

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |                                   |   |   |        |      |
|---|--|-----------------------------------|---|---|--------|------|
| The C/OH Instruction Guide explains how to complete this form.  |  |                                   | 1 Filer ID<br>(Ethics Commission Filers)<br>00020664  | 2 Total pages filed:<br>25                          |        |      |
| 3 CANDIDATE /<br>OFFICEHOLDER<br>NAME   | MS / MRS / MR  | FIRST<br>The Honorable<br>John T. | MI  | OFFICE USE ONLY                                     |        |      |
|   | NICKNAME   | LAST<br>Smithee                   | SUFFIX  | Date Received<br>ELECTRONICALLY FILED<br>01/15/2026 |        |      |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY;<br>2808 Parker<br><br>Amarillo, TX 79109  |                                   |   | Date Hand-delivered or Date Postmarked              |        |      |
|   |  |                                   |   | Receipt #   | Amount |      |
|   |  |                                   |   | Date Processed                                      |        |      |
|   |  |                                   |   | Date Imaged   |        |      |
| 5 CAMPAIGN<br>TREASURER<br>NAME   | MS / MRS / MR  | FIRST<br>Mr.                      | MI  |   |        |      |
|   | NICKNAME   | LAST<br>Standefer                 | SUFFIX  |   |        |      |
| 6 CAMPAIGN<br>TREASURER<br>ADDRESS<br><br>(Residence or Business)                                     | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>4805 Spartanburg<br><br>Amarillo, TX 79119  |                                   |   |   |        |      |
| 7 CAMPAIGN<br>TREASURER<br>PHONE  | AREA CODE      PHONE NUMBER      EXTENSION<br>(806) 359-8623   |                                   |   |   |        |      |
| 8 REPORT<br>TYPE  | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) |                                   |   |   |        |      |
| 9 PERIOD<br>COVERED   | Month<br>07/01/2025  | Day                               | Year  | Month<br>12/31/2025                                 | Day    | Year |
| 10 ELECTION   | ELECTION DATE<br>Month Day Year  |                                   | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |   |        |      |
| 11 OFFICE   | OFFICE HELD (if any)<br>State Representative District 86   |                                   |   | 12 OFFICE SOUGHT (if known)<br>None District 86     |        |      |

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 25

|  |  |                                      |   |
|--|--|--------------------------------------|---|
| 13 C / OH NAME                                 | Smithee, John T. (The Honorable)   |                                      | 14 Filer ID<br>(Ethics Commission Filers)<br>00020664 |
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S) | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |                                      |   |
| <input type="checkbox"/> Additional Pages      | COMMITTEE TYPE<br><input type="checkbox"/> GENERAL<br><input type="checkbox"/> SPECIFIC  | COMMITTEE NAME                       |   |
|  |  | COMMITTEE ADDRESS                    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER NAME    |   |
|  |  | COMMITTEE CAMPAIGN TREASURER ADDRESS |   |
| 16 CONTRIBUTION<br>TOTALS                      | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS,<br>OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)   |                                      | \$ 0.00   |
|  | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   |                                      | \$ 0.00   |
| EXPENDITURE<br>TOTALS                          | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   |                                      | \$ 0.00   |
|  | 4. <b>TOTAL POLITICAL EXPENDITURES</b>   |                                      | \$ 35,610.43  |
| CONTRIBUTION<br>BALANCE                        | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE<br>REPORTING PERIOD  |                                      | \$ 74,882.90  |
| OUTSTANDING<br>LOAN TOTALS                     | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY<br>OF THE REPORTING PERIOD   |                                      | \$ 0.00   |

