

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 (Ethics Commission Filers)

2 Total pages filed:

36

OFFICE USE ONLY

Date Received

OCT 11 2022 PCVD

Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR

FIRST

MI

Ms

Toni

V

NICKNAME

LAST

SUFFIX

Smith

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

23626 Rimini Ct., Richmond, TX 77406

✓ Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832)

731-4778

6 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Ms

Monica

L

NICKNAME

LAST

SUFFIX

Akompi

7 CAMPAIGN TREASURER ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1416 Lake Pointe Pkwy, Sugar Land, TX 77478

(Residence or Business)

8 CAMPAIGN TREASURER PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(281)

748-4472

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign treasurer appointment (Officeholder Only)

July 15

8th day before election

Exceeded Modified Reporting Limit

Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month

Day

Year

7 / 1 / 22

THROUGH

Month

Day

Year

10 / 9 / 22

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 8 / 22

ELECTION TYPE

Primary

Runoff

Other Description

General

Special

12 OFFICE

OFFICE HELD (if any)

None

13 OFFICE SOUGHT (if known)

Fort Bend County Clerk

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Toni V Smith		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29,391.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,635.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 26,293.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

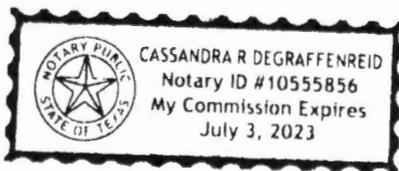
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Cassandra R. DeGraffenreid this the 11 day of October, 20 22, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

