CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	lete this form.	1 Filer ID (Ethics Commi 00020664		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	ISE ONLY
OFFICEHOLDER NAME	The Honorable	John T.			Date Received	
10 000					ELECTRONICA	I I V EII ED
					01/15/2025	ALLI FILLD
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Smithee				
4 CANDIDATE /	ADDRESS / PO BOX; APT	T / SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	2808 Parker					_
ADDRESS					Receipt #	Amount
Change of Address	Amarillo, TX 79109					
	7411411110, 17, 75105				Date Processed	
					Date Imaged	
F. CAMBAION	MC (MDC /MD	FIDOT				
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Mr.	Mike				
	NICKNAME	LAST		SUFFIX		
		Standefer				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP ⁻	T / SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER ADDRESS	4805 Spartanburg					
(Residence or Business)	Amarillo, TX 79119					
	·					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER PHONE	(806) 359-8623					
8 REPORT		_	_	_	_	
TYPE	X January 15	30th day before	election	Runoff	15th day after can appointment (office	
	July 15	8th day before 6	election \square	Exceeded modified	Final Report (Attac	
			ш	reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	HROUGH	12/31/202		
	01/02/2021			,,	- •	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	11/05/2024		-	브	ш	
		LXI ^G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	State Representative Dist	trict 86		State Represent	tative District 86	
	-!			•		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 37

13 C / OH NAME	Smithee, John T. (The	ne Honorable)	14 Filer ID 00020664	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or politica . These expenditures may have been mad d officeholders are required to report this	de without the candidate's or offic	eholder's knowledge or	
X Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
	X GENERAL	Texas Alliance for Life PAC			
		COMMITTEE ADDRESS			
	SPECIFIC	8000 Centre Park Drive			
		Suite 380			
		Austin, TX 78754			
		COMMITTEE CAMPAIGN TREASURE	R NAME		
		Shaw, James			
		COMMITTEE CAMPAIGN TREASURE	R ADDRESS		
		4505 Corazon Cv			
		Round Rock, TX 78681			
16 CONTRIBUTION TOTALS		MIZED POLITICAL CONTRIBUTIONS (OT EES OF LOANS, OR CONTRIBUTIONS N		\$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 39,609.00	
EXPENDITURE TOTALS	3. TOTAL UNITER	MIZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITI	CAL EXPENDITURES		\$ 29,703.57	
CONTRIBUTION BALANCE	5. TOTAL POLITION REPORTING P	CAL CONTRIBUTIONS MAINTAINED AS ERIOD	OF THE LAST DAY OF THE	\$ 140,124.39	
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OUTSTANDING L RTING PERIOD	OANS AS OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT			der penalty of perjury, that the ac includes all information required ion Code.		
			The Honorable John T. Smith	P P	
			ignature of Candidate or Officeho		
		_			
AFFIX NO	TARY STAMP / SEAL AE	BOVE			
		said		day	
of	, 20, to 0	certify which, witness my hand and seal of	office.		
0' ' '	cer administering	Printed name of officer administeri		er administering oath	

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH **ADDENDUM**

				Page 3 of 37
C / OH NAME	Smithee, John T. (Th	e Honorable)	Filer ID 00020664	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL	expenditures may have	of political expenditures by political co peen made without the candidate's of the distribution only if the	or officeholder's knowledge or o	onsent. Candidates and
COMMITTEE(S)	COMMITTEE TYPE X GENERAL SPECIFIC	COMMITTEE NAME Texas Realtors PAC COMMITTEE ADDRESS 1115 San Jacinto Blvd. Ste 200 Austin, TX 78701 COMMITTEE CAMPAIGN TREASI Cantu, Leslie COMMITTEE CAMPAIGN TREASI P. O. Box 2246		
		Austin, TX 78768		

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

				4 of 37					
-	18 FILER NAME19 Filer IDSmithee, John T. (The Honorable)00020664								
20 SCHEDULE NAME OF S			SUB ⁻	TOTAL AMOUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	39,609.00					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
4.	SCHEDULE E: LOANS		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	16,796.21					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$						
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	6,453.68					
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	6,453.68					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$						
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	118.00					