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable John T. Smithee

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering

\_\_\_\_\_  
Printed name of officer administering

\_\_\_\_\_  
Title of officer administering oath

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

3 of 25

|  |  |
|--|--|
| <b>18</b> FILER NAME   | <b>19</b> Filer ID<br>(Ethics Commission Filers)<br>00020664 |
| Smithee, John T. (The Honorable)   |  |
| <b>20</b> SCHEDULE SUBTOTALS   |  |
| NAME OF SCHEDULE   |  |
| 1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  |  |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                            |  |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  |  |
| 4. <input type="checkbox"/> SCHEDULE E: LOANS  |  |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS            |  |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |  |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                      |  |
| 8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                               |  |
| 9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                      |  |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                |  |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   |  |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED<br>TO FILER |  |
| SUBTOTAL AMOUNT  |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$ 26,204.91   |  |
| \$   |  |
| \$   |  |
| \$   |  |
| \$ 4,702.76  |  |
| \$   |  |
| \$ 4,702.76  |  |
| \$   |  |
| \$   |  |
| \$   |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 1/7 Rpt: 4/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 Date<br>12/26/2025                                  | 5 Payee name<br>Amarillo Chamber of Commerce  |   |
| 6 Amount (\$)<br>\$200.00                             | 7 Payee address; City; State; Zip Code<br>P. O. Box 9480<br><br>Amarillo, TX 79105      |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Fees                | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Dues and meetings      |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>07/28/2025                                    | Payee name<br>Chase-Cardmember Service  |   |
| Amount (\$)<br>\$498.46                               | Payee address; City; State; Zip Code<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>08/15/2025                                    | Payee name<br>Chase-Cardmember Service  |   |
| Amount (\$)<br>\$568.00                               | Payee address; City; State; Zip Code<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
|   |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 2/7 Rpt: 5/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 Date<br>08/18/2025                                  | 5 Payee name<br>Chase-Cardmember Service  |   |
| 6 Amount (\$)<br>\$54.21                              | 7 Payee address; City;<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014                |   |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>09/10/2025                                    | Payee name<br>Chase-Cardmember Service  |   |
| Amount (\$)<br>\$1,178.88                             | Payee address; City;<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |
| Date<br>11/21/2025                                    | Payee name<br>Chase-Cardmember Service  |   |
| Amount (\$)<br>\$1,430.38                             | Payee address; City;<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014                  |   |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 3/7 Rpt: 6/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 Date<br>12/31/2025                                  | 5 Payee name<br>Chase-Cardmember Service   |  |
| 6 Amount (\$)<br>\$972.83                             | 7 Payee address; City;<br>P. O. Box 94014<br><br>Palatine, IL 60094-4014                           | State; Zip Code  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Credit Card Payment            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Payment of credit card                |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>07/24/2025                                    | Payee name<br>City of Austin Utilities   |  |
| Amount (\$)<br>\$200.00                               | Payee address; City;<br>P. O. Box 2267<br><br>Austin, TX 78783                                     | State; Zip Code  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment utilities |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>09/26/2025                                    | Payee name<br>City of Austin Utilities   |  |
| Amount (\$)<br>\$18.21                                | Payee address; City;<br>P. O. Box 2267<br><br>Austin, TX 78783                                     | State; Zip Code  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment utilities |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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:<br>Sch: 4/7 Rpt: 7/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 Date<br>10/28/2025                                  | 5 Payee name<br>City of Austin Utilities   |  |
| 6 Amount (\$)<br>\$36.38                              | 7 Payee address; City; State; Zip Code<br>P. O. Box 2267<br><br>Austin, TX 78783                   |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment utilities |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>11/28/2025                                    | Payee name<br>City of Austin Utilities   |  |
| Amount (\$)<br>\$37.56                                | Payee address; City; State; Zip Code<br>P. O. Box 2267<br><br>Austin, TX 78783                     |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment utilities |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |
| Date<br>10/31/2025                                    | Payee name<br>Double U Marketing & Communications  |  |
| Amount (\$)<br>\$25.00                                | Payee address; City; State; Zip Code<br>1608 S. Washington<br><br>Amarillo, TX 79102               |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hosting and monitoring of website     |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought   | Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 5/7 Rpt: 8/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 Date<br>10/08/2025                                  | 5 Payee name<br>Texas House Republican Caucus   |  |
| 6 Amount (\$)<br>\$1,000.00                           | 7 Payee address; City; State; Zip Code<br>P. O. Box 2910<br><br>Austin, TX 78768                      |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Fees                              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Caucus dues   |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Toorish, Samantha  | Office sought<br>Office held   |
| Date<br>07/02/2025                                    | Payee name<br>Toorish, Samantha   |  |
| Amount (\$)<br>\$2,855.00                             | Payee address; City; State; Zip Code<br><br>REDACTED PER 254.0401, ELEC. CODE<br><br>Austin, TX 78701 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense    | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental (paid through Venmo) |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Toorish, Samantha  | Office sought<br>Office held   |
