#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00057712 32 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Stephen Craig NAME Date Received **ELECTRONICALLY FILED** 01/10/2025 NICKNAME LAST **SUFFIX** Smith CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2121 N. Pearl Street MAILING Amount Receipt # **ADDRESS** Suite 210, Mail Box No. 1 Change of Address Dallas, TX 75201-7321 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Thomas M. NAME NICKNAME LAST **SUFFIX** Melsheimer STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 2121 N. Pearl Street **ADDRESS** Suite 900 (Residence or Business) Dallas, TX 75201 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 453-6401 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx| appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 6 District 5 Dallas Court Of Appeals, Justice

**GO TO PAGE 2** 

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM JC/OH COVER SHEET PG 2

2 of 32

13 C / OH NAME	Smith, Stephen Craig	(The Honorable)	14 Filer ID 00057712	(Ethics Commission Filers)						
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political These expenditures may have been mad I officeholders are required to report this	de without the candidate's or office	eholder's knowledge or						
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME								
_	GENERAL	COMMITTEE ADDRESS								
	SPECIFIC	COMMITTEE ADDRESS								
	Si Edillo									
COMMITTEE CAMPAIGN TREASURER NAME										
		COMMITTEE CAMPAIGN TREASURE	R ADDRESS							
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OT ES OF LOANS, OR CONTRIBUTIONS N		\$ 0.00						
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$ 0.00						
EXPENDITURE TOTALS	`	ZED POLITICAL EXPENDITURES	G. 23/110)	\$ 0.00						
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 37,433.05						
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS RIOD	OF THE LAST DAY OF THE	<b>\$</b> 67,113.84						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING L TING PERIOD	OANS AS OF THE LAST DAY	\$ 0.00						
17 AFFIDAVIT										
			nder penalty of perjury, that the accincludes all information required to ion Code.							
		Th	ne Honorable Stephen Craig S	mith						
		S	ignature of Candidate or Officehol	der						
AFFIX NO	ΓARY STAMP / SEAL AΒ	DVE								
		aid		day						
of	, 20, to co	ertify which, witness my hand and seal of	f office.							
Signature of office	er administering oath	Printed name of officer administeri	ng oath Title of office	r administering oath						

## SUBTOTALS - JC/OH

# FORM JC/OH COVER SHEET PG 3

	3 of 32								
18 FILER NAI Smith, St	ME ephen Craig (The Honorable)	<b>19</b> Filer ID 00057712	(Ethics Commission Filers)						
l	20 SCHEDULE SUBTOTALS  NAME OF SCHEDULE								
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$							
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$						
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 37,433.05						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$						
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	RETURNED	\$						

### SCHEDULE F1

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

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

Printing Expense Salaries/Wages/Contract Labor

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

	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: 1/29 Rpt: 4/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	12/10/2024	ABOTA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$475.00	2001 Bryan St., Suite 3000
		Dallas, TX 75201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Dues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to benefit C/Oi	
	Date	Payee name
	08/20/2024	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	P.O. Box 5014
		Carol Stream, IL 60197
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		iPad cellular service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	09/11/2024	Allgood Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.59	2934 Main Street
		Dallas, TX 75226
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>

### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/29 Rpt: 5/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	11/11/2024	Allgood Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.28	2934 Main Street
		Dallas, TX 75226
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Food and beverages with supporters
		1 ood and beverages with supporters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	<u> </u>	
	Date	Payee name
	08/19/2024	Amazon.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$180.00	Online entity
		Website, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gifts for office staff
		Cince for online stan
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	11/09/2024	Amazon.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.42	Online entity
L		Website, TX 75201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Office supplies/equipment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense 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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 3/29 Rpt: 6/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	11/12/2024	Amazon.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$77.73	Online entity
		Website, TX 75201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	09/12/2024	American Airlines
H	Amount (\$)	Payee address; City; State; Zip Code
	\$8,505.00	DFW Airport
	•	
		Dallas, TX 75261
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Purchase of airline tickets to ABOTA event in 2025
		T dichase of diffine flowers to ABO IA event in 2023
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	07/12/2024	Apple Online Store
H	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	Online
		Online, TX 99999
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
l		Subscription
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/29 Rpt: 7/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	08/13/2024	Apple Online Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$0.99	Online
		Online, TX 99999
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Subscription
		Subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Dete	
	Date	Payee name
	09/13/2024	Apple Online Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	Online
		Online, TX 99999
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Subscription
		Subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	<b>D</b> .	
	Date	Payee name
	10/13/2024	Apple Online Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.99	Online
		Online, TX 99999
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	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-