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

19 FILER NAME

Toni V Smith

20 Filer ID (Ethics Commission Filers)

**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE**

**SUBTOTAL
AMOUNT**

1.	■ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 29,391.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	■ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 16,635.25
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 600.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 07/19/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Faysal Sharif 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Grady Prestage Campaign Contributor address; City; State; Zip Code P.O. Box 835, Missouri City, TX 77459	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Gerald Womack Contributor address; City; State; Zip Code 4412 Almeda Rd, Houston, TX 77004	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Charles Swindell Contributor address; City; State; Zip Code 1802 Lake Quitman Dr, Richmond, TX 77406	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) James Davis 6 Contributor address; City; State; Zip Code 3503 Lindhaven Dr, Pearland, TX 77584	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Donna Cole Contributor address; City; State; Zip Code 13811 Ashley Run, Houston, TX 77077	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/29/2022	Full name of contributor out-of-state PAC (ID#: _____) Janice Dupre Contributor address; City; State; Zip Code	Amount of contribution (\$) 3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Grady Prestage Campaign Contributor address; City; State; Zip Code P.O. Box 835, Missouri City, TX 77459	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Michael Winn	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 9223 Turtle Pond Ln, Missouri City, TX 77459		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Deandre Sam	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 3401 Corder St, Houston, TX 77021		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Kevin Murray, LLC	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 5075 Westheimer Rd, Ste 980, Houston, TX 77056		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Albert Tibbs Campaign	Amount of contribution (\$) 150.00
Contributor address; City; State; Zip Code P.O. Box 17161, Fresno, TX 77496		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) C&L Consultants 6 Contributor address; City; State; Zip Code 3514 Wentworth St, Houston, TX 77004	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) DBA Pettitt Enterprises Contributor address; City; State; Zip Code 12015 Bob White Dr, Houston, TX 77035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Dexter McCoy Campaign Contributor address; City; State; Zip Code P.O.Box 1398, Richmond, TX 77406	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Ron Reynolds Campaign Contributor address; City; State; Zip Code 6140 Highway 6 South 233, Missouri City, TX 77459	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Wayne Lockett 6 Contributor address; City; State; Zip Code 4202 Clearwater Court, Missouri City, TX 77459	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Lewanna Hobbs Contributor address; City; State; Zip Code 603 Amesbury Dr, Mesquite, TX 75150	Amount of contribution (\$) 1.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Robert Carter Contributor address; City; State; Zip Code 1911 Darby Lane, Fresno, TX 77545	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Leah Drummer Contributor address; City; State; Zip Code 4103 Yucca Court, Manvel, TX 77578	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Betty Williams 6 Contributor address; City; State; Zip Code 3819 Westhampton Drive, Houston, TX 77045	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Dwain Thomas Contributor address; City; State; Zip Code 1714 Sabine Ln, Richmond, TX 77406	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Judy Foston Contributor address; City; State; Zip Code 20234 Benton Springs Lane, Richmond, TX 77407	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Tammy Lanier Contributor address; City; State; Zip Code 3011 Cape Blanco, Missouri City, TX 77459	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) LaTanya Easter 6 Contributor address; City; State; Zip Code 1815 Stacy Falls, Houston, TX 77008	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Mark Nelson Contributor address; City; State; Zip Code 7102 Halfpenny Road, Houston, TX 77095	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) John Reger Contributor address; City; State; Zip Code 3250 Bingle Rd, Houston, TX 77055	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Sharon Owens Contributor address; City; State; Zip Code 4407 Sunrise Drive, Missouri City, TX 77459	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Rodney Wilson	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 8706 Crown Jewel Drive, Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Antonia Perez-Dotson	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 7710 Stone Arbor Ln., Pearland, TX 77581		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Jeff Webber	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 14 heights creek drive, Missouri City, TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Lisa Valadez	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 7022 chapel meadow lane, Richmond, TX 77407		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Obes Nwabara 6 Contributor address; City; State; Zip Code 160 Birdsall St Apt 1305, Houston, TX 77007	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Letitia Quinones Contributor address; City; State; Zip Code 2202 Ruth Street, Houston, TX 77004	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Byronn Hearn Contributor address; City; State; Zip Code 7310 Birchtree Forest Dr, Houston, TX 77088	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Alisha Johnson Contributor address; City; State; Zip Code 4118 Creek Shore Lane, Fulshear, TX 77441	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor Cassandra Craft out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 18030 Barton Ridge Lane, Richmond, TX 77407	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor Valerie Golden out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 11 Retreat Blvd, Richmond, TX 77469	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor Soraya Whitten out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 18106 nisbet crossing, Richmond, TX 77407	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor Queenie Wilkins out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 5102 Southampton Rd., Missouri City, TX 77459	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Kalethea Ratcliff 6 Contributor address; City; State; Zip Code 5802 GRAND SALINE DR, Richmond, TX 77469	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Laran Vonda Contributor address; City; State; Zip Code 1703 Lake Quitman Drive, Richmond, TX 77406	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Jacqueline Fagan Contributor address; City; State; Zip Code 2304 High Tide Lane, Pearland, TX 77584	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Cameron Hill Contributor address; City; State; Zip Code 16107 Kensington Dr #483, Sugar Land, TX 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Debra Emanuel <hr/> 6 Contributor address; City; State; Zip Code 4018 Laguna Point, Missouri City, TX 77459	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Keith Davis <hr/> Contributor address; City; State; Zip Code 1019 E. 37th St., Houston, TX 77022	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Denise Bentham <hr/> Contributor address; City; State; Zip Code 21514 Amber Grain Lane, Cypress, TX 77433	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Alex Vinson <hr/> Contributor address; City; State; Zip Code 17902 Sulgrave dr, Cypress, TX 77429	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Felicia Farrar	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 18126 Afton Hollow Ln, Richmond, TX 77407	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Devaron Yates	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 741 Somerset Commons Lane, Houston, TX 77055	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Robert Kennon	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 12418 Millridge Forest Ct, Houston, TX 77070	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Danielle Bess	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 3244 Wentworth St, Houston, TX 77004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Staci Keys 6 Contributor address; City; State; Zip Code 3244 Wentworth St, Houston, TX 77004	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Terence Jones Contributor address; City; State; Zip Code 8518 Bird Run drive, Missouri City, TX 77489	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Marcus Ford Contributor address; City; State; Zip Code 9611 Roark's Passage, Missouri City, TX 77459	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Peggy Robinson Contributor address; City; State; Zip Code 17531 Holroyd Rd, Humble, TX 77346	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Monica Rawlins 6 Contributor address; City; State; Zip Code 4303 Bobolink Circle, Missouri City, TX 77459	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Charley Reado Contributor