| Date<br>09/02/2025                                    | Payee name<br>Toorish, Samantha   |  |
| Amount (\$)<br>\$2,855.00                             | Payee address; City; State; Zip Code<br><br>REDACTED PER 254.0401, ELEC. CODE<br><br>Austin, TX 78701 |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense    | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental (paid through Venmo) |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Toorish, Samantha  | Office sought<br>Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 6/7 Rpt: 9/25      | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |             |
| 4 Date<br>10/01/2025                                  | 5 Payee name<br>Toorish, Samantha  |  |             |
| 6 Amount (\$)<br>\$2,855.00                           | 7 Payee address; City;<br>Austin, TX 78701<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b>         | State; Zip Code  |             |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental                      |             |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Toorish, Samantha   | Office sought<br>Austin, TX 78701  | Office held |
| Date<br>11/04/2025                                    | Payee name<br>Toorish, Samantha  |  |             |
| Amount (\$)<br>\$2,855.00                             | Payee address; City;<br>Austin, TX 78701<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b>           | State; Zip Code  |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental (paid through Venmo) |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Toorish, Samantha   | Office sought<br>Austin, TX 78701  | Office held |
| Date<br>12/02/2025                                    | Payee name<br>Toorish, Samantha  |  |             |
| Amount (\$)<br>\$2,855.00                             | Payee address; City;<br>Austin, TX 78701<br><br><b>REDACTED PER 254.0401, ELEC. CODE</b>           | State; Zip Code  |             |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental (paid through Venmo) |             |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Toorish, Samantha   | Office sought<br>Austin, TX 78701  | Office held |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment   | 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:<br>Sch: 7/7 Rpt: 10/25     | 2 FILER NAME<br>Smithee, John T. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 Date<br>12/31/2025                                  | 5 Payee name<br>Toorish, Samantha   |  |
| 6 Amount (\$)<br>\$2,855.00                           | 7 Payee address; City; State; Zip Code<br><br>REDACTED PER 254.0401, ELEC. CODE<br><br>Austin, TX 78701 |  |
| 8 PURPOSE OF EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense      | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental (paid through Venmo) |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name<br>Office sought  | Office held  |
| Date<br>08/04/2025                                    | Payee name<br>Toorish, Samantha   |  |
| Amount (\$)<br>\$2,855.00                             | Payee address; City; State; Zip Code<br><br>REDACTED PER 254.0401, ELEC. CODE<br><br>Austin, TX 78701   |  |
| PURPOSE OF EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense      | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment rental                      |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name<br>Office sought  | Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|   | 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 F4:<br>Sch: 1/7 Rpt: 11/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)   |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664                                      |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>Chase Card  |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                      |
| 6 PAYMENT   | (a) Amount Charged<br>\$335.83   | (b) Date of Charge<br>07/03/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/25/2025                                      |
| 7 PAYEE   | (a) Payee name<br>Cort Furniture Rental  |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br>Austin, TX 78758 |
| 8 PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  |                                  | (b) Description<br>Austin apartment furniture rental                                   |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |                                  |  |
| PAYMENT   | (a) Amount Charged<br>\$54.21  | (b) Date of Charge<br>08/08/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/08/2025                                      |
| PAYEE   | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504       |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District  |                                  | (b) Description<br>Austin rental car   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |                                  |  |
| PAYMENT   | (a) Amount Charged<br>\$57.39  | (b) Date of Charge<br>10/22/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025                                      |
| PAYEE   | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504       |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District  |                                  | (b) Description<br>Austin rental car   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |                                  |  |
|   | Candidate/Officeholder name  |                                  | Office sought  |
|   |  |                                  | Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|   | 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 F4:<br>Sch: 2/7 Rpt: 12/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$  |
| 6 PAYMENT   | (a) Amount Charged<br>\$291.48  | (b) Date of Charge<br>10/25/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025  |
| 7 PAYEE   | (a) Payee name<br>Southwest Airlines  |                                  | (b) Payee address; City, State, Zip Code<br>P. O. Box 36611<br><br>Dallas, TX 75235  |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District         |                                  | (b) Description<br>Airfare Dallas to Amarillo  |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$335.83  | (b) Date of Charge<br>09/03/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/09/2025  |
| PAYEE   | (a) Payee name<br>Cort Furniture Rental   |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758   |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                  | (b) Description<br>Austin furniture rental   |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$335.83  | (b) Date of Charge<br>08/01/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/08/2025  |
| PAYEE   | (a) Payee name<br>Cort Furniture Rental   |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758   |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                  | (b) Description<br>Austin apartment furniture rental   |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## 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

