### CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1		ics Commission Filers)	2 Total pages filed:				OFFICE U	ISE ONLY
	00020664		31				Date Received	
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST			MI	ELECTRONICA	LLY FILED
	NAME	The Honorable	John T.				07/19/2024	
		NICKNAME	LAST			SUFFIX		
			Smithee				Date Hand-delivered or	Date Postmarked
4	ORIGINAL REPORT TYPE	January 15	Runoff	l	Other (sp	becify)		-
		July 15	Exceeded modified				Receipt #	Amount
		30th day before election	15th day after camp appointment (office		er		Date Processed	
		X 8th day before election	Final Report (Attach	n C/OH-FR)				
5	ORIGINAL PERIOD	Month Day Year		Month	Day	Year	Date Imaged	
		01/26/2024	THROUGH	02/2	24/2024			
6	EXPLANATION OF C		lit Court in the oregoint				fuere recent	
	Correction: 2024/02/	22 Payment to Citibank Crec	lit Card in the amoun	[ 0] \$60.51 \	was inadve	rtently omitted	from report	
	Correction: 2024/01/	30 Payment to McLaughlin &	& Associates, Inc. of \$	12,900.00	was inadve	rtently omitted	from report	
		1/02/21 Payment to Lone Sta	r Directions in the am	ount of \$1,3	327.00 was	incurred in this	s report, but did not	clear the bank until
	2024/02/28 after the	due date						
7	AFFIDAVIT							
-	/			ear, or affirr correct.	n, under pe	enalty of perjury	, that this corrected	report is true
			Che	ck the box r	next to any	and all applica	ble statements:	
				was made	in good fa	ith and without	affirm that the origir an intent to mislead ned in the report.	
			X	report not that the re swear, or	later than t port as orig	he 14th busine jinally filed is ir any error or or	that I am filing this ass day after the data accurate or incomp nission in the report	e I learned lete. I
					The H	Ionorable Joh	nn T. Smithee	
					Signatu	re of Candidate	e or Officeholder	
	AFFIX NOTARY ST	AMP / SEAL ABOVE			0			
	Sworn to and subso	ribed before me, by the said				, this t	he	day
		, 20, to certif						,
	Signature of offic	er administering oath	Printed name of of	ficer admin	istering oat	h .	Title of officer admin	istering oath
	Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections							

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction	Guide explains how to cor	nplete this form.	1 Filer ID (Ethics Comm 00020664		<ol> <li>Total pages fil</li> <li>3</li> </ol>	ed: 1
3	CANDIDATE /	MS/MRS/MR	FIRST		MI		JSE ONLY
	OFFICEHOLDER	The Honorable	John T.			OFFICE	JSE UNLT
	NAME	The Honorable	501111.			Date Received	
						ELECTRONICA	ALLY FILED
		NICKNAME	LAST		SUFFIX	07/19/2024	
		NICKNAME			SUFFIX	01110/2024	
			Smithee				
4	CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CI	ΓΥ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
	OFFICEHOLDER	2808 Parker					
	MAILING	2000 F arker				Receipt #	Amount
	ADDRESS						
	Change of Address	Amarillo, TX 79109				Data Dua and	
						Date Processed	
						Date Imaged	
5	CAMPAIGN	MS / MRS / MR	FIRST		MI		
	TREASURER	Mr.	Mike				
	NAME						
		NICKNAME	LAST		SUFFIX		
			Standefer				
6	CAMPAIGN	STREET ADDRESS (NO	PO BOX PI FASE)	AP	T / SUITE #; CITY;	STA	TE; ZIP CODE
ľ	TREASURER			<i>,</i> "		017	
	ADDRESS	4805 Spartanburg					
	(Residence or Business)						
	()	Amarillo, TX 79119					
7	CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
	TREASURER	(806) 359-8623					
	PHONE	(000) 000 0020					
L	DEDODT						
8	REPORT TYPE					1 15th day offer an	nnoign troppy yor
		January 15	30th day befor		Runoff	15th day after car appointment (offic	
		July 15	X 8th day before	election	Exceeded modified	Final Report (Atta	
					reporting limit		
9	PERIOD COVERED	Month Day Yea			Month Day	Year	
	COVERED	01/26/2024	T	HROUGH	02/24/2024	1	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Yea	ar 🛛 🗙 F	Primary	Runoff	Other	
		03/05/2024					
				General	Special		
11	OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
		State Representative D	istrict 86		State Representa		
L							
1							
1			CO.	TO PAGE 2			
1			60				
For	ms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	S	Versio	on V4.1.0.d378aba0

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

#### FORM C/OH COVER SHEET PG 2 3 of 31

13 C / OH NAME	Smithee, John T. (Th	e Honorable) 1	4 Filer ID (E 00020664	Ethics Comm	nission Filers)				
<b>15</b> NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the d officeholders are required to report this information of	e candidate's or officel	nolder's know	wledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	X GENERAL	Texas Alliance for Life PAC							
		COMMITTEE ADDRESS							
	SPECIFIC	8000 Centre Park Drive							
		Ste 380							
		Austin, TX 78754							
		COMMITTEE CAMPAIGN TREASURER NAME							
		Shaw, James							
		COMMITTEE CAMPAIGN TREASURER ADDRESS	6						
		4505 Corazon Cv							
		Round Rock, TX 78681		_					
16 CONTRIBUTION TOTALS1.TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)\$0\$0									
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	74,249.96				
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00				
	4. TOTAL POLITIC	AL EXPENDITURES		\$	57,193.28				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS RIOD	ST DAY OF THE	\$	260,327.83				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O TING PERIOD	OF THE LAST DAY	\$	0.00				
17 AFFIDAVIT				-					
		I swear, or affirm, under penalty o true and correct and includes all i under Title 15, Election Code.							
			able John T. Smithe	-					
		Signature of C	andidate or Officehold	er					
AFFIX NO	TARY STAMP / SEAL AB	OVE							
Sworn to and subso	Sworn to and subscribed before me, by the said day								
of	, 20, to c	ertify which, witness my hand and seal of office.							
Signature of offic	cer administering	Printed name of officer administering	Title of officer	administerin	g oath				
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us	V	ersion V4.	1.0.d378aba0				

#### FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 4 of 31 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Smithee, John T. (The Honorable) 00020664 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 71,750.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2,499.96 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 55,075.21 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. 2,118.07 \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 26,685.99 TO FILER

	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 5/31	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
[		nn T. (The Honorable)				00020664	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/13/2024	A&M PAC					\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Austin, TX 78768-4609					
8	Principal occu	pation / Job title (See Instructions	6)	9 Employer (See Instructions	5)		
	Date	Full name of contributor	X out-of-state PAC (ID#:	) (00066472		Amount of Contribution (\$)	
	02/20/2024	American Property Casua	alty Ins. Assn PAC				\$1,000.00
	Contributor address; City; State; Zip Code						
	Chicago, IL 60631						
	Principal occupation / Job title (See Instructions) Employer (See Instruction				;)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/21/2024	Associated General Conti	racts of Texas PAC				\$1,000.00
		Contributor address; City; Si	tate: Zip Code				
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	Association of Fire & Cas					\$1,000.00
		Contributor address; City; Si					
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	;)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/20/2024	Atmos Energy PAC					\$1,500.00
		Contributor address; City; Si	tate: Zip Code				
		·····, ···, ···, ···, ···, ···, ···, ·	, F				
		Dallas, TX 78701					
	Principal occu	pation / Job title (See Instructions	6)	Employer (See Instructions	;)		
I I							