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 5/29 Rpt: 8/32	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	
	11/13/2024	Apple Online Store	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$0.99	Online	
		Online, TX 99999	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	The office of the control of the con	el outside of Texas. Complete Schedule T.
		Subscription	tin, TX, officeholder living expense
		Subscription	I
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	12/12/2024	Apple Online Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$0.99	Online	
		Online, TX 99999	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overneau/Nental Expense	el outside of Texas. Complete Schedule T.
		Subscription	tin, TX, officeholder living expense
		Subscription	I
	0 1: 0:11:4"		000
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/01/2024	Arts District Mansion	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.00	2101 Ross Ave.	
		Dallas, TX 75201	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
			Association event expense
		Dallas Dal A	Coolidion event expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/Ol	9	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 6/29 Rpt: 9/32	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712
4	Date 07/02/2024	5 Payee name Asurion
6	Amount (\$) \$27.05	7 Payee address; City; State; Zip Code 6121 Greenville Ave.
		Dallas, TX 75206
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Equipment repair services
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 11/06/2024	Payee name At Bistro
	Amount (\$) \$300.06	Payee address; City; State; Zip Code 8305 Westchester Dr.
		Dallas, TX 75225
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Food and beverages with supporters
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/19/2024	Payee name Carrousel Travel
	Amount (\$) \$14,000.00	Payee address; City; State; Zip Code 6625 Lyndale Ave. S
		Minneapolis, MN 55423
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Out of district travel for ABOTA International Meeting in New Zealand March 21-April 12, 2025
	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 Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 7/29 Rpt: 10/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	08/06/2024	Cheesecake Factory
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$47.89	7700 W. Northwest Hwy.
		Dallas, TX 75225
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/23/2024	Cheesecake Factory
	Amount (\$)	Payee address; City; State; Zip Code
	\$134.53	7700 W. Northwest Hwy.
		Dallas, TX 75225
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages with supporters
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Davies same
	12/12/2024	Payee name Chimalma Taco Bar
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.53	701 Commerce St.
		D. II TV 75004
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	nmittee	Gift/Awards/Memo	•		/ages	/Contract Labor		Travel Out o		rict category not listed above)
Ļ		-			n Guide explains	S HOW LO CO	mpie	te tills lottil.				
1	Total pages Schedule F1:	ı							3			(Ethics Commission Filers)
	Sch: 8/29 Rpt: 11/32	⊢		hen Craig (T	he Honorable	<del>!</del> )				0005771	L2	
4	Date	ı	Payee name									
L	07/30/2024		Cindi's NY I	Deli								
6	Amount (\$)	7	Payee addre	ss; City;	State	e; Zip Co	de					
	\$55.78		306 S. Hous	ston St.								
			Dallas, TX	75202								
<u>_</u>	DUDDOS-	├				1	4.5					
8	PURPOSE OF				d at the top of this so	chedule)	(b)	Description		d4 T	0	lete Celeadule T
	EXPENDITURE		⊢ood/Bever	age Expense	9			Check if travel				lete Schedule T.
								Food and bev				
								. 553 414 50	. 01	900 Will	. ၁५	-1-2.00.0
-	Complete ONLY if direct	<u> </u>	`andidata/O#	ceholder name		Office sou	abt			Office	o bol	Id
9	expenditure to benefit C/O		anuiuate/Offi	cenoluer name	=	Onice sou	gnt			OTHICE	e nei	iu
L		_										
	Date		Payee name									
	10/22/2024		Cindi's NY I	Deli								
	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de					
	\$42.61		306 S. Hou	ston St.								
			Dallas, TX	75202								
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	PURPOSE OF				d at the top of this so	chedule)	(n)	Description  Check if travel	Outei	de of Texas	Comn	lete Schedule T.
	EXPENDITURE		-nna\Revel	age Expense	<del>;</del>			Check if Austin				
								Food and be				
										-		•
$\vdash$	Complete ONLY if direct		andidate/Offi	ceholder name		Office sou	aht			Office	e hel	ld
	expenditure to benefit C/O				-		J			20		
_	Data											
	Date		Payee name	5 - I:								
	11/12/2024		Cindi's NY I	Jeli								
	Amount (\$)	ı	Payee addre	•	State	e; Zip Co	de					
	\$56.24		306 S. Hous	ston St.								
			Dallas, TX	75202								
	PURPOSE	(a)	Category (Se	ee Categories lister	d at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE			age Expense		-7		Check if travel				lete Schedule T.
	EVLENDIIOKE							Check if Austin				
								Food and bev	ver	ages with	sup	oporters
	Complete ONLY if direct		Candidate/Offi	ceholder name	9	Office sou	ght			Office	e hel	ld
	expenditure to benefit C/OI	Н										
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### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 9/29 Rpt: 12/32	Smith, Stephen Craig (The Honorable)  00057712
4	Date	5 Payee name
	10/08/2024	DBA Community Service Fund
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2101 Ross Ave.
		Dallas, TX 75201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct expenditure to benefit C/Oh	I Candidate/Officeholder name Office sought Office held
	experialitire to beliefit C/OI	
	Date	Payee name
	09/10/2024	Dallas Bar Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2101 Ross Ave.
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		DBA Bench Bar event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payes name
	08/15/2024	Payee name  Dream Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.18	2800 Routh Street
		Suite 170
		Dallas, TX 75201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
		Tool and solvinger man supported
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>