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

The Instruction Guide explains how to complete this form.

|  |  |                                  |   |
|--|--|----------------------------------|---|
| 1 Total pages Schedule F4:<br>Sch: 3/7 Rpt: 13/25            | 2 FILER NAME<br>Smithee, John T. (The Honorable)   |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 CREDIT CARD ISSUER   | Name of financial institution<br>see previous  |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$   |
| 6 PAYMENT  | (a) Amount Charged<br>\$177.96   | (b) Date of Charge<br>08/05/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/08/2025   |
| 7 PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT  | (a) Amount Charged<br>\$54.21  | (b) Date of Charge<br>08/12/2025 | (c) Date(s) Credit Card Issuer Paid<br>08/14/2025   |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT  | (a) Amount Charged<br>\$286.38   | (b) Date of Charge<br>08/29/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/09/2025   |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin car rental<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## 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

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

The Instruction Guide explains how to complete this form.

|   |   |                                  |  |
|---|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 4/7 Rpt: 14/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 CREDIT CARD ISSUER  | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$  |
| 6 PAYMENT   | (a) Amount Charged<br>\$252.66  | (b) Date of Charge<br>08/22/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/09/2025  |
| 7 PAYEE   | (a) Payee name<br>Avis Rent Car   |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504   |
| 8 PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District         |                                  | (b) Description<br>Austin car rental   |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$335.83  | (b) Date of Charge<br>11/03/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025  |
| PAYEE   | (a) Payee name<br>Cort Furniture Rental   |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758   |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                  | (b) Description<br>Austin apartment furniture rental   |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |
| PAYMENT   | (a) Amount Charged<br>\$465.00  | (b) Date of Charge<br>11/26/2025 | (c) Date(s) Credit Card Issuer Paid<br>12/31/2025  |
| PAYEE   | (a) Payee name<br>Capitol Gift Shop   |                                  | (b) Payee address; City, State, Zip Code<br>Capitol Building<br><br>Austin, TX 78701   |
| PURPOSE OF EXPENDITURE<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political   | (a) Category<br>(See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense  |                                  | (b) Description<br>Christmas ornaments for constituents  |
|   |   |                                  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name   |                                  | Office sought      Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|   | 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 F4:<br>Sch: 5/7 Rpt: 15/25            | 2 FILER NAME<br>Smithee, John T. (The Honorable)   |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 CREDIT CARD ISSUER   | Name of financial institution<br>see previous  |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$   |
| 6 PAYMENT  | (a) Amount Charged<br>\$54.21  | (b) Date of Charge<br>08/17/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/09/2025   |
| 7 PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense           |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT  | (a) Amount Charged<br>\$161.67   | (b) Date of Charge<br>10/25/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025   |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin to Dallas rental car<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held  |
| PAYMENT  | (a) Amount Charged<br>\$249.80   | (b) Date of Charge<br>09/04/2025 | (c) Date(s) Credit Card Issuer Paid<br>09/09/2025   |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br>Parsippany, NJ 07504  |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin car rental<br><br>(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held  |