	MONEI	ARY POLITICAL CONTRIBUTIONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this form.		Total pages Schedule A1: Sch: 1/7 Rpt: 5/37	
2	FILER NAME Smithee, Joh	nn T. (The Honorable)		3 Filer ID (Ethics Commission 00020664	on Filers)
4	Date 5 Full name of contributor x out-of-state PAC (ID#: C00577155) 11/22/2024 APEX Clean Energy, Inc. PAC 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$1,500.00	
8	Principal occu	Charlottesville, VA 22902 pation / Job title (See Instructions) 9 En	nployer (See Instructions)		
	Date 08/19/2024	Full name of contributor	963)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	nployer (See Instructions)		
	Date 10/03/2024	Full name of contributor X out-of-state PAC (ID#: C00035 Chevron Employees PAC Contributor address; City; State; Zip Code	006)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	San Ramon, CA 94583 pation / Job title (See Instructions)	nployer (See Instructions)		
	Date 12/03/2024	Full name of contributor X out-of-state PAC (ID#: C00847 Clearway Energy Inc PAC Contributor address; City; State; Zip Code San Francisco, CA 94111	764)	Amount of Contribution (\$)	\$1,000.00
	Principal occu		I nployer (See Instructions)		
	Date 10/08/2024	Full name of contributor X out-of-state PAC (ID#: C00248 Comcast Corp & NBC Universal PAC Contributor address; City; State; Zip Code Philadephia, PA 19103	7716)	Amount of Contribution (\$)	\$1,000.00
	Principal occu	· · · · · · · · · · · · · · · · · · ·	nployer (See Instructions)		
		•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/7 Rpt: 6/37	
2	FILER NAME Smithee, Jol	hn T. (The Honorable)		3	Filer ID (Ethics Commission 00020664	on Filers)
4	Date 10/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Eye-PAC of the Texas Ophthalmological Assn 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Farthing, Aurora Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Foley & Lardner, LLP Texas Campaign Fund Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75201 spation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/07/2024	Full name of contributor out-of-state PAC (ID#:_ Friends of the TTU System PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#:_Kennedy, Roy Contributor address; City; State; Zip Code Amarillo, TX 79110			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/7 Rpt: 7/37	
2	FILER NAME Smithee, Joh	nn T. (The Honorable)		3	Filer ID (Ethics Commission 00020664	on Filers)
4	Date 08/28/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$5,000.00
_		Eagle Pass, TX 78852				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78760 pation / Job title (See Instructions)	Employer (See Instructions)		
	i illicipai occu	pation / Job title (Jee matactions)	Employer (See Instructions	,		
	Date 10/04/2024	Full name of contributor	d		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/16/2024	Full name of contributor \(\times\) out-of-state PAC (ID#: \(\textit{Q}\) National Association of Mutual Insurance Compa Contributor address; City; State; Zip Code Indianapolis, IN 46268	anies PAC		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Tex State PAC Contributor address; City; State; Zip Code Dallas, TX 75202)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		•				

	MONET	ARY POLITICAL CONT	RIBUTION	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how to con	nplete this for	m.	1	Total pages Schedule A1: Sch: 4/7 Rpt: 8/37	
2	FILER NAME Smithee, Joh	n T. (The Honorable)			3	Filer ID (Ethics Commission 00020664	on Filers)
4	Date 08/28/2024	 Full name of contributor x out-of One Gas, Inc. PAC Contributor address; City; State; Zip Contributor address; City; State 		0554444)	7	Amount of Contribution (\$)	\$500.00
_		Tulsa, OK 74103	1-	- 40 40 41			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/25/2024	Populus Financial Group, Inc. Tex Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Irving, TX 75062 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 11/05/2024	Full name of contributor out-of Southern Glazer's PAC of Texas Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 11/16/2024	Full name of contributor out-of TBA Bank PAC-State Contributor address; City; State; Zip C	f-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 09/24/2024	Full name of contributor x out-of Tenaska Employees Texas PAC Contributor address; City; State; Zip C	f-state PAC (ID#: <u>CO</u>	0479998		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			L				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/7 Rpt: 9/37	
2	FILER NAME Smithee, Jol	nn T. (The Honorable)		3	Filer ID (Ethics Commission 00020664	on Filers)
4	Date 09/17/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Aviation Assn 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/25/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Coop Council PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/22/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cattle Feeders BEEFPAC Contributor address; City; State; Zip Code Amarillo, TX 79106			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Assn PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/02/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/7 Rpt: 10/37	
2	FILER NAME Smithee, Joh	nn T. (The Honorable)		3	Filer ID (Ethics Commission F 00020664	-ilers)
4	Date 09/09/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$1	L,000.00
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 11/22/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Spring, TX 77386 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	•					
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Assn. Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2	2,500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 09/20/2024	Full name of contributor X out-of-state PAC (ID#: C Textron Political Action Committee Contributor address; City; State; Zip Code Providence, RI 02903)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_ United Supermarkets PAC Contributor address; City; State; Zip Code Lubbock, TX 79493			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/7 Rpt: 11/37	
2	FILER NAME Smithee, Jol	nn T. (The Honorable)		3	Filer ID (Ethics Commission 00020664	on Filers)
4			7	Amount of Contribution (\$)	\$2,500.00	
		Houston, TX 77027				
8	Principal occur Construction	pation / Job title (See Instructions)	9 Employer (See Instructions Self	s)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Willilams, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$499.00
	Principal occu	Amarillo, TX 79106 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Wine and Spirit Wholesalers of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 09/20/2024	Full name of contributor X out-of-state PAC (ID#: Carrich Holding Company of America, Inc. Common Contributor address; City; State; Zip Code Washington, DC 20004			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/6 Rpt: 12/37	Smithee, John T. (The Honorable) 00020664
4	Date	5 Payee name
	12/19/2024	Amarillo Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	P. O. Box 9480
		Amarillo, TX 79105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Dues for monthly meetings
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/03/2024	Amarillo Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P. O. Box 9480
		Amarillo, TX 79105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Membership fee for Chamber
		Membership lee for Chamber
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Data	
	Date 07/12/2024	Payee name Chase-Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$493.60	P. O. Box 94014
		Palatine, IL 60094-4014
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payment of credit card
		please memo #3
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	o
_		

SCHEDULE F1

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

Event Expense Loan Repayment/ Fees Office Overhead/F Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Lenal Services Salaries/Manes/C