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/15 Rpt: 6/31 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Smithee, John T. (The Honorable) 00020664 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/13/2024 **BNSF Railpac** 6 Contributor address; City; State; Zip Code Fort Worth, TX 76161 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/07/2024 Bain, Barbara Contributor address; City; State; Zip Code Canyon, TX 79015 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/07/2024 Barnhart, Marci Contributor address; City; State; Zip Code Canyon, TX 79015 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2024 Batson, Howard and Lisa Contributor address; City; State; Zip Code Amarillo, TX 79119 Principal occupation / Job title (See Instructions) Employer (See Instructions) Pastor First Baptist Church, Amarillo Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/13/2024 Bellina, James and Lisa Contributor address; City; State; Zip Code Waxhaw, NC 28173 Principal occupation / Job title (See Instructions) Employer (See Instructions)

Telecommunications

Amarillo Tech Tel

\$2,500.00

\$200.00

\$100.00

\$1,000.00

\$5,000.00

				_		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 3/15 Rpt: 7/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Smithee, Joł	hn T. (The Honorable)			00020664	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/20/2024	Bransgrove, William and Tamara				\$500.00
	I	6 Contributor address; City; State; Zip Code		1		
		1				
		1				
		Hereford, TX 79045				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Bresnen, Steven and Amy				\$500.00
	I	Contributor address; City; State; Zip Code		1		
		1				
		1				
	Austin, TX 78701					
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/20/2024	Buse, Kevin				\$500.00
	I	Contributor address; City; State; Zip Code				
		1				
		Hereford, TX 79045		Ĺ		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
╞			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷==== 00
	02/13/2024	Cain, Randy				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78763				
⊢	Dringinal occu		Employor (Soo Instructions			
	PIIICipai occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
╞			<u> </u>	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀን ደሳሳ ሰሳ
	02/12/2024	CenterPoint Energy, Inc. PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		1				
		Houston, TX 77210				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>ר</u>		
	г шора ооса			'n		
⊢						

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 8/31			
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)		
Ĺ		nn T. (The Honorable)		5	00020664	JIT II I		
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)			
	02/21/2024	Charter Schools Now PAC				\$1,000.00		
		6 Contributor address; City; State; Zip Code						
		Austin, TX 78704						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)				
	Date	Full name of contributor X out-of-state PAC (ID#:	) (000350006		Amount of Contribution (\$)			
	01/31/2024	Chevron Employees PAC				\$1,500.00		
		Contributor address; City; State; Zip Code						
		San Ramon, CA 94583						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)			
	02/15/2024	David Porter Campaign Account				\$250.00		
		Madison, AL 35758						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)			
	02/16/2024	Elms, Harvey and Alona				\$100.00		
		Contributor address; City; State; Zip Code						
		Amarillo, TX 79106						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)			
	02/13/2024	Erben & Yarbrough				\$500.00		
		Contributor address; City; State; Zip Code						
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)				

#### MONETARY POLITICAL CONTRIBUTIONS **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/15 Rpt: 9/31 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Smithee, John T. (The Honorable) 00020664 4 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 02/13/2024 Funds Available for Involved Reporters Contributor address; City; State; Zip Code 6

		Athens, TX 75751				
8	Principal occu	pation / Job title (See Instructions)	ę	Employer (See Instructions)		
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:	)	Amount of Contribution (\$)	
	01/30/2024	Gates, Gary				\$5,000.00
		Contributor address; City; State; Zip Code Rosenberg, TX 77471				
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Investments			Self		
F	Date	Full name of contributor out-of-state PA	AC (ID#:	)	Amount of Contribution (\$)	
	02/20/2024	Gibson, David and Glenda				\$200.00
	Contributor address; City; State; Zip Code					
	Principal occu	Tulia, TX 79088 pation / Job title (See Instructions)		Employer (See Instructions)		
F	Date	Full name of contributor out-of-state PA	AC (ID#:	)	Amount of Contribution (\$)	
	02/21/2024	Gordon, Robert and Patricia				\$500.00
		Contributor address; City; State; Zip Code				
		Dalhart, TX 79022				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
Γ	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:	)	Amount of Contribution (\$)	
	02/13/2024	Grace & McEwan Consulting LLC Politica	al Fund			\$250.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

#### SCHEDULE A1

\$500.00

SCHEDULE	A1
----------	----

				_		
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 6/15 Rpt: 10/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		hn T. (The Honorable)			00020664	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:	C00266585	7	Amount of Contribution (\$)	
	02/13/2024	Greenberg Traurig, PA, PAC	!			\$1,000.00
		6 Contributor address; City; State; Zip Code				
			!			
			,			
		Albany, NY 12207				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	HS Law PAC				\$500.00
	Contributor address; City; State; Zip Code					
			!			
			,			
<u> </u>		Austin, TX 78701	<u> </u>	Ļ		
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
_			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/20/2024	Hillco PAC	!			\$2,500.00
		Contributor address; City; State; Zip Code				
			1			
		Austin TV 70701	1			
_	Dringing oog	Austin, TX 78701	Employer (See Instruction)			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)		
=	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	┍	Amount of Contribution (\$)	
	02/15/2024	Hood, Jeanine	/ I			\$500.00
	02/10/202	Contributor address; City; State; Zip Code				Ψ000.00
		Continuator address, City, State, Zip Code	,			
			,			
		Amarillo, TX 79121	!			
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	·					
⊨	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	02/13/2024	Hughes, Lisa				\$300.00
	-	Contributor address; City; State; Zip Code				
			1			
			1			
		Austin, TX 78759	!			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
			<u> </u>			

				_		-
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/15 Rpt: 11/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		hn T. (The Honorable)			00020664	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/13/2024	Independent Insurance Agents of Texas				\$250.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78768				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
				,		
	Date	Full name of contributor X out-of-state PAC (ID#: <u>C</u>	.00437244 )	Γ	Amount of Contribution (\$)	
	02/13/2024	Invenergy Investment Company, LLC				\$1,500.00
	Contributor address; City; State; Zip Code					
		1				
		Chicago, IL 60606				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	L		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Jackson Walker LLP PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Jewell, Michael				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78738				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/20/2024	K&L Gates LLP Comm for Good Gov't				\$1,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75240				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions)	ـــــــــــــــــــــــــــــــــــــ		
	•			,		
⊢						

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/15 Rpt: 12/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Smithee, Joh	hn T. (The Honorable)			00020664	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	01/31/2024	Keeling, Scott and Karen				\$1,000.00
		6 Contributor address; City; State; Zip Code		]		
		Hereford, TX 79045				
8			9 Employer (See Instructions)	5)		
_	Cattle/Ranch	ier	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/16/2024	Konnecke, Cody				\$100.00
		Contributor address; City; State; Zip Code				
		1				
		Amarillo, TX 79119		L		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
		J	<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	±=00.00
	02/20/2024	LaRoe, Laphe and Alice				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Groom, TX 79039				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	L		
		,		.,		
-	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/20/2024	Lowery, Gene and Amy				\$500.00
		Contributor address; City; State; Zip Code		1		
		1				
		1				
L		Dalhart, TX 79022	]			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	5)		
╘		]	<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	*500.00
	02/20/2024	McWhorter, Dayton and Rebekah				\$500.00
		Contributor address; City; State; Zip Code				
		1				
		Amarillo, TX 79108				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	∟		
				.,		
┝─						
1						