address; City; State; Zip Code P O Box 450708, Houston, TX 77245	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Roderick Garner Contributor address; City; State; Zip Code 2210 N Fountain Valley Dr, Missouri City, TX 77459	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Tamecia Glover Contributor address; City; State; Zip Code 7406 Avalon Trace, Richmond, TX 77407	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Monica Rawlins 6 Contributor address; City; State; Zip Code 4303 Bobolink Circle, Missouri City, TX 77459	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Charley Reado Contributor address; City; State; Zip Code P O Box 450708, Houston, TX 77245	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Roderick Garner Contributor address; City; State; Zip Code 2210 N Fountain Valley Dr, Missouri City, TX 77459	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Tamecia Glover Contributor address; City; State; Zip Code 7406 Avalon Trace, Richmond, TX 77407	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Shunvonne McGilbra <hr/> 6 Contributor address; City; State; Zip Code 3566 Link Valley Dr, Houston, TX 77025	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Abenaa Bailey <hr/> Contributor address; City; State; Zip Code 4711 LJ Parkway Unit 4208, Sugar Land, TX 77479	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Celestine Lawson <hr/> Contributor address; City; State; Zip Code 2323 Lorenzo Dr, Hollywood, CA 90068	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Richard Lawson <hr/> Contributor address; City; State; Zip Code 2323 Lorenzo Dr, Los Angeles, CA 90068	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Karla Elridge 6 Contributor address; City; State; Zip Code 9334 Hughes Ranch Road, Pearland, TX 77584	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Michael Elridge Contributor address; City; State; Zip Code 9334 Hughes Ranch Road, Pearland, TX 77584	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) LaTanya Easter Contributor address; City; State; Zip Code 1815 Stacy Falls, Houston, TX 77008	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Denise Bentham Contributor address; City; State; Zip Code 21514 Amber Grain Lane, Cypress, TX 77433	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Monique Wakefield	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 9614 Wildgrass Ct, Sugar Land, TX 77498	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Toni Crawford	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 1414 Nails Creek, Sugar Land, TX 77478	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Chantay Morris	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 9414 Comstock Meadows Dr., Houston, TX 77095	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date 09/27/2022	Full name of contributor out-of-state PAC (ID#: _____) Darryl Carter	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 6851 Willers Way, Houston, TX 77058	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/08/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Anna Reger 6 Contributor address; City; State; Zip Code	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Deshid Denby Contributor address; City; State; Zip Code	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Janice Leonard Contributor address; City; State; Zip Code	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Unknown Contributor address; City; State; Zip Code	Amount of contribution (\$) 400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Toni V Smith		3 Filer ID (Ethics Commission Filers)
4 Date 09/08/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Kevin Ambers	7 Amount of contribution (\$) 40.00
6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 08/02/2022	5 Payee name VaShaundra Edwards	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contribution	(b) Description Back to School Supplies
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 08/05/2022	Payee name Double Good Popcorn	
Amount (\$) 68.95	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food for Block-walkers
	Check if travel outside of Texas. Complete Schedule T. 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
Date 08/08/2022	Payee name Tamika Craft Campaign	
Amount (\$) 100.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description Campaign Contribution
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 08/08/2022	5 Payee name Fort Bend County	
6 Amount (\$) 25.00	7 Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation	(b) Description Parade Entry Fee
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 08/08/2022	Payee name Fort Bend County	
Amount (\$) 25.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation	Description Parade Entry Fee
	Check if travel outside of Texas. Complete Schedule T. 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
Date 08/15/2022	Payee name Allied Signs	
Amount (\$) 649.50	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 08/15/2022	5 Payee name Roderick Garner	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Reimbursement of payment for Canvassing and Block-walkers
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/15/2022	Payee name Fort Bend County Democratic Party	
Amount (\$) 2,500.00	Payee address; City; State; Zip Code 13515 Southwest Frwy, Ste 204, Sugar Land, TX 77478	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation	Description Coordinated Democratic Campaign Efforts
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/23/2022	Payee name Lupe Tortilla	
Amount (\$) 89.11	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food for Block-walkers
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
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4 Date 08/24/2022	5 Payee name Allied Signs
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6 Amount (\$) 2,000.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Signs
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/25/2022	Payee name Unknown
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Amount (\$) 100.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Miscellaneous
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 08/29/2022	Payee name Fort Bend County Sheriff's Foundation
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Amount (\$) 750.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Sheriff's Gala
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 08/29/2022	5 Payee name John Wiggins III	
6 Amount (\$) 1,500.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Gala
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 08/31/2022	Payee name Roderick Garner	
Amount (\$) 250.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Reimbursement for Payment to Canvassing and Block-Walkers
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/08/2022	Payee name Elegant Valet	
Amount (\$) 498.75	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Valet Parking for Fundraising Event
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/12/2022	5 Payee name Sugar Rush	
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Cake for Fundraiser
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/12/2022	Payee name Bill Gibson	
Amount (\$) 300.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Transportation for Special Guests
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/12/2022	Payee name Niles Dillard	
Amount (\$) 350.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Videographer
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/12/2022	5 Payee name Casey Champagne	
6 Amount (\$) 175.00	7 Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 09/13/2022	Payee name Chester Machen	
Amount (\$) 750.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	Check if travel outside of Texas. Complete Schedule T. 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
Date 09/14/2022	Payee name Wells Fargo	
Amount (\$) 12.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking	Description Return Unpaid Item Fee
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
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4 Date 09/20/2022	5 Payee name Rodrigo Chavez
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6 Amount (\$) 82.27	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Canvassing and Block-Walking
	(c) Check if travel outside of Texas. Complete Schedule T.	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
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Date 09/22/2022	Payee name Juan Ortega
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Amount (\$) 180.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Canvassing and Block-Walking
	Check if travel outside of Texas. Complete Schedule T.	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
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Date 09/16/2022	Payee name Roderick Garner
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Amount (\$) 272.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Reimbursement for Payment to Canvassing and Block-Walkers
	Check if travel outside of Texas. Complete Schedule T.	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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/22/2022	5 Payee name John Wiggins III	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Gala
	(c) Check if travel outside of Texas. Complete Schedule T. 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