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Travel in District
Travel out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 2/6 Rpt: 13/37	Smithee, John T. (The Honorable) 00020664
4	Date	5 Payee name
	09/10/2024	Chase-Cardmember Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,824.60	P. O. Box 94014
		Palatine, IL 60094-4014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Payment of credit card
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/10/2024	Chase-Cardmember Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$789.98	P. O. Box 94014
		Palatine, IL 60094-4014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Payment of credit card
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name CitiBank
	08/30/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.12	P. O. Box 9001037
		Louisville, KY 40290-1037
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payment of credit card
		T dyfficht of ordat data
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/6 Rpt: 14/37	Smithee, John T. (The Honorable) 00020664
4	Date	5 Payee name
	08/02/2024	CitiBank
6	Amount (\$) \$329.12	7 Payee address; City; State; Zip Code P. O. Box 9001037 Louisville, KY 40290-1037
8	PURPOSE	
o	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 Payment of Credit Card
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/26/2024	CitiBank
	Amount (\$) \$69.68	Payee address; City; State; Zip Code P. O. Box 9001037
		Louisville, KY 40290-1037
	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 Payment of credit card
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/10/2024	CitiBank
	Amount (\$) \$232.82	Payee address; City; State; Zip Code P. O. Box 9001037
		Louisville, KY 40290-1037
	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 Payment of credit card
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

ense Travel in District
pense Travel Out of Di
ages/Contract Labor OTHER (enter a

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/6 Rpt: 15/37	Smithee, John T. (The Honorable) 00020664
4	Date	5 Payee name
	10/28/2024	Double U Marketing & Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.00	1608 S. Washington
L		Amarillo, TX 79102
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Advertising
		Advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	07/01/2024	Oldham County Stock Show
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P. O. Box 578
		Vega, TX 79092
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Contribution
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
⊨	Data	
	Date 09/16/2024	Payee name
		Paypal, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.99	2211N 1st Street
		San Jose, CA 95131
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fee for Paypal contribution
		ree for raypar contribution
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/6 Rpt: 16/37	Smithee, John T. (The Honorable) 00020664
4	Date	5 Payee name
	10/27/2024	Paypal, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.30	2211N 1st Street
		San Jose, CA 95131
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fee for Paypal contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	07/31/2024	Stingley, Andrea
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,000.00	4534 Merle Drive
		Austin, TX 78745
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Payment for additional hours worked on campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	12/04/2024	Toorish, Samantha
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,800.00	40 North 135
	ΨΔ,000.00	40 Noturies
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITORL	X Check if Austin, TX, officeholder living expense
		Deposit for Austin apartment
	C. L. Chill Wife allowed	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee I	Gift/Awards/Memorials Legal Services The Instruction G u	•		ages	/Contract Labor		OTHER (enter	a category not listed above)	
_		-		The monucuon of	ilde explains il	low to con	пріс	te tilis loilli.	_			
1	Total pages Schedule F1:	2								Filer ID	(Ethics Commission Filers)	
	Sch: 6/6 Rpt: 17/37		Smithee, Jol	nn T. (The Hon	orable)					00020664	Į.	
4	Date	5	Payee name									
	11/28/2024		Toorish, Sar	nantha								
_	Amount (\$)	7			Ctata	Zip Cod	40					-
6	Amount (\$)	 ′	Payee addres		Siale,	Zip Cot	ue					
	\$2,855.00		40 North I35									
			Austin, TX 7	8701								
8	PURPOSE	(a)	Category (so	e Categories listed at t	o top of this scho	dulo)	(b)	Description				_
	OF	l`´		read/Rental Exp		dule)	` '		outsio	de of Texas. Co	omplete Schedule T.	
	EXPENDITURE		Cinice Overr	icaan tentai Exp	Jense			X Check if Austin,	, TX,	officeholder livi	ng expense	
								Austin apartm	nen	t rental		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Ot	ffice soug	ght			Office	held	_
	expenditure to benefit C/OI	Н										
⊨	Data	Г	Davis a Trains									_
	Date		Payee name									
	12/31/2024		Toorish, Sar									
	Amount (\$)		Payee addres		State;	Zip Cod	de					
	\$2,855.00		40 North I35									
			Austin, TX 7	8701								
_	PURPOSE	(a)					(h)	Description				_
	OF	(۵)		e Categories listed at the		dule)	(5)	·	outsio	de of Texas. Co	omplete Schedule T.	
	EXPENDITURE		Office Over	nead/Rental Exp	Jense			X Check if Austin,				
								Austin apartm	nen	t rental		
	Complete ONLY if direct		Candidate/Offic	eholder name	Ot	ffice soug	aht			Office	held	
	expenditure to benefit C/OI											
_												