	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/15 Rpt: 13/31	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		nn T. (The Honorable)			-	00020664	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/13/2024	Mf Holdings, LLC					\$250.00
			6 Contributor address; City; State; Zip Code				
			•				
		Austin, TX 78706					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	Moak Casey PAC					\$1,000.00
		Contributor address; City; State					
		Austin, TX 78746					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date	Full name of contributor X	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	NRG Energy PAC	•				\$3,000.00
		Contributor address; City; State	: Zip Code				
			,				
		Princeton, NJ 08540					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:_	)))))))))))))))))))))))))))))))))))))))		Amount of Contribution (\$)	
	02/20/2024	One Gas, Inc. PAC	_				\$500.00
		Contributor address; City; State	; Zip Code				
			· •				
		Tulsa, OK 74103					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	Ron Lewis & Assoc.	•				\$500.00
		Contributor address; City; State	: Zip Code				
			,				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
⊢							
1							

				_		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/15 Rpt: 14/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		hn T. (The Honorable)		Ĩ	00020664	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/13/2024	Rural Friends of Electric Coops	ļ			\$2,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
0	Dringingl occu		Employer (See Instructions	$\sum_{i=1}^{n}$		
ð		upation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/21/2024	Schaeffer, David and Sherry				\$1,000.00
		Contributor address; City; State; Zip Code				
			ļ			
			ļ			
		Amarillo, TX 79027				
		upation / Job title (See Instructions)	Employer (See Instructions)	;)		_
	Accounting		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Scope Multicandidate Committee - SW Commit				\$2,000.00
		Contributor address; City; State; Zip Code				
		Amarillo, TX 79101				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/15/2024	Sorelle, Judy	ļ			\$50.00
		Contributor address; City; State; Zip Code				
			ļ			
		Amarillo, TX 79109				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#	)	Γ	Amount of Contribution (\$)	
	02/21/2024	Stout, Tom	ļ			\$100.00
		Contributor address; City; State; Zip Code				
			ļ			
		Amarillo, TX 79118				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		

=				—		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/15 Rpt: 15/31	
2	FILER NAME		3	Filer ID (Ethics Commission	ו Filers)	
		hn T. (The Honorable)			00020664	,
4	Date	5 Full name of contributor x out-of-state PAC (ID#: C	С00025395 )	7	Amount of Contribution (\$)	
	02/21/2024	TNMP Power Responsible Citizens PAC				\$750.00
		6 Contributor address; City; State; Zip Code				
		1				
		Albuquerque, NM 87102				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
			l			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	TXTA-Texas Trucking Assn., PAC				\$500.00
	Contributor address; City; State; Zip Code					
		1				
		Austin, TX 78762				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ட</u> ந)		
—	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/03/2024	Taylor, David			,	\$150.00
	02,00,	Contributor address; City; State; Zip Code				Ψ±υ
		1				
		Amarillo, TX 79119				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> چ)		
		,		,		
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	02/13/2024	Texas Alliance for Life Pac				\$100.00
		Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78754				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> ن)		
		1				
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	01/31/2024	Texas Corn PAC			· · · · · · · · · · · · · · · · · · ·	\$250.00
	• • •	Contributor address; City; State; Zip Code				·
		1				
		Lubbock, TX 79403				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	上 5)		
				,		
⊢			1			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/15 Rpt: 16/31	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
ľ		nn T. (The Honorable)			00020664	, in the is j
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/05/2024	Texas Dental Assn PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78704				
-	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u>		
	r mcipar occu			<i>•</i> )		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/20/2024	Texas Farm Bureau Ag Fund, Inc. PAC				\$2,500.00
		Contributor address; City; State; Zip Code				
		Waco, TX 76702				
⊢	Principal occupation / Job title (See Instructions) Employer (See Instruction					
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/20/2024 Texas Independent Auto Dealers Assn. INDEPAC					\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78750				
		Employer (See Instructions	I;)			
		······,		,		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/21/2024	Texas Independent Ginners Assn. PAC Fund				\$500.00
		Contributor address; City; State; Zip Code				
		Brownwood, TX 76804				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	Texas Lobby Partners, LLP				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
$\vdash$	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	;)		
		,				
⊢						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/15 Rpt: 17/31	
2	FILER NAME			2	Filer ID (Ethics Commissio	n Filers)
Ĺ		nn T. (The Honorable)			00020664	JIT II I
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	02/12/2024	Texas Optometric PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78705				
8	Principal occu	pation / Job title (See Instructions)	5)			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/20/2024	Texas Society of Certified Accountants PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Addison, TX 75001				
⊢						
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
⊨	Data		<u> </u>		Amount of Contribution (¢)	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢1 500 00
	02/13/2024					\$1,500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78766-9053				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	02/13/2024	Texas Telephone Association PAC				\$1,500.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	02/21/2024	Texas Water Infrastructure Network	/			\$250.00
		Contributor address; City; State; Zip Code				+_00.00
		Contributor address, City, State, Zip Code				
		Austin, TX 78757				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	i moipai occu			<i>י</i> י		

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/15 Rpt: 18/31 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Smithee, John T. (The Honorable) 00020664 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/20/2024 **Texas Wheat Producers Assn PAC** \$1,500.00 6 Contributor address; City; State; Zip Code Amarillo, TX 79114 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2024 \$1,000.00 Thompson, Coe, Cousins & Irons, LLP Contributor address; City; State; Zip Code Dallas, TX 75201 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/15/2024 \$1,000.00 Trotter, Jana and Johnny Contributor address; City; State; Zip Code Hereford, TX 79045 Principal occupation / Job title (See Instructions) Employer (See Instructions) Ranching Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/13/2024 \$1,000.00 **USAA Employee PAC** Contributor address; City; State; Zip Code San Antonio, TX 78288 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:\_ 02/13/2024 \$500.00 Verizon Good Gov't Club Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 15/15 Rpt: 19/31		
5	FILER NAME			3 Filer ID (Ethics Commission	Eilore)
Ĺ		nn T. (The Honorable)	00020664	File(S)	
4	Date	<b>5</b> Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
	02/20/2024	Weinheimber, Ben and Jennifer			\$500.00
		6 Contributor address; City; State; Zip Code		•	
		Amarillo, TX 79119			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	02/21/2024	Wendler, Walter and Mary		\$	\$1,000.00
		Contributor address, City, State, Zip Code			
		Canyon, TX 79015			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	President		West Texas A&M Unive	ersity	
	Date	Full name of contributor X out-of-state PAC (ID#: C	) (00425975	Amount of Contribution (\$)	
	02/13/2024	Windstream Holdings II, LLC Federal PAC		\$	\$2,000.00
		Contributor address; City; State; Zip Code			
		Little Rock, AR 72212			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	02/02/2024	Yock, Brad and Mary			\$100.00
		Contributor address; City; State; Zip Code		•	
		Canyon, TX 79015			
⊢	Dringing ogg	pation / Job title (See Instructions)	Employer (See Instructions		
	Philicipal Occu			»)	
I					
1					
I					
1					