#### SCHEDULE F1

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		· ·	Office Overhead/Rental Expense od/Beverage Expense Polling Expense Printing Expense				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: 10/29 Rpt: 13/32		Smith, Stephen Craig (The Honorable) 00057712							
4	Date	5	Payee name				<u> </u>			
	12/05/2024		Dream Cafe							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$41.00		2800 Routh Street							
			Suite 170							
			Dallas, TX 75201							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Comp		
						Food and bev		officeholder living		
						rood and be	VCIO	ages with sup	oporters	
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name O	ffice sou	ght			Office hel	d	
_	Data	_								
	Date 07/12/2024		Payee name Florida Bar Association							
		_		7:- 0-						
	Amount (\$)			Zip Co	ae					
	\$175.00 1000 Legion Place									
		Suite 1625								
			Orlando, FL 32801							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		df-T O	lata Calcadada T	
	EXPENDITURE		Fees			<u></u>		de of Texas. Comp officeholder living		
						Florida Bar d				
	Complete ONLY if direct		Candidate/Officeholder name O	ffice sou	sought Office held					
	expenditure to benefit C/O	1								
	Date		Payee name							
L	07/12/2024	L	Graham, Rebekah							
	Amount (\$)			Zip Co	de					
	\$1,500.00		3413 Dublin Trail							
L		L	Mesquite, TX 75149							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Consulting Expense			ш		de of Texas. Comp		
	-					Assistance w		officeholder living		
						, iodiotarioc W		aata roportiiri	ອ	
	Complete ONLY if direct		Candidate/Officeholder name O	ffice sou	ght			Office hel	d	
	expenditure to benefit C/O				_					

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to co	•	ete this form.		
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)		
	Sch: 11/29 Rpt: 14/32	Smith, Stephen Craig (The Honorable)		00057712		
4	Date	5 Payee name		•		
	12/03/2024	Graham, Rebekah				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$500.00	3413 Dublin Trail				
		Mesquite, TX 75149				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T.		
	EXI ENDITORE			Check if Austin, TX, officeholder living expense		
				Consulting on data reporting		
_	Opening the ONLY if allowed	Overdistant/Office halden areas	14	Office held		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held		
	Date	Payee name				
	09/26/2024	HY-Mountain Transportation				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$45.31	214 Aspen Airport Business Ctr.				
		Aspen, CO 81311				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.		
	EXI ENDITORE			Check if Austin, TX, officeholder living expense		
		Taxi service in Aspen, CO for travel to officiate wedding				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI		grit	Office field		
	Data					
	Date	Payee name				
	09/23/2024	Hotel del Coronado				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$2,315.00	1500 Orange Ave.				
		Coronado, CA 92118				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense  Hotel for out of district travel to officiate wedding		
				Tioto, for our or district traver to officiate weduling		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/OI		gril	Office field		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/29 Rpt: 15/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	07/02/2024	Hudson House
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$170.35	4040 Abrams Rd.
		Dallas, TX 75214
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food and beverages with supporters.
		r ood and beverages with supporters.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	08/13/2024	Hudson House
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.36	4040 Abrams Rd.
	Ψ01.00	To To 7 Islamo Tal
		Dallas, TX 75214
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/19/2024	Hudson House
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.58	4040 Abrams Rd.
		Dallas, TX 75214
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
_		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	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: 13/29 Rpt: 16/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	09/24/2024	Hudson House
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$86.53	4040 Abrams Rd.
		Dallas, TX 75214
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
_	2	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	10/08/2024	Hudson House
	Amount (\$)	Payee address; City; State; Zip Code
	\$125.68	4040 Abrams Rd.
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Food and beverages with supporters
		1 ood and beverages with supporters
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	09/10/2024	Jesuit College Prep School
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	12345 Inwood Rd.
	Ψ1,500.00	12043 IIIWOOU IKU.
		Dallas, TX 75244
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Contributions / Donations Made By  Contributions / Donations Made By
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Contributions/Donations Made By Check if ravel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Donation to Jesuit
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>