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete the	nis form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)
Sch: 1/9 Rpt: 18/37	Smithee, John T. (1	Γhe Honorable)			00020664		
4 CREDIT CARD ISSUER		ncial institution nk Card	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$276.00	08/01/2024	08/01/202	24			
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Avis Rent Car		6 Sylvan \	Way			
				y, NJ 07504			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript			-0.0	
X Political	Travel Out of District	or the contocally	Rental cal	r expense-Denv	er-Amarilio (ALI	EC Conv	rention)
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$174.00	10/03/2024	10/10/202	24			
PAYEE	(a) Payee name	•	(b) Payee a	ıddress;	City,	State,	Zip Code
	Avis Rent Car		6 Sylvan \	Way			
			Parsippan	ıy, NJ 07504			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Rental car expense-Austin GOP caucus				
X Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	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		
	\$321.98	12/31/2024					
PAYEE	(a) Payee name		(b) Payee a	iddress;	City,	State,	Zip Code
	A magricum A intimag		P. O. Box	619616			
	American Airlines						
			Dallas, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Travel Out of District	or this scriedale)	Airtare AU	JS-AMA from GO	JP meeting		
X Political							
Non-Political	(*)	of Texas. Complete Schedule T.	[Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commis	sion Filers)
Sch: 2/9 Rpt: 19/37	Smithee, John T. (T	he Honorable)			00020664		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$53.12	(b) Date of Charge 08/15/2024	(c) Date(s) C 08/29/2024	redit Card Issuer I	Paid		
7 PAYEE	(a) Payee name Avis Rent Car		(b) Payee ad 6 Sylvan W	ay	City,	State,	Zip Code
	() 2 .		Parsippany				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description	on expense-Austir	1		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$50.18	(b) Date of Charge 08/29/2024	(c) Date(s) C 09/26/2024	redit Card Issuer I	Paid		
PAYEE	(a) Payee name Avis Rent Car		(b) Payee ad 6 Sylvan W	ay	City,	State,	Zip Code
PURPOSE OF	(a) Category		Parsippany (b) Description				
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Rental car	expense-Dallas	6		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$19.50	(b) Date of Charge 08/27/2024	(c) Date(s) C 09/26/2024	redit Card Issuer I	[*] Paid		
PAYEE	(a) Payee name Next Level Parking		(b) Payee ad 701 Brazos Ste 500 Austin, TX	Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Parking exp	on Dense-Austin			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commiss	sion Filers)		
Sch: 3/9 Rpt: 20/37	Smithee, John T. (1	Γhe Honorable)		00020664				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$58.82	(b) Date of Charge 09/30/2024	(c) Date(s) Credit Card Issuel 10/10/2024	r Paid				
7 PAYEE	(a) Payee name Avis Rent Car		(b) Payee address; 6 Sylvan Way	City,	State,	Zip Code		
			Parsippany, NJ 07504					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Rental car expense-Austir	n (state affairs)				
Non-Political				officeholder living expe	nse			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$53.12	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issuer 08/01/2024	r Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Avis Rent Car		6 Sylvan Way					
			Parsippany, NJ 07504					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Rental car expense-Austin	1				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expe	nse			
Complete ONLY if direct	Candidate/Officeholder	·	Check if Austin, TX, officeholder living expense Coe sought Office held					
expenditure to benefit C/OH			· ·					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid				
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)	(b) Description					
Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission	Filers)			
Sch: 4/9 Rpt: 21/37	Smithee, John T. (1	The Honorable)		00020664				
4 CREDIT CARD ISSUER		ncial institution e Card	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$297.98	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuer 10/10/2024	r Paid				
7 PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; P. O. Box 36611	City, State, Zi	ip Code			
	() 5 :		Dallas, TX 75235					
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Airfare AMA-AUS to atten	d Austin caucus meeting				
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$393.94	(b) Date of Charge 12/05/2024	(c) Date(s) Credit Card Issuer	r Paid				
PAYEE	PAYEE (a) Payee name Southwest Airlines			City, State, Zi	ip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	Dallas, TX 75235 (b) Description Airfare AMA-AUS for Aust	tin GOP meeting				
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	e sought	Office held				
PAYMENT	(a) Amount Charged \$579.35	(b) Date of Charge 12/04/2024	(c) Date(s) Credit Card Issuer	r Paid				
PAYEE	PAYEE (a) Payee name Cort Furniture Rental		(b) Payee address; 8940 Research Blvd. #C Austin, TX 78758	City, State, Zi	ip Code			
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense							
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 5/9 Rpt: 22/37	Smithee, John T. (1	Γhe Honorable)			00020664		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$156.00	(b) Date of Charge 09/24/2024	(c) Date(s) 10/10/20) Credit Card Issuel 24	r Paid		
7	PAYEE	(a) Payee name Public Storage		(b) Payee 1033 E 4 Austin, T	1st Street	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Descrip		ure rental		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		X Check if Austin, TX,	officeholder living ex	xpense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
L	expenditure to benefit C/OH	(-) A	(h) Data at Obarra	(-) D-+-(-)	0 1:4 0 1 1	- D-1d		
	PAYMENT	(a) Amount Charged \$526.13	(b) Date of Charge 12/05/2024	(c) Date(s)) Credit Card Issue	r Palu		
	PAYEE	(a) Payee name Expedia Group		(b) Payee address; 1111 Expedia Group Way Seattle, WA 98119			State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip		GOP meeting	(Fairmont	Hotel)
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living ex	xpense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$129.43	(b) Date of Charge 12/07/2024	(c) Date(s)) Credit Card Issuel	r Paid		
	PAYEE	(a) Payee name Avis Rent Car		(b) Payee 6 Sylvan Parsippa		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	,	(b) Descrip Austin re	ntal car			
\vdash	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0.001:26+	Check if Austin, TX,		xpense	
[€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 6/9 Rpt: 23/37	Smithee, John T. (1	Γhe Honorable)	00020664					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$627.53	12/06/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate,	Zip Code		
		Capitol Gift Shop		Capitol Building					
L				Austin, TX 78701					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
	_	Gift/Awards/Memorial		Christmas ornaments for	constituents				
	X Political								
L					, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
Ľ	expenditure to benefit C/OH	(a) Amazunt Chausad	(h) Data of Charge	(a) Data(a) Cradit Card Issue	" Daid				
	PAYMENT	(a) Amount Charged \$180.00	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issue 10/10/2024	r Pald				
L	DAV(==								
	PAYEE	(a) Payee name		(b) Payee address;		ate,	Zip Code		
		Hyatt Lost Pines Resort		575 Hyatt Lost Pines Roa	la				
L				Cedar Creek, TX 78612					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Hotel for Austin caucus					
	X Political	Travel Out of District							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living expense				
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$156.00	10/31/2024						
Г	PAYEE	(a) Payee name	•	(b) Payee address;	City, Sta	ate,	Zip Code		
		Public Storage		1033 E 41st Street					
				Austin, TX 78751					
H	PURPOSE OF (a) Category		(b) Description						
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Austin storage rental					
	X Political	Office Overfleau/Reffi	іаі Ехрепое						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX	, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
Ŀ	expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)		
	Sch: 7/9 Rpt: 24/37	Smithee, John T. (1	The Honorable)		00020664				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$156.00	12/20/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Z		Zip Code		
		Public Storage		1033 E 41st Street					
L				Austin, TX 78751					
8				(b) Description					
	Office Overhead/Rental Expense		Austin storage rental						
	x Political								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living exp	ense			
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
Э	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$156.00	08/26/2024	10/10/2024					
Г	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Public Storage			1033 E 41st Street					
				Austin, TX 78751					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Austin storage rental					
	X Political	Office Overhead/Rent	tai Expense						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
e	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$156.00	(b) Date of Charge 07/04/2024	(c) Date(s) Credit Card Issue 09/10/2024	r Paid				
厂	PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code		
				1033 E 41st Street					
		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 rental					
	X Political	- Cinco Overnoud/Nem	LAPONOO						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living exp	ense			
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
E	expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)								
Sch: 8/9 Rpt: 25/37	Smithee, John T. (T	The Honorable)		00020664								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$								
6 PAYMENT	(a) Amount Charged \$325.00	(b) Date of Charge 07/15/2024	(c) Date(s) Credit Card Issuer 09/10/2024	Paid								
7 PAYEE	(a) Payee name American Legislativ	ve Exchange	(b) Payee address; 910 17th Street, 5th Floor	City,	State,	Zip Code						
8 PURPOSE OF	(a) Category		Washington, DC 20006 (b) Description									
8 PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Event Expense (See Categories listed at the top of this schedule) Registration fee for ALEC											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense							
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid								
	\$156.00	11/26/2024										
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code						
	Public Storage		1033 E 41st Street									
			Austin, TX 78751									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Austin storage rental									
X Political	Office Overfiedd/iverfi	tai Experise										
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	X Check if Austin, TX,	officeholder living expe	ense							
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged \$108.00	(b) Date of Charge 12/07/2024	(c) Date(s) Credit Card Issuer	· Paid								
PAYEE	(a) Payee name Fairmont Austin	(b) Payee address; 101 Red River St Austin, TX 78701	City,	State,	Zip Code							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Hotel parking expense for	Austin GOP m	eeting							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense							
Complete ONLY if direct expenditure to benefit C/OH	e sought	Office held										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
	Sch: 9/9 Rpt: 26/37	Smithee, John T. (1	The Honorable)			00020664					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$					
6	PAYMENT	(a) Amount Charged \$328.40	(b) Date of Charge 07/18/2024	(c) Date(s) 09/10/20) Credit Card Issuei 24	r Paid					
7	PAYEE	(a) Payee name United Airlines		(b) Payee address; City, State, Zip Code 233 S Wacker Drive Chicago, IL 60606							
8	PURPOSE OF	(a) Category		(b) Descrip							
ľ	EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	MA to DEN for Al	LEC meeting							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	officeholder living exp	ense						
9 ∈	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$828.00	(b) Date of Charge 07/28/2024	(c) Date(s) 09/10/20) Credit Card Issuei 24	r Paid					
	PAYEE	over Downtown	(b) Payee 650 15th		City,	State,	Zip Code				
L					CO 80202						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip Hotel for	otion ALEC meeting						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense				
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$187.20	(b) Date of Charge 08/08/2024	(c) Date(s) 10/10/20) Credit Card Issuer 24	r Paid					
	PAYEE	(a) Payee name Public Storage			address; 1st Street X 78751	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			otion orage rental						
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		X Check if Austin, TX,		ense				
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
ı											