# EXPENDITURES MADE BY CREDIT CARD

## 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

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

The Instruction Guide explains how to complete this form.

|  |   |                                  |  |
|--|---|----------------------------------|--|
| 1 Total pages Schedule F4:<br>Sch: 6/7 Rpt: 16/25  | 2 FILER NAME<br>Smithee, John T. (The Honorable)  |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664                                      |
| 4 CREDIT CARD ISSUER   | Name of financial institution<br>see previous   |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                      |
| 6 PAYMENT  | (a) Amount Charged<br>\$335.83  | (b) Date of Charge<br>10/03/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025                                      |
| 7 PAYEE  | (a) Payee name<br>Cort Furniture Rental   |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br>Austin, TX 78758 |
| 8 PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political  | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                  | (b) Description<br>Austin apartment furniture rental                                   |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |
| PAYMENT  | (a) Amount Charged<br>\$335.83  | (b) Date of Charge<br>12/31/2025 | (c) Date(s) Credit Card Issuer Paid<br>12/31/2025                                      |
| PAYEE  | (a) Payee name<br>Cort Furniture Rental   |                                  | (b) Payee address; City, State, Zip Code<br>8940 Research Blvd. #C<br>Austin, TX 78758 |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political  | (a) Category<br>(See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                  | (b) Description<br>Austin apartment furniture rental                                   |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |
| PAYMENT  | (a) Amount Charged<br>\$248.18  | (b) Date of Charge<br>10/22/2025 | (c) Date(s) Credit Card Issuer Paid<br>11/20/2025                                      |
| PAYEE  | (a) Payee name<br>Southwest Airlines  |                                  | (b) Payee address; City, State, Zip Code<br>P. O. Box 36611<br>Dallas, TX 75235        |
| PURPOSE OF EXPENDITURE<br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political  | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District         |                                  | (b) Description<br>Airfare Amarillo to Austin  |
| (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense |   |                                  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   |                                  | Office sought<br>Office held   |