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 20/31						
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)						
	hn T. (The Honorable)		00020664					
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date 02/20/2024	<ul> <li>7 Contributor address; City; State; Zip Code</li> </ul>	)	<ul> <li>8 Amount of 9 In-kind contribution contribution (\$) description</li> <li>\$250.00   Early voting event expense</li> </ul>					
	Amarillo, TX 79119		Check if travel outside of Texas. Complete Schedule T.					
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)					
Dean of Nur		West Texas A&M						
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 02/24/2024	Full name of contributor out-of-state PAC (ID#: Texans for Dan Patrick Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$1,994.21 I Campaign Endorsement Texas Message					
	Houston, TX 77046		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 02/13/2024			Amount of In-kind contribution contribution (\$) description \$5.75 Website endorsement					
	Waco, TX 73702-2689		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)					
If contributor i	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/2 Rpt: 21/31			
2	FILER NAME	3	Filer ID (Ethics Commission Filers)		
	Smithee, John T. (The Honorable)			00020664	
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	\$			
5	Date       6       Full name of contributor       out-of-state PAC (ID#:	8	Amount of contribution (\$) \$250.00   Advertising		
10	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU	· · · · · · · · · · · · · · · · · · ·	
12	Contributor's principal occupation (FOR JUDICIAL)	<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)			
14	Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)	
16	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Offic           Food/Beverage Expense         Pollir           Gift/Awards/Memorials Expense         Printi	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/Wages/Contract Labor o complete this form.	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:	ILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 1/4 Rpt: 22/31	mithee, John T. (The Honorable)		00020664			
4	Date 02/09/2024	ayee name hase-Cardmember Service					
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$508.59 P. O. Box 94014 Palatine, IL 60094-4014						
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) credit Card Payment		outside of Texas. Complete Schedule T. , TX, officeholder living expense credit card			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held			
	Date	ayee name					
	02/21/2024	hase-Cardmember Service					
	Amount (\$) \$588.27	ayee address; City; State; Zip . O. Box 94014	Code				
	PURPOSE OF EXPENDITURE	alatine, IL 60094-4014 ategory (See Categories listed at the top of this schedule) credit Card Payment		outside of Texas. Complete Schedule T. h, TX, officeholder living expense credit card			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office	sought	Office held			
	Date	ayee name					
	02/22/2024	itiBank					
	Amount (\$) \$60.51	ayee address; City; State; Zip . O. Box 9001037	Code				
		ouisville, KY 40290-1037					
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) redit Card Payment		outside of Texas. Complete Schedule T. h, TX, officeholder living expense credit card			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/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 Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor	t	Travel in District Travel Out of District	ment & Related Expense
1	Total names Cabadula F1.								thiss Commission Filors)
1	Total pages Schedule F1: Sch: 2/4 Rpt: 23/31		Smithee, John T. (The Hono	rable)			3	Filer ID (E 00020664	thics Commission Filers)
4	Date	5	Payee name						
	02/09/2024		CitiBank						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de			
	\$102.53		P. O. Box 9001037						
			Louisville, KY 40290-1037						
8	PURPOSE	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Credit Card Payment					side of Texas. Complete	
						Payment of		K, officeholder living exp	ense
						F ayment of	CIEC	uit caru	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	C	Dffice sou	ght		Office held	
	Date		Payee name						
	02/14/2024		Double U Marketing & Comr	nunication	s				
_	Amount (\$)	├	Payee address; City;		Zip Co	de			
	.,			Sidle,	, Zip Cu	ue			
	\$39,568.87		1608 S. Washington						
			Amarillo, TX 79102						
	PURPOSE OF	(a)	Category (See Categories listed at the	e top of this sch	edule)	(b) Description			
	EXPENDITURE		Advertising Expense					side of Texas. Complete (, officeholder living exp	
								elevision Adverti	
						Culdoor an	uic		Sing
	Complete ONLY if direct		Candidate/Officeholder name		Office sou	nht		Office held	
	expenditure to benefit C/OF					gin			
	Date		Payee name						
	02/21/2024		Lone Star Directions						
	Amount (\$)		Payee address; City;	State:	Zip Co	de			
	\$1,327.00		P. O. Box 201131						
	+_,								
			Austin, TX 78720						
	PURPOSE OF		Category (See Categories listed at the	e top of this sch	edule)	(b) Description			
	EXPENDITURE		Advertising Expense					side of Texas. Complete	
						TV product		, officeholder living exp	ense
								syhelise	
	0								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght		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       Committee     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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 3/4 Rpt: 24/31	Smithee, John T. (The Honorable)	00020664			
4	Date 01/30/2024	Payee name McLaughlin & Associates, Inc.				
6	Amount (\$) \$12,900.00	Payee address; City; State; Zip Code 566 S. Route 303 Blauvelt, NY 10913				
8	PURPOSE OF EXPENDITURE	OF Dolling Expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	02/07/2024	Paypal, Inc.				
	Amount (\$) \$2.99	Payee address; City; State; Zip Code 2211N 1st Street				
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense n online contribution			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	02/07/2024	Paypal, Inc.				
	Amount (\$) \$5.98	Payee address; City; State; Zip Code 2211N 1st Street				
		San Jose, CA 95131				
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense n online contribution			
	Complete <u>ONLY</u> 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	Fe Fe - G	vent Expe ees ood/Beve	erage Expense s/Memorials Expense	ES FOR BOX Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	eimbursement So ental Expense Tr Tr Tr	blicitation/Fundraising ansportation Equipme avel in District avel Out of District THER (enter a categor	nt & Related I	
		т	he Inst	ruction Guide explains ho	ow to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 1/4 Rpt: 26/31	Smithee, Joh	n T. (1	The Honorable)			00020664		
4	CREDIT CARD	Name	of fina	ncial institution		OF UNITEMIZED			
	ISSUER	Chase (	Cardm	nember Service		DITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charg \$163.04	ed	(b) Date of Charge 01/27/2024	(c) Date(s) 02/09/20	) Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name			(b) Payee	address;	City,	State,	Zip Code
					., .	ulter Street	<b>3</b> 7		•
		Blue Sky							
					Amarillo,	Amarillo, TX 79119			
8	PURPOSE OF	(a) Category			(b) Descri	otion			
	EXPENDITURE	(See Categories listed a Event Expense	at the top	of this schedule)	Event ex	pense			
	X Political								
	Non-Political	(C) Check if trave	l outside	of Texas. Complete Schedule T	-	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct Candidate/Officeholder na			r name Off	fice sought		Office held			
e	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charg	ed	(b) Date of Charge		Credit Card Issue	r Paid		
		\$62.57		02/03/2024	02/09/20	24			
	PAYEE	(a) Payee name			(b) Payee	address;	City,	State,	Zip Code
		Cabletzelade			901 23rd	Street			
Schlotzsky's									
					-	TX 79015			
	PURPOSE OF EXPENDITURE	(a) Category	at the ton	of this schedule)	(b) Descrip				
	Event Expense			Event ex	Event expense				
	X Political								
	Non-Political			of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder		name Of	fice sought		Office held				
e		(a) Amount Charg	od	(b) Date of Charge	(c) Dato(c)	) Credit Card Issue	r Doid		
		.,	eu		02/09/20		rraiu		
		\$282.98		02/07/2024					
-	PAYEE	(a) Payee name			(b) Payee	address.	City,	State,	Zip Code
	=	(a) i ayee name			P. O. Bo		City,	State,	
		Southwest Ai	rlines		1.0.00				
					Dallas, T	X 75235			
	PURPOSE OF	(a) Category			(b) Descri				
EXPENDITURE         (See Categories listed at the top of this schedule)         Airfare AUS-LBB									
	X Political	navei Out of D	SUICL						
	Non-Political	(C) Check if trave	l outside	of Texas. Complete Schedule T	 -	Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct	Candidate/Office	eholder	r name Off	fice sought		Office held		
е	xpenditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice	Event Exp Fees Food/Beve y - Gift/Award	ense L C erage Expense F Is/Memorials Expense F	oan Repayment/Reimbursement Office Overhead/Rental Expense Poling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising B Transportation Equipmer Travel in District Travel Out of District OTHER (enter a categor	nt & Related E	
The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F4:				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 2/4 Rpt: 27/31	Smithee, John T. (1			00020664		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$277.49	02/13/2024	02/21/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Southwest Airlines		P. O. Box 36611			
			Dallas, TX 75235			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel Out of District	or this schedule)	Airfare AMA-AUS			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Aust				stin, TX, officeholder living exp	ense	
9     Complete ONLY if direct     Candidate/Officeholder name     Office sought     Office held       expenditure to benefit C/OH						
		(c) Date(s) Credit Card	Issuer Paid			
	\$277.49	02/13/2024	02/21/2024			
PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code
	Southwest Airlines		P. O. Box 36611			
			Dallas, TX 75235			
PURPOSE OF	(a) Category	of this schodule)	(b) Description			
X Political	EXPENDITURE     (See Categories listed at the top of this schedule)       Travel Out of District		Airfare AUS-AMA			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Au	stin, TX, officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder name Office		ice sought	Office held			
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid		
	\$33.29	02/04/2024	02/21/2024			
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	Cobletzalaria		901 23rd Street			
	Schlotzsky's					
			Canyon, TX 79015			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
Eood/Beverage Expense			Meals for volunteers			
X Political	<u> </u>					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				stin, TX, officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offi	ice sought	Office held		