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
L	Creak Sara r aymont		The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)		
	Sch: 1/9 Rpt: 27/37	Smithee, J	ohn T. (The Honorable)				00020664		
4	Date	5 Payee name)						
	12/06/2024	American A							
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode				
	\$321.98	P. O. Box 6	619616						
	Reimbursement from								
L	X political contributions intended	Dallas, TX	75261						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	nedule)	(b) Description	=	eck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Travel Out	of District			_	eck if Austin, TX, officeholder living expense		
					Airfare AUS to Al	MA	from GOP meeting		
L									
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought		Office held		
	C/OH								
	Date	Payee name	2						
	07/15/2024	1 1	egislative Exchange Counc	cil					
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode				
	\$325.00	910 17th S	treet, 5th Floor						
Reimbursement from									
	political contributions intended Washington, DC 20006								
	PURPOSE	Category (s	nedule)	Description					
	OF EXPENDITURE	Event Expense			Check if Austin, TX, officeholder living expense				
					Registration fee f	for A	ALEC meeting		
L									
	Complete ONLY if direct	Candidate/Office	eholder name		Office sought		Office held		
	expenditure to benefit C/OH								
H	Data								
	Date 07/28/2024	Payee name Avis Rent (
_				. = -	1 -				
	Amount (\$)	Payee addre	•	; Zip Co	oae				
	\$276.00	6 Sylvan W	<i>r</i> ay						
	Reimbursement from political contributions intended	Parsippany	, NJ 07504						
	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Travel Out	of District			_	eck if Austin, TX, officeholder living expense		
					Rental car expen	ise-	Denver-Amarillo (ALEC Convention)		
	Commission ONE V. C. P.	Condidate (C.C.			O#:		Office Includ		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	enoider name		Office sought		Office held		