#### SCHEDULE F1

Advertising Expense Event I
Accounting/Banking Fees
Consulting Expense Food/E
Contributions/ Donations Made By - Gift/Aw

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
_					
1	Total pages Schedule F1:				
	Sch: 14/29 Rpt: 17/32	Smith, Stephen Craig (The Honorable) 00057712			
4	Date	5 Payee name			
	08/28/2024	Kountry Korner			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$37.78	2006 S. Washington St.			
		Kaufman, TX 75142			
_	DUDDOGE	1			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description			
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Travel in district expense			
		Traver in district expense			
_	Operation ONE VIII II	On didn't 10 ff a halden game			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	11/05/2024	Medical City Gifts			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$66.02	7777 Forest Lane			
		Dallas, TX 75230			
	DUDDOCE	1			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description			
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Flowers for supporter			
		Therefore to Cappenter			
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
L					
	Date	Payee name			
	11/06/2024	Medical City Gifts			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$19.47	7777 Forest Lane			
		Dallas, TX 75230			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Gift/Awards/Memorials Expense			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Flowers for supporter			
L					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
┰	Total manua Cabadula E1.	2 Filey ID (Fibigo Commission Fileys)			
_	Total pages Schedule F1: Sch: 15/29 Rpt: 18/32	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712			
4	Date	5 Payee name			
	08/19/2024	Meso Maya			
6	Amount (\$) \$90.50	7 Payee address; City; State; Zip Code 1611 McKinney Ave.			
		Dallas, TX 75202			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Food and beverages with supporters			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	07/22/2024	Mockingbird Florist			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$168.84	5606 E. Mockingbird Lane			
		Dallas, TX 75206			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxes, Complete Schedule T			
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Flowers for staff			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	08/30/2024	Non-Chase ATM Withdraw			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$83.00	Unknown			
		Aspen, CO 99999			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		ATM cash withdrawal for travel out of district			
		expenses in Aspen, CO to officiate wedding			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Cahadula F1:	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission Filers)
_	Total pages Schedule F1: Sch: 16/29 Rpt: 19/32	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	
	08/30/2024	Non-Chase ATM Withdraw	
6	Amount (\$) \$3.00	7 Payee address; City; State; Zip Code unknown  Aspen, CO 99999	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		side of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, To	X, officeholder living expense
		ATM fee for case	sh withdrawal
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/25/2024	Renny's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$75.00	11661 Preston Rd., #153	
	Ψ10.00	11001 ( 100ton ( tai,  // 100	
		Dallas, TX 75230	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Develage Expense	side of Texas. Complete Schedule T.
			x, officeholder living expense rages with supporters
		Food and beve	rages with supporters
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/25/2024	Slow Bone BBQ	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$31.43	2234 Irving Blvd.	
		· ·	
		Dallas, TX 75207	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Deverage Expense	side of Texas. Complete Schedule T.
		ı	X, officeholder living expense
		Food and beve	rages with supporters
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experience to beliefit C/OI	·	
_			