expenditure to benefit C/OH         (a) Amount Charged         (b) Date of Charge         (c) Date(s) Credit Card Issuer Paid         Sector           PAYEE         (a) Payee name         (b) Payee address;         City,         State,         Zip Code           PURPOSE OF         (a) Category         (b) Description         Dalhart, TX 79029         Use		15 MADE BY C		U		SCI	HEDUL	e F4
Average Constraint Cons								
Sch: 3/4 Rpt: 28/31         Smithee, John T. (The Honorable)         00020664           4 CREDIT CARD ISSURR         Name of financial institution see previous         5 TOTAL OF UNITEMIZED EXPENDITURE CHARGED TO A CREDIT (ARD         \$           6 PAYMENT         (a) Amount Charged \$98.33         (b) Date of Charge 02/01/2024         (c) Date(§) Credit Card Issuer Paid         \$           7 PAYEE         (a) Payee name Public Storage         (b) Payee address: Public Storage         City, State, Zip Code           8 PURPOSE OF EXPENDITURE         (a) Category Doltical         (b) Description Political         OD Code/files/ Public Overfieed/Rental Expense         (b) Objecription Austin Storage facility           9 Complete ONLY if drect expenditure to benefit COH         (a) Amount Charged \$641.84         (b) Date of Charge 02/23/2024         (c) Date(§) Credit Card Issuer Paid           9 Complete ONLY if drect expenditure to benefit COH         (a) Amount Charged \$641.84         (b) Date of Charge 02/23/2024         (c) Date(§) Credit Card Issuer Paid           PAYEE         (a) Amount Charged S641.84         (b) Date of Charge 02/23/2024         (c) Date(s) Credit Card Issuer Paid           PURPOSE OF EXPENDITURE         (a) Amount Charged S641.84         (b) Date of Charge 02/23/2024         (c) Date(s) Credit Card Issuer Paid           9 Complete ONLY if drect expenditure to benefit COH         (a) Amount Charged 02/23/2024         (b) Date of Charge 02/23/2024         (c) Date	Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expe Fees Food/Beve / - Gift/Awards al Committee Legal Serv	ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tra Tra Tra	Insportation Equipmen Ivel in District Ivel Out of District	& Related I	
Sch: 3/4 Rpt: 28/31         Smithee, John T. (The Honorable)         00020664           4 CREDIT CARD ISUMR         Name of financial institution see previous         5 TOTAL OF UNITEMIZED EXPENDITURE CHARGE DT O A CREDIT CHARGE OT O A CREDIT CHARGE OT O A CREDIT CHARGE OT O A CREDIT CHARGE OT O A CREDIT Public Storage         City         State         Zip Code           7 PAYEE         (a) Payee name Public Storage         (b) Date of the top of the school let (b) Description Descreptorine biol at the top of the school let (b) Description Descreptorine benefit COM PAYMENT         (a) Category Concel frame autistic of texes complex School let (b) Description Dust Bowl Bar & Grill         (b) Date of Charge 02/23/2024         (c) Cated if Austin. TX, referenter loting expense           PAYEE         (a) Amount Charged \$641.84         (b) Date of Charge 02/23/2024         (c) Date(s) Credit Card Issuer Paid Office held         State, Zip Code 811 W. 7th Street Dathart event expense           PAYEE         (a) Amount Charged QUARDET TAT 79029         (b) Date of Charge QUARDET TAT 79029         (c) Date(s) Credit Card Issuer Paid Office held           PURPOSE OF EXPENDITURE         (a) Amount Charged QUARDET TAT 79029         (b) Date of Charge QUARDET TAT 79029         Office held           PAYEE         (a) Amount Charged QUARDET TAT 70000 <td>1 Total pages Schedule F4:</td> <td>2 FILER NAME</td> <td></td> <td></td> <td></td> <td>3 Filer ID (Ethic</td> <td>s Commiss</td> <td>sion Filers)</td>	1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
4       CREDIT CARD ISSUER       Name of financial institution see prévious       5       TOTAL OF UNITEMIZED CHARGE TO A CREDIT       \$         6       PAYMENT       (a) Amount Charged \$98.33       (b) Date of Charge 02/01/2024       (c) Date(s) Credit Card Issuer Paid         7       PAYEE       (a) Payee name Public Storage       (b) Date of Charge 02/01/2024       (c) Date(s) Credit Card Issuer Paid         8       PURPOSE OF EXPENDITURE       (a) Category Candidate/Office/Indead/Rential Expense       (b) Payee address: Austin, TX 78751       City.       State.       Zip Code         9       PORPOSE OF EXPENDITURE       (a) Category Candidate/Office/Indead/Rential Expense       (b) Description Austin storage facility       (c) Category Candidate/Office/Indead/Rential Expense       (c) Category Candidate/Office/Indead/Rential Expense       (c) Category Candidate/Office/Indead/Rential Expense       (c) Date(s) Credit Card Issuer Paid       Office held         9       Complete Dublit di PAYMENT       (a) Amount Charged S641.84       (b) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid       Office held         PAYMENT       (a) Category S641.84       (b) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid       Dalhart, TX 79029         PAYMENT       (a) Category See Categories Issue at he top of this schealue; Event Expense       (b) Description Dalhart event expense       Office held         Com			The Honorable)					,
ISSUER       See previous       EXPENDITURES CARGED TO A CREDIT CARGE TO A CREDIT TO A CREDIT PUBLIC Storage       State       Zip Code 1033 E 41st Street         9       PORPOSE OF EXPENDITURE Condicate differendider name       (b) Date of Charge Office sought       (c) Date(s) Credit Card Issuer Paid       (c) Cardidate/Officeholder name       (c) Date(s) Credit Card Issuer Paid         9       Omplete (MLY if direct expenditure to benefit COH PAYMENT       (a) Amount Charged \$41.8.4       (b) Date of Charge O2/23/2024       (c) Date(s) Credit Card Issuer Paid         9       Omplete (MLY if direct expenditure to benefit COH PAYMENT       (a) Category (se Category first schedule) EVENT Expense       (b) Date of Charge O1/23/2024       (c) Date(s) Credit Card Issuer Paid         9       Omplete (MLY if direct expenditure to benefit COH PAYMENT       (a) Amount Charged \$118.00       (b) Date of Charge O2/24/2024       (c) Date(s) Credit Card Issuer Paid         9       Omplete (MLY if direct expenditure to benefit COH PAYMENT <td< td=""><td>•</td><td>-</td><td></td><td>5 TOTAL OF UNITEM</td><td></td><td></td><td></td><td></td></td<>	•	-		5 TOTAL OF UNITEM				
\$98.33     02/01/2024       7 PAYEE     (a) Payee name       Public Storage     (b) Payee address;       1033 E 41st Street       Austin, TX 78751       8 PURPOSE OF       EXPENDITURE       (a) Category       (b) Description       Austin, TX 78751       (c) Category       (d) Category       (e) Complete DALX if direct       9 Complete DALX if direct       (e) Category       (a) Amount Charged       (b) Date of Charge       (c) Category       S641.84       02/23/2024       (c) Date(s) Credit Card Issuer Paid       (c) Category       S641.84       02/23/2024       (c) Date(s) Credit Card Issuer Paid       (a) Payee name       Dust Bowl Bar & Grill       Dalhart, TX 79029       Purpeose of Expenditure to benefit C/OH       PAYEE       (a) Category       (b) Category       (c) Catek # sum audiate of twop of this scheduley       Expenditure to benefit C/OH       Purpeose of Expenditure to benefit C/OH       (e) Category       (f) Category       (g) Category       (g) Category       (g) Category       (g) Category       (g) Category       (g) Category    <				EXPENDITURES CHARGED TO A CR		\$		
7 PAYEE       (a) Payee name Public Storage       (b) Payee address; 1033 E 41st Street       City, State, Zip Code 1033 E 41st Street         8 PURPOSE OF EXPENDITURE       (a) Category (b) Description       (b) Description Austin storage facility       Austin, TX 78751         9 Complete DNLY if direct expenditure to benefit C/OH       (c) □ check if austin change of this schedule of 0 0 00000000000000000000000000000000	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid		
IOI T System       IOI Start List Street         Public Storage       Austin, TX 78751         8 PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule)       (b) Description Austin storage facility         9 Political       (c) Check if austin austide of Toxas. Complete Schedule T.       (c) Date of Charge O2/23/2024         9 Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office Sought       Office Neld         PAYMENT       (a) Amount Charged Dust Bowl Bar & Grill       (b) Date of Charge O2/23/2024       (c) Date(s) Credit Card Issuer Paid       Zip Code State.         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule)       (b) Payee address; Dust Bowl Bar & Grill       Cliv.       State.       Zip Code Zip Code Zip Code Zip Code Zip Code Zip Code Zip Code       Cliv.       State.       Zip Code Zip Code Zi		\$98.33	02/01/2024					
Public Storage     Austin, TX 78751       8     PURPOSE OF EXPENDITURE     (a) Category (See Categoryets issel at the top of this schedule) Office Overhead/Rental Expense     (b) Description Austin storage facility       9     Complete QNLY if direct expenditure to benefit C/OH     Candidate/Officeholder name     Office sought     Office held       PAYMENT     (a) Amount Charged Dust Bowl Bar & Grill     (b) Date of Charge 02/23/2024     (c) Date(s) Credit Card Issuer Paid       PAYEE     (a) Payee name Dust Bowl Bar & Grill     (b) Payee address; Dust Bowl Bar & Grill     City, State, Zip Code 811 W. 7th Street       PURPOSE OF EXPENDITURE     (a) Category (see Categories isad at the top of this schedule) Event Expense     (b) Payee address; City, State, Zip Code       PURPOSE OF EXPENDITURE     (a) Category (see Categories isad at the top of this schedule) Event Expense     (b) Description Dalhart event expense       PURPOSE OF EXPENDITURE     (a) Amount Charged (b) Date of Charge Office Sought     (b) Description Dalhart event expense       Complete QNLY if direct expenditure to benefit C/OH     (b) Date of Charge Office Sought     (c) Date(s) Credit Card Issuer Paid       PAYEE     (a) Amount Charged (b) Date of Charge Olize Edgory (see Category (see Category (see Category issues issel at the top of this schedule) Public Storage     (b) Payee address; City, State, Zip Code 1033 E 41st Street       PURPOSE OF EXPENDITURE     (a) Category (see Category issues issel at the top of this schedule) Office Overhead/Rental Expense     (b) Description Au	7 PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code
8       PURPOSE OF EXPENDITURE       (a) Category (see Categories lised at the top of this schedule) Office Overhead/Rental Expense       (b) Description Austin storage facility         9       Complete ONLY if direct expenditure to benefit C/OH       (c)				1033 E 41st Street				
8       PURPOSE OF EXPENDITURE       (a) Category (b) Cate Categories listed at the top of this schedule) (c) Cifice Overhead/Rental Expense       (b) Description Austin storage facility         9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/OfficePolder name       Office Schedule T.       Image: Cite Category (c) Date of Charge Sch1.84       (c) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged Dust Bowl Bar & Grill       (b) Payee address; Bard at the top of this schedule) Event Expense       City, State, Zip Code 811 W. 7th Street Dust Bowl Bar & Grill         PURPOSE OF EXPENDITURE       (a) Category (c) Check if travel outside of Texas. Complete Schedule) Event Expense       (b) Description Dalhart event expense         0       On-Political       (c) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office Sought       Office held         PAYEE       (a) Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete ONLY if direct expenditure to benefit C/OH       (b) Date of Charge 02/24/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Amount Charged (b) Date of Charge Public Storage       (b) Payee address; 033 E 41st Street Austin, TX 78751       Citex if Austin, TX, officeholder living expense		Public Storage						
EXPENDITURE       Cise claspones isted at the top of this schedule)       Austin storage facility <ul> <li>Political</li> <li>Mon-Political</li> <li>Candidate/Officeholder name</li> <li>Office Sought</li> <li>Office Note: it Austin, TX, officeholder lowing expense</li> </ul> 9 Complete QNLY if direct       Candidate/Officeholder name       Office Sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Cate(s) Credit Card Issuer Paid       Zip Code         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       Expenditure to benefit C/OH				,				