Date 09/23/2022	Payee name Sams Club	
Amount (\$) 43.15	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Snacks for Canvassing and Block-Walking
	Check if travel outside of Texas. Complete Schedule T. 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

Date 09/26/2022	Payee name Mimi's New Orleans	
Amount (\$) 208.33	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food for Block-Walking
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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|--|-------------------------------|--------------------------------|--|
| 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 | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/26/2022	5 Payee name Allied Signs	
6 Amount (\$) 2,058.29	7 Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Signs
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 09/26/2022	Payee name Texas Southern University	
Amount (\$) 325.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Block-Walking
	Check if travel outside of Texas. Complete Schedule T. 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
Date 09/27/2022	Payee name Frenchy's	
Amount (\$) 156.65	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description Food for Canvassing and Block-Walking
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/28/2022	5 Payee name Butler Wiseman	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation Expense	(b) Description Mass Distribution of Calls to Voters
	(c) Check if travel outside of Texas. Complete Schedule T. 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
Date 10/03/2022	Payee name John Wiggins III	
Amount (\$) 800.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Gala
	Check if travel outside of Texas. Complete Schedule T. 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
Date 10/06/2022	Payee name John Wiggins III	
Amount (\$) 500.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Gala
	Check if travel outside of Texas. Complete Schedule T. 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 07/21/2022	5 Payee name Square Inc	
6 Amount (\$) 29.30	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Banking	(b) Description Square Inc Fees
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 09/22/2022	Payee name ActBlue	
Amount (\$) 726.95	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Banking	Description ActBlue Fees
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Toni V Smith	3 Filer ID (Ethics Commission Filers)
4 Date 09/27/2022	5 Payee name Julia Faye Thompson Inc	
6 Amount (\$) 600.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Signage
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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