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

|   |                               |                                |  |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense   | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking  | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|   | 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 F4:<br>Sch: 7/7 Rpt: 17/25            | 2 FILER NAME<br>Smithee, John T. (The Honorable)   |                                  | 3 Filer ID (Ethics Commission Filers)<br>00020664                                    |
| 4 CREDIT CARD ISSUER   | Name of financial institution<br>see previous  |                                  | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD<br>\$                    |
| 6 PAYMENT  | (a) Amount Charged<br>\$108.42   | (b) Date of Charge<br>07/21/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/25/2025                                    |
| 7 PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504 |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  |                                  | Office sought      Office held   |
| PAYMENT  | (a) Amount Charged<br>\$54.21  | (b) Date of Charge<br>07/24/2025 | (c) Date(s) Credit Card Issuer Paid<br>07/25/2025                                    |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504 |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held   |
| PAYMENT  | (a) Amount Charged<br>\$172.00   | (b) Date of Charge<br>12/10/2025 | (c) Date(s) Credit Card Issuer Paid<br>12/31/2025                                    |
| PAYEE  | (a) Payee name<br>Avis Rent Car  |                                  | (b) Payee address; City, State, Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504 |
| PURPOSE OF EXPENDITURE                                       | (a) Category<br>(See Categories listed at the top of this schedule)<br>Travel Out of District<br><br><input checked="" type="checkbox"/> Political<br><input type="checkbox"/> Non-Political |                                  | (b) Description<br>Austin rental car   |
|  | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.  |                                  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  |                                  | Office sought      Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 1/7 Rpt: 18/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 Date<br>08/05/2025   | 5 Payee name<br>Avis Rent Car  |   |
| 6 Amount (\$)<br>\$177.96<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504     |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought   |
| Date<br>08/08/2025   | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$54.21<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended    | Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504       |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought   |
| Date<br>08/12/2025   | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$54.21<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended    | Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504       |   |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought   |
|  |  | Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 2/7 Rpt: 19/25  | 2 FILER NAME<br>Smithee, John T. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 Date<br>07/21/2025  | 5 Payee name<br>Avis Rent Car  |   |
| 6 Amount (\$)<br>\$108.42   | 7 Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504 |   |
| <b>8 PURPOSE OF EXPENDITURE</b><br>(a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
| Date<br>07/24/2025  | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$54.21  | Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504   |   |
| <b>PURPOSE OF EXPENDITURE</b><br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District       |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
| Date<br>08/17/2025  | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$54.21  | Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504   |   |
| <b>PURPOSE OF EXPENDITURE</b><br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District       |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
|   |  | Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 3/7 Rpt: 20/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |
| 4 Date<br>08/22/2025   | 5 Payee name<br>Avis Rent Car  |  |
| 6 Amount (\$)<br>\$252.66<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504     |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car        |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought  |
| Date<br>08/29/2025   | Payee name<br>Avis Rent Car  |  |
| Amount (\$)<br>\$286.38<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504       |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought  |
| Date<br>09/04/2025   | Payee name<br>Avis Rent Car  |  |
| Amount (\$)<br>\$249.80<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><br>6 Sylvan Way<br><br>Parsippany, NJ 07504       |  |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin to Lubbock rental car |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought  |
|  |  | Office held  |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 4/7 Rpt: 21/25  | 2 FILER NAME<br>Smithee, John T. (The Honorable)                                   | 3 Filer ID (Ethics Commission Filers)<br>00020664   |
| 4 Date<br>10/25/2025  | 5 Payee name<br>Avis Rent Car  |   |
| 6 Amount (\$)<br>\$161.67   | 7 Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504 |   |
| <b>8 PURPOSE OF EXPENDITURE</b><br>(a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin to Dallas rental car |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
| Date<br>10/22/2025  | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$57.39  | Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504   |   |
| <b>PURPOSE OF EXPENDITURE</b><br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District       |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
| Date<br>12/10/2025  | Payee name<br>Avis Rent Car  |   |
| Amount (\$)<br>\$172.00   | Payee address; City; State; Zip Code<br>6 Sylvan Way<br><br>Parsippany, NJ 07504   |   |
| <b>PURPOSE OF EXPENDITURE</b><br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District       |  | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin rental car               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH  | Candidate/Officeholder name  | Office sought   |
|   |  | Office held   |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 5/7 Rpt: 22/25   | 2 FILER NAME<br>Smithee, John T. (The Honorable)  | 3 Filer ID (Ethics Commission Filers)<br>00020664  |             |
| 4 Date<br>11/26/2025   | 5 Payee name<br>Capitol Gift Shop   |  |             |
| 6 Amount (\$)<br>\$465.00<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code<br><br>Capitol Building<br><br>Austin, TX 78701            |  |             |
| 8 PURPOSE OF EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Christmas ornaments for constituents     |             |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought  | Office held |
| Date<br>08/01/2025   | Payee name<br>Cort Furniture Rental   |  |             |
| Amount (\$)<br>\$335.83<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><br>8940 Research Blvd. #C<br><br>Austin, TX 78758        |  |             |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense    | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought  | Office held |
| Date<br>07/03/2025   | Payee name<br>Cort Furniture Rental   |  |             |
| Amount (\$)<br>\$335.83<br><br><input checked="" type="checkbox"/> Reimbursement from political contributions intended   | Payee address; City; State; Zip Code<br><br>8940 Research Blvd. #C<br><br>Austin, TX 78758        |  |             |
| PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense    | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought  | Office held |
|  |   |  |             |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 6/7 Rpt: 23/25  | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |  |
| 4 Date<br>09/03/2025  | 5 Payee name<br>Cort Furniture Rental  |  |  |
| 6 Amount (\$)<br>\$335.83   | 7 Payee address; City; State; Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758           |  |  |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH                            | Candidate/Officeholder name  | Office sought  | Office held  |
| Date<br>10/03/2025  | Payee name<br>Cort Furniture Rental  |  |  |
| Amount (\$)<br>\$335.83   | Payee address; City; State; Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758             |  |  |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought  | Office held  |
| Date<br>11/03/2025  | Payee name<br>Cort Furniture Rental  |  |  |
| Amount (\$)<br>\$335.83   | Payee address; City; State; Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758             |  |  |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | PURPOSE OF EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought  | Office held  |
|   |  |  |  |