August 2       Office Overhead/Rental Expense       August 300 age factory         Political       (c)       Check # travel outside of Texas. Complete Schedule T.       Image: Check # Augth, TX, officeholder Iwing expense         9       Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$641.84       (b) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Dust Bowl Bar & Grill       (b) Payee address; City, State, Zip Code 811 W. 7th Street         PURPOSE OF EXPENDITURE       (a) Category (See Categories Issed at the top of this schedule) Event Expense       (b) Description Dalhart, TX 79029         PURPOSE OF EXPENDITURE       (a) Category (See Categories Issed at the top of this schedule) Event Expense       (b) Description Dalhart event expense         PAYMENT       (a) Amount Charged (b) Date of Charge (c) Theck if Austin, TX, officeholder Iwing expense       Office held         PAYMENT       (a) Amount Charged (b) Payee address; City, State, Zip Code 1033 E 41st Street       (c) Theck if Austin, TX, 78751         PURPOSE OF EXPENDITURE       (a) Category (See Categories Isted at the top of this schedule) (See Categories Isted at at the top of this schedule) (b) Payee address; City, State, Zip Code 1033 E 41st Street         PURPOSE OF EXPENDITURE       (a) Category (See Categories Isted at athe top of this schedule) (Diffice Overhead/Rental Expe								
X       Political				Austin storage facility	У			
9       Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$641.84       (b) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Payee address; Dust Bowl Bar & Grill       (b) Payee address; Dust Bowl Bar & Grill       City, State, Zip Code 811 W. 7th Street         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule)       (b) Date of Charge (c) Description       (b) Dater expense         Non-Political       (c) Check if ravel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder Hoing expense         PAYEE       (a) Amount Charged (b) Date of Charge (c) Check if avel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder Hoing expense         Complete QNLY if direct expenditure to benefit C/OH       (b) Date of Charge (c) Date of Charge (c) Date(s) Credit Card Issuer Paid       Office held         PAYEE       (a) Amount Charged \$118.00       (b) Date of Charge (c) Date(s) Credit Card Issuer Paid       City, State, Zip Code 1033 E 41st Street         PUNPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) (See Categories listed at the top of this schedule) (C) Description       (b) Payee address; Austin, TX 78751         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Ove	X Political							
expenditure to benefit C/OH       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Payee name       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF       (a) Category       (b) Category       (b) Description       Dalhart, TX 79029       (b) Description         [X] Political       (c)       Check if tavel outside of Texas. Complete Schedule)       (b) Description       Dalhart event expense         Complete QNLY if direct       (c)       Check if tavel outside of Texas. Complete Schedule)       Cfice sought       Office held         PAYEE       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Office held         PAYEE       (a) Payee name       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Office held         PAYEE       (a) Payee name       (b) Date of Charge       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Category       (b) Description </td <td>Non-Political</td> <td>(C) Check if travel outside</td> <td>of Texas. Complete Schedule</td> <td>T. X Check if Aus</td> <td>stin, TX, c</td> <td>officeholder living expe</td> <td>nse</td> <td></td>	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Aus	stin, TX, c	officeholder living expe	nse	
PAYMENT       (a) Amount Charged \$641.84       (b) Date of Charge 02/23/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Dust Bowl Bar & Grill       (b) Payee address;       City,       State,       Zip Code 811 W. 7th Street         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Event Expense       (b) Description Dalhart event expense       City,       State,       Zip Code 811 W. 7th Street         PORPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Event Expense       (b) Description Dalhart event expense       Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       (a) Amount Charged \$118.00       (b) Date of Charge 02/24/2024       (c) Date(s) Credit Card Issuer Paid       State,       Zip Code 1033 E 41st Street         PAYEE       (a) Payee name Public Storage       (b) Date of this schedule) 02/24/2024       City,       State,       Zip Code 1033 E 41st Street         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) (fice Overhead/Rental Expense       (b) Description Austin storage facility       City,       State,       Zip Code 210 Code         PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) (fice Overhead/Rental Expense       City,       State,       Zip Code      <	9 Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
PAYEE       (a) Payee name Dust Bowl Bar & Grill       (b) Payee address; B11 W. 7th Street       City, State, Zip Code B11 W. 7th Street         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description Dalhart event expense         Mon-Political       (c) _ check if travel outside of Texas. Complete Schedule T. Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name 0/2/24/2024       Office sought (c) Date(s) Credit Card Issuer Paid 0/2/24/2024         PAYEE       (a) Amount Charged \$118.00       (b) Date of Charge 0/2/24/2024       (c) Date(s) Credit Card Issuer Paid 0/2/24/2024       State, Zip Code 1033 E 41st Street 4ustin, TX 78751         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) (b) Date of Charge 0/2/24/2024       (b) Payee address; City, State, Zip Code 1033 E 41st Street 4ustin, TX 78751         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) (See Categories listed at the top of this schedule) (D) Description Austin storage facility       (b) Description Austin storage facility	expenditure to benefit C/OH							
Image: constraint of the point of the	PAYMENT	, , , , , , , , , , , , , , , , , , ,		(c) Date(s) Credit Card	Issuer	Paid		
Dust Bowl Bar & Grill       Dalhart, TX 79029         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description Dalhart event expense         Non-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       _ check if Austin, TX, officeholder living expense         Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       Office for the schedule ISSUE Paid         PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         PAYEE       (a) Category       (a) Category       (b) Description       Austin, TX 78751       Excert Excert Expense       Excert Expense         PURPOSE OF EXPENDITURE       (a) Category       (a) Category       (b) Description       Austin, TX 78751       Excert Excert Expense         Non-Political       (c) _ check if travel outside of Texas. Complete Schedule T.       (b) Description       Austin storage facility       (c) _ check if travel outside of Texas. Complete Schedule T.       (c) Check if Austin, TX, officeholder living expense	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
PURPOSE OF EXPENDITURE       (a) Category (see Categories listed at the top of this schedule) Event Expense       Dalhart, TX 79029		Duct Bowd Bor & Crill		811 W. 7th Street				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Event Expense       (b) Description Dalhart event expense         Non-Political       (c) Cneck if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete QNLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged       (b) Date of Charge       (c) Date(s) Credit Card Issuer Paid       City, State, Zip Code         PAYEE       (a) Payee name       (b) Payee address;       City, State, Zip Code       1033 E 41st Street         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description Austin storage facility       (c) Description		Dust Bowi Bar & Grill						
EXPENDITURE       (See Categories listed at the top of this schedule)       Dalhart event expense <ul> <li>Political</li> <li>Non-Political</li> <li>C              <li>c check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> </li></ul> <ul> <li>Office Sought</li> <li>Office Note</li> <li>C andidate/Officeholder outside of Texas. Complete Schedule T.</li> <li>C andidate/Officeholder Image and the top of this schedule)</li> <li>PAYMENT</li> <li>(a) Amount Charged</li> <li>(b) Date of Charge</li> <li>(c) alte(s) Credit Card Issuer Paid</li> </ul> <ul> <li>State, Zip Code</li> </ul> PAYEE         (a) Payee name         (b) Date of Charge           Public Storage         (b) Payee address;         City,         State, Zip Code           PutPOSE OF         (a) Category         (b) Description         Austin, TX 78751           (b) Political         Office Overhead/Remit Expense         (b) Description           (b) Political         Office Overhead/Remit Expense           (c) _ check if travel outside of Texas. Complete Schedule T.         (b) Description           Austin storage facility         (c) _ check if austin, TX, officeholder living expense           (c) _ check if travel outside of Texas. Complete Schedule T.         (check if Aust				Dalhart, TX 79029				
Image: Sector				(b) Description				
X Political   Non-Political (c) Check if travel outside of Texas. Complete Schedule T.   Complete QNLY if direct Candidate/Officeholder name   Complete QNLY if direct Candidate/Officeholder name   Office sought Office held   PAYMENT (a) Amount Charged   \$118.00 02/24/2024   PAYEE   (a) Payee name (b) Date of Charge   PUBIC Storage (a) Payee name   Public Storage (b) Payee address;   City, State,   Zip Code   1033 E 41st Street   Public Storage   (a) Category   (see categories listed at the top of this schedule)   Office Overhead/Rental Expense   (b) Description   Austin, TX 78751   (b) Description   Austin storage facility				Dalhart event expens	se			
Complete ONLY if direct expenditure to benefit C/OH       Candidate/Officeholder name       Office sought       Office held         PAYMENT       (a) Amount Charged \$118.00       (b) Date of Charge 02/24/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Public Storage       (b) Payee address; Public Storage       City, Austin, TX 78751         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description Austin storage facility         (b) Political       (c) Check if travel outside of Texas. Complete Schedule T.       X Check if Austin, TX, officeholder living expense	X Political							
expenditure to benefit C/OH <ul> <li>PAYMENT</li></ul>	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, c	officeholder living expe	nse	
PAYMENT       (a) Amount Charged \$118.00       (b) Date of Charge 02/24/2024       (c) Date(s) Credit Card Issuer Paid         PAYEE       (a) Payee name Public Storage       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description Austin storage facility       (b) Description (c) Check if travel outside of Texas. Complete Schedule T.       (c) Check if Austin, TX, officeholder living expense	-	Candidate/Officeholder	name O	ffice sought		Office held		
PAYEE       (a) Payee name Public Storage       (b) Payee address;       City,       State,       Zip Code         PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Payee address;       City,       State,       Zip Code         Image:								
PAYEE       (a) Payee name       (b) Payee address;       City,       State,       Zip Code         Public Storage       Public Storage       1033 E 41st Street       1035 E 41st Stre	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid		
(a) Category       (b) Taylor database, and buy, and		\$118.00	02/24/2024					
Public Storage     Austin, TX 78751       PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense     (b) Description Austin storage facility       Non-Political     (c) Check if travel outside of Texas. Complete Schedule T.     X Check if Austin, TX, officeholder living expense	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code
PURPOSE OF EXPENDITURE     (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense     (b) Description Austin storage facility       Non-Political     (c) Check if travel outside of Texas. Complete Schedule T.     X Check if Austin, TX, officeholder living expense		Dublic Charage		1033 E 41st Street				
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense       (b) Description Austin storage facility         X Political       (c) Check if travel outside of Texas. Complete Schedule T.       X Check if Austin, TX, officeholder living expense		Public Storage						
EXPENDITURE       (See Categories listed at the top of this schedule)       Austin storage facility         X       Political       Office Overhead/Rental Expense       Austin storage facility         Non-Political       (c)       Check if travel outside of Texas. Complete Schedule T.       X         Check if Austin, TX, officeholder living expense       Check if Austin, TX, officeholder living expense								
X     Political       Non-Political     (c)       Check if travel outside of Texas. Complete Schedule T.			., .					
X       Political         Non-Political       (C)         Check if travel outside of Texas. Complete Schedule T.       X         Check if Austin, TX, officeholder living expense			Austin storage facility	У				
	X Political		•					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. X Check if Aus	stin, TX, c	officeholder living expe	nse	
expenditure to benefit C/OH	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought		Office held		