SCHEDULE G

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 Expense mmittee Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/N	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:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 2/9 Rpt: 28/37		Smithee, John T. (The Honorable)			00020664
4	Date 07/31/2024	5	Payee name Avis Rent Car			
6	Amount (\$) \$53.12	7	Payee address; City; State 6 Sylvan Way	; Zip Co	ode	
	X political contributions intended		Parsippany, NJ 07504			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sci Travel Out of District	nedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Rental car expen	nse-Austin	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	08/15/2024		Avis Rent Car			
	Amount (\$)		Payee address; City; State	; Zip Co	ode	
	\$53.12		6 Sylvan Way			
	Reimbursement from political contributions intended		Parsippany, NJ 07504			
	PURPOSE OF		Category (See Categories listed at the top of this sc	nedule)	Description	Check if Avering TV afficeholder living gypenes
	EXPENDITURE		Travel Out of District		Rental car expen	Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held
	Date 08/29/2024		Payee name Avis Rent Car			
	Amount (\$) \$50.18		Payee address; City; State 6 Sylvan Way	; Zip Co	ode	
	Reimbursement from political contributions intended		Parsippany, NJ 07504			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sci Travel Out of District	nedule)	Description _	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Rental car expen	nse-Dallas
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAME Smithes, John T. (The Henerable)	3 Filer ID (Ethics Commission Filers) 00020664					
	Sch: 3/9 Rpt: 29/37	Smithee, John T. (The Honorable)	00020664					
4	Date	5 Payee name						
	09/30/2024	Avis Rent Car						
6	Amount (\$)	7 Payee address; City; State; Zip C	ode					
	\$58.82	6 Sylvan Way						
	Reimbursement from							
	X political contributions intended	Parsippany, NJ 07504						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description					
	OF EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense					
	LXI LINDITORL		Rental car expense-Austin (state affairs)					
9	Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held					
	expenditure to benefit		•					
	C/OH							
	Date	Payee name						
	10/03/2024	Avis Rent Car						
	Amount (\$)	Payee address; City; State; Zip C	ode					
	\$174.00	6 Sylvan Way						
		5 5)						
	X Reimbursement from political contributions	Development N1 07F04						
	intended	Parsippany, NJ 07504						
	PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule 1					
	EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense					
		Rental car expense-Austin GOP caucus						
		Candidate/Officeholder name	Office sought Office held					
	expenditure to benefit C/OH							
	Date	Payee name						
	12/07/2024	Avis Rent Car						
	Amount (\$)	Payee address; City; State; Zip C	ode					
	\$129.43	6 Sylvan Way						
	Reimbursement from							
	x political contributions intended	Parsippany, NJ 07504						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule 1					
	OF	Travel Out of District	Check if Austin, TX, officeholder living expense					
	EXPENDITURE	Traver out or district	Rental car expense-Austin					
			Trona ou oxponso rusun					
	Complete ONII V if allowers	Condidate/Officeholds	Office cought					
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held					
	C/OH							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Pollin 7 - Gift/Awards/Memorials Expense Printir al Committee Legal Services Salari	Overhead/Rental Expense g Expense ng Expense es/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	<u> </u>	The Instruction Guide explains how to	complete this form.					
1	Total pages Schedule G: Sch: 4/9 Rpt: 30/37	2 FILER NAME Smithee, John T. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020664				
4	Date 12/06/2024	5 Payee name Capitol Gift Shop						
_		·	0-1-					
6	Amount (\$) \$627.53	7 Payee address; City; State; Zip Capitol Building	Code					
	X Reimbursement from political contributions intended	Austin, TX 78701						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Gift/Awards/Memorials Expense	L	Check if Austin, TX, officeholder living expense				
			Christmas ornam	ents for constituents				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	12/04/2024	Cort Furniture Rental						
	Amount (\$)	Payee address; City; State; Zip	Code					
\$579.35 8940 Research Blvd. #C								
	Reimbursement from political contributions intended	Austin, TX 78758						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Office Overhead/Rental Expense	X	X Check if Austin, TX, officeholder living expense				
	ZA ZASTONE		Austin furniture re	ental				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				
	Date	Payee name						
	12/05/2024	Expedia Group						
	Amount (\$)	Payee address; City; State; Zip	Code					
	\$526.13	1111 Expedia Group Way W						
	Reimbursement from political contributions intended	Seattle, WA 98119						
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Travel Out of District		Check if Austin, TX, officeholder living expense				
	LAI ENDITORE		Hotel expense for	Austin GOP meeting (Fairmont Hotel)				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expen Gift/Awards/Memorials Legal Services The Instruction G	Expense		xpense Nages/Contract Labor		Travel in District Travel Out of District OTHER (enter a catego	ory not listed above)	
1	Total pages Schedule G:	2	FILER NAME					3	Filer ID (Ethics	Commission Filers)	
L	Sch: 5/9 Rpt: 31/37		Smithee, Jo	ohn T. (The Hon	orable)				00020664		
4	Date	5	Payee name								
	12/07/2024		Fairmont A	ustin							
6	Amount (\$)	7	Payee addre		State;	Zip Co	ode				
	\$108.00		101 Red Ri	ver St							
	Reimbursement from political contributions intended		Austin, TX	78701							
8	PURPOSE OF	(a)	Category (s	ee Categories listed at t	he top of this sche	edule)	(b) Description	=		exas. Complete Schedule T.	
	EXPENDITURE		Travel Out	of District			L		neck if Austin, TX, officeh		
							Hotel parking exp	pens	se for Austin GO	P meeting	
_	Complete ONLY if alice of		adidata/Office	holder nama			Office courth		Office -	hold	
9	Complete ONLY if direct expenditure to benefit C/OH	car	ndidate/Office	пошег пате			Office sought		Office	neia	
	Date		Payee name								
	10/04/2024		Hyatt Lost F	Pines Resort							
Amount (\$) Payee address; City; State; Zip Code											
	\$180.00		575 Hyatt L	ost Pines Road							
	X Reimbursement from political contributions intended		Cedar Cree	k, TX 78612							
	PURPOSE		Category (S	ee Categories listed at t	he top of this sche	edule)	Description	=		exas. Complete Schedule T.	
	OF EXPENDITURE		Travel Out	of District			Check if Austin, TX, officeholder living expense				
							Hotel for Austin o	cauc	cus		
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office	held	
		_									
	Date		Payee name	nav Dagger							
	07/28/2024	_		ncy Denver Dov							
	Amount (\$)		Payee addre	•	State;	Zip Co	ode				
	\$828.00		650 15th St	ieel							
	Reimbursement from political contributions intended		Denver, CC	80202							
	PURPOSE OF			ee Categories listed at t	he top of this sche	edule)	Description	=		exas. Complete Schedule T.	
	EXPENDITURE		Travel Out	of District			Literal for ALEC :	_	eck if Austin, TX, officeh	ıvıuer iiving expense	
							Hotel for ALEC n	neel	ung		
	Complete ONLY if direct	Car	ndidate/Office	holder name			Office sought		Office	held	
	expenditure to benefit C/OH	-					Cilioc Sought				