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total names Schodule F1:		_		
	Total pages Schedule F1: Sch: 17/29 Rpt: 20/32	Smith, Stephen Craig (The Honorable)  Smith, Stephen Craig (The Honorable)			
4	Date		_		
🕇		The state of the s			
	07/29/2024	Smith, Craig			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$90.00	6208 Waggoner Dr.			
		Dallas, TX 75230			
<u>_</u>	DUDDOS-		_		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Reimbursement for mileage for in district travel			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
L	expenditure to benefit C/OI				
	Date	Payee name	_		
	08/21/2024	Smith, Craig			
	Amount (\$)	Payee address; City; State; Zip Code	_		
	\$368.00	6208 Waggoner Dr.			
	φουο.00	0200 Waggorier Dr.			
L		Dallas, TX 75230			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.			
	TVI FIADLIONE	Check if Austin, TX, officeholder living expense			
		Travel out of district to San Antonio for conference			
L					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	H			
	Date	Payee name	=		
	09/16/2024	Smith, Craig			
_	Amount (\$)	Payee address; City; State; Zip Code	_		
	\$280.00	6208 Waggoner Dr.			
		Dallas, TX 75230			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EVDENDITUDE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Reimbursement for mileage and out of district trave	١		
		to Austin conference			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	H			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense

Food/Beverage Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/29 Rpt: 21/32 Smith, Stephen Craig (The Honorable) 00057712 4 Date Payee name 11/24/2024 Smith, Craig 6 Amount (\$) Payee address; State; Zip Code \$288.00 6208 Waggoner Dr. Dallas, TX 75230 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Mileage expense for out of district travel to Austin for memorial service in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/03/2024 Smith, Craig Amount (\$) Payee address; City; State; Zip Code \$270.00 6208 Waggoner Dr. Dallas, TX 75230 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Mileage to Austin for Judicial Reception Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/02/2024 Starlink Internet Amount (\$) Payee address: City; State; Zip Code \$120.00 1 Rocket Rd. Hawthorne, CA 90250 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Internet service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services  The Instruction Guide	Salaries/Wa	ages	Contract Labor		OTHER (enter a	category not listed abo	ve)
┡	Total pages Cabadula F1:					2	Filer ID	(Ethics Commission	n Filore)
ľ	Total pages Schedule F1: Sch: 19/29 Rpt: 22/32	Smith, Stephen Craig (The Ho	norable)			3	Filer ID 00057712	(Ethics Commission	iii Fileis)
┡	·								
4	Date 08/01/2024	Payee name Starlink Internet							
L									
6	Amount (\$) \$120.00	<ul><li>Payee address; City;</li><li>1 Rocket Rd.</li></ul>	State; Zip Coo	de					
	Ψ120.00	i Nocket Na.							
		Hawthorne, CA 90250							
8	PURPOSE	a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
l	OF EXPENDITURE	Office Overhead/Rental Expen	se		<b>=</b>		de of Texas. Com		
l					Internet servi		officeholder living	expense	
					internet servi	00			
9	Complete ONLY if direct	Candidate/Officeholder name	Office soug	ht			Office he	eld	
	expenditure to benefit C/OI								
l	Date	Payee name							
	11/07/2024	Stoneleigh P							
	Amount (\$)	Payee address; City;	State; Zip Coo	le					
l	\$90.10	2926 Maple Ave., #100							
		Dallas, TX 75201							
	PURPOSE	a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
l	OF EXPENDITURE	Food/Beverage Expense			<b>-</b>		de of Texas. Com		
							officeholder living		
					Food and bev	/ei	ages with su	pporters	
┝	Complete ONLY if direct	Candidate/Officeholder name	Office soug	ıht			Office he	eld	
	expenditure to benefit C/O			,					
⊨	Date	Payee name							
	12/16/2024	Strange, Jeanette (Ms.)							
L	Amount (\$)	Payee address; City;	State; Zip Cod	10					
	\$250.00	600 Commerce St., Suite 200	State, Zip Cot	ıc					
l	Ψ230.00	ooo commerce St., Suite 200							
		Dallas, TX 75202							
	PURPOSE	a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
l	OF EXPENDITURE	Gift/Awards/Memorials Expens					de of Texas. Com		
l	LAFENDITORE				ш		officeholder living	expense	
					Christmas gif	Ĺ			
$\vdash$	Operation Chilly "	On a distant 1000 1 1 1 1	0"	.1			0.000	14	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office soug	ınt			Office he	eia	
L									
l									