EXPENDITORES MADE BY CREDIT CARD				SCHEDULE F4			
	EXPENDITURE CATEGORIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award al Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 4/4 Rpt: 29/31	Smithee, John T. (1	The Honorable)		00020664			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZE				
ISSUER		Cards	EXPENDITURES CHARGED TO A CREI CARD	\$			
6 PAYMENT	(a) Amount Charged \$50.98	(b) Date of Charge 02/07/2024	(c) Date(s) Credit Card Iss 02/09/2024	suer Paid			
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
			6 Sylvan Way				
	Avis Rent Car						
			Parsippany, NJ 07504				
8 PURPOSE OF	(a) Category (See Categories listed at the top		(b) Description				
	Travel Out of District	of this schedule)	Austin rental car				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austin,	TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$51.55	(b) Date of Charge 02/07/2024	(c) Date(s) Credit Card Iss 02/09/2024	suer Paid			
PAYEE (a) Payee name			(b) Payee address;	City, State, Zip Code			
	Avia Dopt Cor		6 Sylvan Way				
	Avis Rent Car						
			Parsippany, NJ 07504				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Rental car expense LB				
	Travel Out of District			BIOAMA			
X Political							
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense			
Complete ONLY if direct         Candidate/Officeholder name         Office sought         Office held           expenditure to benefit C/OH							
	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	nuor Poid			
		.,	02/21/2024				
	\$60.51	02/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	(u) r uyee name		6 Sylvan Way				
	Avis Rent Car						
			Parsippany, NJ 07504				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) — Travel Out of District			Austin rental car				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held			
expenditure to benefit C/OH							