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/N	Expense Wages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
			The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)			
	Sch: 6/9 Rpt: 32/37	Smithee, J	ohn T. (The Honorable)				00020664			
4	Date	5 Payee name	<u> </u>							
	08/27/2024	Next Level	Parking							
6	Amount (\$)	7 Payee addre	ess; City; State	e; Zip Co	ode					
	\$19.50	701 Brazos	s Street							
	Reimbursement from	Ste 500	Ste 500							
	X political contributions intended	Austin, TX	Austin, TX 78701							
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sc	hedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel Out	of District		[Ch	eck if Austin, TX, officeholder living expense			
					Parking expense	-Au	stin			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	eholder name		Office sought		Office held			
	C/OH									
	Date	Payee name	<u> </u>							
	07/04/2024	Public Stor								
	Amount (\$)		Payee address; City; State; Zip Code							
\$156.00 1033 E 41st Street										
	Reimbursement from									
	political contributions intended Austin, TX 78751									
	PURPOSE	Category (s	See Categories listed at the top of this sc	hedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			X Check if Austin, TX, officeholder living expense				
	EXPENDITORE				Austin storage re	ental	l			
	Complete ONLY if direct	Candidate/Office	eholder name		Office sought		Office held			
	expenditure to benefit C/OH									
		i								
	Date	Payee name								
	08/08/2024	Public Stor								
	Amount (\$)	Payee addre		e; Zip Co	oae					
	\$187.20	1033 E 419	St Street							
	Reimbursement from political contributions intended	Austin, TX	78751							
	PURPOSE	Category (S	See Categories listed at the top of this sc	hedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Ove	rhead/Rental Expense		<u> </u>	X Ch	eck if Austin, TX, officeholder living expense			
	LA LADITORL				Austin storage re	ental	I			
L										
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held			
\vdash										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Nages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)				
			The Instruction Guide explains	how to co	omplete this form.						
1	Total pages Schedule G:	2 FILER NAME	≣			3	Filer ID	(Ethics Commission Filers)			
	Sch: 7/9 Rpt: 33/37	Smithee, Jo	ohn T. (The Honorable)			(0002066	64			
4	Date	5 Payee name				1					
-	08/26/2024	Public Stora									
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	Code						
	\$156.00	1033 E 41s	t Street								
	Reimbursement from										
	X political contributions intended	Austin, TX	78751								
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this scl	nedule)	(b) Description	Che	eck if travel o	outside of Texas. Complete Schedule T.			
	OF	1	head/Rental Expense	,		X Che	eck if Austin,	, TX, officeholder living expense			
	EXPENDITURE	Cince over	nedd/Nental Expense		Austin storage re	- ental					
9	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held			
9	expenditure to benefit	Candidate/Office	noider name		Office Sought			Office field			
	C/OH										
	Date	Payee name									
	09/24/2024	Public Store									
				7: 0							
	Amount (\$)	Payee addre		e; Zip Co	ode						
	\$156.00	\$156.00 1033 E 41st Street									
	Reimbursement from political contributions										
	intended	Austin, TX	78751								
	PURPOSE	Category (s	ee Categories listed at the top of this scl	nedule)	Description	Che	eck if travel o	outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Over	head/Rental Expense		X Check if Austin, TX, officeholder living expense						
	LAFENDITORE				Austin storage re	ental					
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held			
	expenditure to benefit C/OH										
	C/OH										
	Date	Payee name									
	10/31/2024	Public Store	age								
	Amount (\$)	Payee addre	ss; City; State	; Zip Co	ode						
	\$156.00	1033 E 41s	•								
	Reimbursement from										
	x political contributions intended	Austin, TX	78751								
\vdash	PURPOSE		ee Categories listed at the top of this scl	nedule)	Description	Che	eck if travel of	outside of Texas. Complete Schedule T.			
	OF		head/Rental Expense	icuaic)		=		, TX, officeholder living expense			
	EXPENDITURE	Office Over	nead/Nental Expense		Austin storage re	_ ental					
					l sem corago re						
\vdash	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held			
	Complete ONLY if direct expenditure to benefit	Canuluate/Onice	HOIDEL HAIHE		Office sought			Onice field			
	C/OH										