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

|  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | 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 G:<br>Sch: 7/7 Rpt: 24/25  | 2 FILER NAME<br>Smithee, John T. (The Honorable)   | 3 Filer ID (Ethics Commission Filers)<br>00020664  |             |
| 4 Date<br>12/31/2025  | 5 Payee name<br>Cort Furniture Rental  |  |             |
| 6 Amount (\$)<br>\$335.83   | 7 Payee address; City; State; Zip Code<br>8940 Research Blvd. #C<br><br>Austin, TX 78758                         |  |             |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense               | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Austin apartment furniture rental |             |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH                            | Candidate/Officeholder name  | Office sought  | Office held |
| Date<br>10/22/2025  | Payee name<br>Southwest Airlines   |  |             |
| Amount (\$)<br>\$248.18   | Payee address; City; State; Zip Code<br>P. O. Box 36611<br><br>Dallas, TX 75235                                  |  |             |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | PURPOSE OF EXPENDITURE<br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Airfare Amarillo to Austin                       |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought  | Office held |
| Date<br>10/25/2025  | Payee name<br>Southwest Airlines   |  |             |
| Amount (\$)<br>\$291.48   | Payee address; City; State; Zip Code<br>P. O. Box 36611<br><br>Dallas, TX 75235                                  |  |             |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended | PURPOSE OF EXPENDITURE<br>Category (See Categories listed at the top of this schedule)<br>Travel Out of District | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Airfare Dallas to Amarillo                       |             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name  | Office sought  | Office held |

## TEXT ANNOTATION

Sch: 1/1 Rpt: 25/25

|  |   |
|--|---|
| FILER NAME<br>Smithee, John T. (The Honorable) | Filer ID (Ethics Commission Filers)<br>00020664 |
| Schedule<br>F1                                 |   |

Information entered by filer as a memo:

Explanatory Notes:

Note 1:

A direct deposit in the amount of \$9,606 was made to my campaign account on December 16, 2024 by WinRed. I was not aware that the deposit had been made until I received my December bank statement shortly after the end of the month. I made numerous attempts to contact WinRed by telephone, email, certified mail, and its website to determine the identity of the donor so that the contribution might be returned. I have never received a response and have not been able to obtain any other information.

At the suggestion of an attorney with the Texas Ethics Commission, I segregated the amount into a separate bank account in January 2024 and reported the transaction by note on my January 15 and July 15 2024 COH reports. The account remained undisturbed until December 2025. On September 12, 2025, I requested an opinion letter from the Texas Ethics Commission as to proper disposition of the funds. In response, I received a telephone call advising that a proper disposition would be to a charity or governmental entity. On December 5, 2025, I distributed the full amount to the West Texas A&M Foundation's student scholarship fund and closed the special bank account that had been opened.

Note 2:

I reimbursed a staff member for expenses in the amount of \$318.79 by check dated June 20, 2025, and was reported on 07/15/2025 report. The check had not cleared the bank at the end of the last reporting period. It cleared in July of this reporting period.

Note 3:

The charges to the Chase credit card in the amount \$972.83 have been shows on this report as well as the payment dated 12/31/2025. However, the payment did not clear the campaign bank account prior to the statement closing.