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instrue	1 Total pages Schedule K: Sch: 1/1 Rpt: 30/31				
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)			
Smithee, Joh	hn T. (The Honorable)	00020664			
4 Date	5 Name of person from whom amount is received	<b>8</b> Amount (\$)			
02/06/2024	Austin Energy	\$165.69			
	6 Address of person from whom amount is received; City; State; Zip Code				
	Austin, TX 78723				
	7 Purpose for which amount is received	k if political contribution returned to filer			
	Refund of utility deposit for Austin apartment				
Date	Name of person from whom amount is received	Amount (\$)			
02/20/2024	Griffin Communications	\$25,000.00			
	Address of person from whom amount is received; City; State; Zip Code				
	Austin, TX 78736				
		k if political contribution returned to filer			
	Credit for unused digital media				
Date	Name of person from whom amount is received	Amount (\$)			
02/21/2024	Griffin Communications	\$1,520.30			
	Address of person from whom amount is received; City; State; Zip Code				
	Austin, TX 78736				
	Purpose for which amount is received	k if political contribution returned to filer			
	Credit for unused digital media				

### **TEXT ANNOTATION**

Sch: 1/1 Rpt: 31/31

FILER NAME

Smithee, John T. (The Honorable)

Filer ID (Ethics Commission Filers) 00020664

Schedule F1

Information entered by filer as a memo:

Correction: 2024/02/22 Payment to Citibank Credit Card in the amount of \$60.51 was inadvertently omitted from report

Correction: 2024/01/30 Payment to McLaughlin & Associates, Inc. of \$12,900.00 was inadvertently omitted from report

Additional Note: 2024/02/21 Payment to Lone Star Directions in the amount of \$1,327.00 was incurred in this report, but did not clear the bank until 2024/02/28 after the due date which was 2024/02/24

Additional Note: 2024/02/14 Payment to Double U Communications in the amount of \$39,568.87 was incurred in this reporting period, but did not clear the bank until 2024/02/27 after the due date which was 2024/02/24