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Cor Credit Card Payment			Gi ee Le	od/Beverage Expense it/Awards/Memorials E gal Services he Instruction Gui	xpense		kpense /ages/Contract Labor		Travel in Di Travel Out o OTHER (en		sted above)
1	Total pages Schedule C:	2	ER NAME				• • • • • • • • • • • • • • • • • • • •	9	Eilor ID	(Ethios Corre	niccion Filora)
1	Total pages Schedule G: Sch: 8/9 Rpt: 34/37	1		n T. (The Honor	rable)				Filer ID 0002066	•	nission Filers)
4	Date	5 Pay	yee name								
	11/26/2024	Puk	blic Storag	е							
6	Amount (\$)	7 Pay	Payee address; City; State; Zip Code								
	\$156.00	103	33 E 41st S	Street							
	X Reimbursement from political contributions intended	Aus	stin, TX 78	751							
8	PURPOSE	(a) Cat	tegory (See	Categories listed at the	top of this sche	edule)	(b) Description				Complete Schedule T.
	OF EXPENDITURE	Offi	ice Overhe	ad/Rental Expe	ense					, TX, officeholder liv	ving expense
							Austin storage r	rental			
9	Complete ONLY if direct	Candida	ate/Officehol	dor nama			Office sought			Office held	
9	Complete ONLY if direct expenditure to benefit C/OH	Candida	ate/Onicenol	uei name			Office sought			Onice neid	
	Date	Pay	yee name								
	12/20/2024	Pul	blic Storag	е							
Amount (\$) Payee address; City; State; Zip Code											
\$156.00 1033 E 41st Street											
	Reimbursement from political contributions intended Austin, TX 78751										
	PURPOSE	Cat	tegory (See	Categories listed at the	top of this sche	edule)	Description				Complete Schedule T.
	OF EXPENDITURE	Offi	ice Overhe	e Overhead/Rental Expense				, TX, officeholder liv	ving expense		
							Austin storage r	rental			
		Candida	andidate/Officeholder name Office soug				Office sought	nt Office held			
	expenditure to benefit C/OH										
	Date	Pay	yee name								
L	10/03/2024	Sou	uthwest Air	lines							
	Amount (\$)	Pay	yee address;	City;	State;	Zip Co	de				
	\$297.98	P. (O. Box 366	11							
	Reimbursement from political contributions intended	Dal	llas, TX 75	235							
	PURPOSE	Cat	tegory (See	Categories listed at the	top of this sche	edule)	Description	_			Complete Schedule T.
	OF EXPENDITURE	Tra	avel Out of	District			Ainten Abra Cit	_		, TX, officeholder liv	
							Airfare AMA-AU	15 to	attend A	Austin caucus	meeting
	Complete ONLY if direct expenditure to benefit C/OH	Candida	ate/Officehol	der name		•	Office sought			Office held	
		_				_					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 9/9 Rpt: 35/37 Smithee, John T. (The Honorable) 00020664 Date Payee name 12/05/2024 Southwest Airlines 6 Amount (\$) Payee address; City; State; Zip Code \$393.94 P. O. Box 36611 Reimbursement from political contributions Х intended Dallas, TX 75235 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Airfare AMA-AUS for GOP meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/18/2024 **United Airlines** Amount (\$) Payee address; City; State; Zip Code \$328.40 233 S Wacker Drive Reimbursement from political contributions Х Chicago, IL 60606 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel Out of District **EXPENDITURE** Airfare AMA to DEN for ALEC meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 36/37 2 FILER NAME Filer ID (Ethics Commission Filers) Smithee, John T. (The Honorable) 00020664 5 Name of person from whom amount is received 8 Amount (\$) Date 07/19/2024 \$118.00 Smithee, John 6 Address of person from whom amount is received; City; State; Zip Code Amarillo, TX 79109 Purpose for which amount is received Check if political contribution returned to filer Return of funds for double payment previously reported

TEXT ANNOTATION Sch: 1/1 Rpt: 37/37 FILER NAME Smithee, John T. (The Honorable) Schedule Filer ID (Ethics Commission Filers) 00020664

Information entered by filer as a memo:

Memo #1

Cover Sheet

On or about 1-7-25, I received my checking statement on my campaign account. For the first time, I discovered that Win Red had made a transfer to my campaign account on Dec. 16, 2024, in the amount of \$9,606.00. My understanding is that Win Red is a Republican organization that facilitates individuals who wish to contribute to Republican candidates. Win Red had not previously notified me of the contribution, or provided information regarding the contributor or the date. I immediately attempted on January 7 to contact Win Red by email and phone. In both cases I reached an automated system that told me that someone would get back to me in three business days. However, since that time I have received no response from Win Red.

I did not intend to keep the funds as a political contribution. I intend to return the funds to the rightful owner but do not have enough information to do that at this time

On January 10, I called the TEC Legal Department and talked with Seth. Seth's advice was to separate the funds received from Win Red into a separate bank account apart from my campaign account to hold in trust until the funds can be returned to their rightful owner. On January 13, 2025, I opened a separate account at Amarillo National Bank and temporarily deposited the funds into that account.

Because this amount was transferred into my account without my knowledge after the statutory contribution deadline, and because I do not now know the identity of the contributor, I am neither accepting the contribution nor itemizing it as a contribution on my COH, even though the \$9,606.00 is reflected as part of my campaign account balance on 12-31-25. The amount is no longer held in my campaign account.

Memo #2:

The contribution from Kickapoo Traditional Tribe of Texas was received during the reporting period, but was not deposited, and is not reflected in the balance of political funds maintained. The check was returned to the sender.

Memo #3

The credit card payment to Chase Card on July 11, 2024 was for charges incurred and shown during the last reporting period.