dallas, TX 75265					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for Google G Suite.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			
Date 09/17/2023	Payee name American Express					
Amount (\$) \$6.40	Payee address;     City;     State;     Zip Code       PO Box 650448					
X Reimbursement from political contributions intended	Dallas, TX 75265					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for Google G Suite.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling f y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 2/2 Rpt: 18/18	2 FILER NAME Smith, Edward S. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00082126		
4 Date 10/16/2023	5 Payee name American Express				
6 Amount (\$) \$21.40 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 650448 Dallas, TX 75265				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for Hays County Dems and		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
11/17/2023	American Express				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,183.40	PO Box 650448				
X Reimbursement from political contributions intended	Dallas, TX 75265				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for Travis County Dems, Hays d Google G Suite.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
12/17/2023	American Express				
Amount (\$) \$781.40	Payee address; City; State; Zip C PO Box 650448	Code			
X         Reimbursement from political contributions intended	Dallas, TX 75265				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense t card for CAPD, Liberal Austin Dems, U e G Suite.		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held		