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mei

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
_					
1	Total pages Schedule F1: Sch: 20/29 Rpt: 23/32	2 FILER NAME Smith, Stephen Craig (The Honorable) 3 Filer ID (Ethics Commission Filers) 00057712			
4	Date	5 Payee name			
ľ	07/10/2024	The Mercury			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$113.26	11909 Preston Road			
		Dallas, TX 75230			
Ļ					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description			
	EXPENDITURE	Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
		Food and beverages with supporters			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
١	expenditure to benefit C/OI				
_					
	Date	Payee name			
	08/19/2024	The Mercury			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$95.00	11909 Preston Road			
		Dallas, TX 75230			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Food and beverages with supporters			
	0 1: 0.11.7.7.1.				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	<u> </u>				
	Date	Payee name			
	08/27/2024	The Mercury			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$114.33	11909 Preston Road			
		Dallas, TX 75230			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	EXI ENDITORE	Check if Austin, TX, officeholder living expense			
		Food and beverages with supporters			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experiulture to beliefit C/OI	1			

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/29 Rpt: 24/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	12/18/2024	The Mercury
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.54	11909 Preston Road
		Dallas, TX 75230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Food and beverages with supporters
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/12/2024	Thomas Jefferson High School
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	4001 Walnut Hill Lane
	\$1,000.00	4001 Walliut Hill Latie
		Dallas, TX 75229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation to TJ High School fund
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experience to benefit eyer	
	Date	Payee name
	11/15/2024	Tony Grimes Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	P.O. Box 166176
		Irving, TX 75016
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Photography charges
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
l		

#### 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 Committe

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/29 Rpt: 25/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	12/12/2024	Total Wine & More
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$348.00	9350 N. Central Expressway
		Dallas, TX 75230
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Food and beverages for ABOTA lawyers event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	08/05/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.53	1801 N. Lamar St., #130
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Uber for travel in district
		Ober for traver in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/18/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.97	1801 N. Lamar St., #130
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAPENDITORE	Check if Austin, TX, officeholder living expense
		Uber for travel in district
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

### SCHEDULE F1

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

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

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

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

	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: 23/29 Rpt: 26/32	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	•
	08/19/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.57	1801 N. Lamar St., #130	
		Dallas, TX 75202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	escription
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		Check if Austin, TX, officeholder living expense
		0	lber for travel in district
Ļ	Opening ONLY & Street	Outstilled to 10 ff and halden manner	Office health
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/18/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3.00	1801 N. Lamar St., #130	
		Dallas, TX 75202	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) D	escription
	OF EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense    Deer for travel in district
			be for traver in district
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	9	Office Hold
-	Data	D	
	Date 08/17/2024	Payee name Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$27.88	1801 N. Lamar St., #130	
		- "	
		Dallas, TX 75202	
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	Description
	EXPENDITURE	Travel In District	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Der for travel in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	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: 24/29 Rpt: 27/32	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	•
	08/29/2024	Uber	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$55.43	1801 N. Lamar St., #130	
		Dallas, TX 75202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District	avel outside of Texas. Complete Schedule T.
	LAFLINDITORL		ustin, TX, officeholder living expense
		Ober for tr	avel in district
_	Complete ONLY if direct	Candidata/Officahaldar nama Offica acuaht	Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
_			
	Date	Payee name	
	09/03/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$32.90	1801 N. Lamar St., #130	
		Dallas, TX 75202	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Traver in District	wel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense
			avel in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	· ·	
	Date	Payee name	
	09/03/2024	Uber	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.02	1801 N. Lamar St., #130	
		Dallas, TX 75202	
	PURPOSE		
	OF	, <u> </u>	avel outside of Texas. Complete Schedule T.
	EXPENDITURE		ustin, TX, officeholder living expense
		Uber for tr	avel in district
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefft C/O	1	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Political Committ Credit Card Payment				Legal Services Salaries/Wages/Contract Labor					OTHER (enter a category not listed above)			
	Credit Card Payment			The Instruction G	uide explains h	ow to co	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Com	nission Filers)
	Sch: 25/29 Rpt: 28/32		Smith, Stepl	nen Craig (The	Honorable)					00057712		
4	Date	5	Payee name									
	09/23/2024		Uber									
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Co	de					
	\$104.05	ı	•	nar St., #130	,	_,,						
	,											
			Dallas, TX 7	E202								
_		⊢				-						
8	PURPOSE OF			e Categories listed at	the top of this sched	dule)	(b)	Description	ata:	do of Toyoo Com	nplete Schedule T	
	EXPENDITURE		Travel In Dis	strict				느		officeholder livin		•
								Uber for trave				
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date	Π	Payee name									
	09/21/2024	ı	Uber									
	Amount (\$)	├	Payee addres	ss; City;	State:	Zip Co	de					
	\$80.46	ı	•	nar St., #130	Otato,	Z.p 00	uo					
	Ψ00.40		1001 14. Lan	nai 6t., 1/166								
			Dallas, TX 7	E202								
	DUDDOOF	_				1	(I-)					
	PURPOSE OF			e Categories listed at	the top of this sched	dule)	(D)	Description  Check if travel (	nutei	de of Tevas Com	nplete Schedule T	
	EXPENDITURE		Travel In Dis	SUICU				<b></b>		officeholder living		•
								Uber for trave	el ir	district		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Of	fice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	09/26/2024		Uber									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$12.06		1801 N. Lan	nar St., #130		·						
			Dallas, TX 7	5202								
	PURPOSE	-		e Categories listed at			(h)	Description				
	OF		Travel In Dis		tne top of this sched	dule)	()		outsi	de of Texas. Con	plete Schedule T	
	EXPENDITURE		Travol III Di	, i.i.o.				Check if Austin,	, TX,	officeholder living	g expense	
								Uber for in dis	stri	ct travel		
	Complete ONLY if direct		Candidate/Office	eholder name	Of	fice sou	ght			Office h	eld	
	expenditure to benefit C/OI	н										

#### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/29 Rpt: 29/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	09/26/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.74	1801 N. Lamar St., #130
		Dallas, TX 75202
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Uber for travel in district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	09/29/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.02	1801 N. Lamar St., #130
		Dallas, TX 75202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the real outside of Taylor Complete Schedule T
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Uber for travel in district.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/O	
	Date	Payee name
	10/12/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.44	1801 N. Lamar St., #130
		Dellas TV 75202
		Dallas, TX 75202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Uber for in district travel
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/29 Rpt: 30/32	Smith, Stephen Craig (The Honorable) 00057712
4	Date	5 Payee name
	10/13/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.31	1801 N. Lamar St., #130
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Uber for travel in district
		Oper for traver in district
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/17/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.09	1801 N. Lamar St., #130
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Uber for travel in district
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit Great	
	Date	Payee name
	11/17/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.52	1801 N. Lamar St., #130
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Uber for travel in district
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	Ü	lete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 28/29 Rpt: 31/32	Smith, Stephen Craig (The Honorable)		00057712		
4	Date	5 Payee name		·		
	11/17/2024	Uber				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$5.70	1801 N. Lamar St., #130				
		Dallas, TX 75202				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITORE			Check if Austin, TX, officeholder living expense		
				Uber for travel in district		
_	Occupated ONLY if alice at	Out it date (Office held our own	4	Office held		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	gnt	Office held		
_						
	Date	Payee name				
	11/17/2024	Uber				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$6.01	1801 N. Lamar St., #130				
		Dallas, TX 75202				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense  Uber for travel in district		
				Ober for traver in district		
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/OH					
	Data	D				
	Date 10/08/2024	Payee name W Hotel Aspen				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$405.59	550 S. Spring St.				
		Aspen, CO 81611				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
				Hotel in Aspen, CO for travel out of district to officiate		
				wedding		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/O		-			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 29/29 Rpt: 32/32	Smith, Stephen Craig (The Honorable)	00057712
4	Date	5 Payee name	
	08/19/2024	Warwick Melrose Hotel	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$130.00	3015 Oak Lawn	
		Dallas, TX 75219	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	outside of Texas. Complete Schedule T.
	-	l	, TX, officeholder living expense verages with supporters
		T ood and se	verages with supporters
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O	H	Sinde Hold
_	Date	Payee name	
	10/01/2024	eBay	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.85	Online company	
	,		
		San Jose, CA 99999	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overnead/Nertial Expense   I	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Office equipm	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	