CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	Bridgette	MI	OFFICE USE ONLY
		MHM-Land	SUFFIX	Date Received RECVD VIA EMAIL
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #; C	STATE; ZIP CODE	07/15/2025
Change of Address		1.DN	Jugar Lund 174	79
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	extension (Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	SUBATVC	мі	Date Processed
	NICKNAME	LAST	SUFFIX	Date Imaged
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS	NO PO BOX PLEASEJ: APT / SU		STATE; ZIP CODE
(Residence or Business)	To gh	5 0040	rhand 1x 1	1414
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER (37.3 (G.31)	EXTENSION	
9 REPORT TYPE	January 15	30th day before el	ection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before elec	ction Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD COVERED	D Nonth	Day Year 101 / 2025	THROUGH 06	Day Year / 30 / 8085
11 ELECTION	ELECTION DA Month Day	TE Primary	ELECTION TYPE	
	11/02	2024 General	Special	
12 OFFICE	QEEICE HELD (if any)	County Atter	13 OFFICE SOUGHT (If known	County Attomer
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAN	ADE BY POLITICAL COMMITTEES TO SUPPORT DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR HEY RECEIVE NOTICE OF SUCH EXPENDITURES.
	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TRE	ASURER ADDRESS	
		GO TO	PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 25

				the second s	and the second sec
13 C / OH NAME	Smith-Lawson, Bridg	ette	14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t d officeholders are required to report this information	he candidate's or officeh	nolder's know	ledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,040.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	8,161.17
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	5,199.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS (TING PERIOD	OF THE LAST DAY	\$	0.00
AFFIX NO	Jentin	DVE Bullitation Signature of	of perjury, that the acco information required to Candidate or Officeholde	er EK Public	day
	xas Ethics Commission		~	0	1.0.f10d0fd8

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 25

Sn		wson, Bridgette	19 Filer ID	·	
		LE SUBTOTALS SCHEDULE		SUE	BTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	15,540.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00
З.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	8,161.17
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	1	\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8,		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	(\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	(\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	F C/OH ;	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	4S [\$	
1.2.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RE TO FILER	ETURNED	\$	
					- Francisco - Fran

Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#							
2 Filler NAME 3 Filer JD Smith-Lawson, Bridgette. 3 Filer JD 4 Date 5 Filler and endess. City: State. Zip Code 7 Q3(0)/2025 6 Contribution address. City: State. Zip Code 7 Amount of Contribution (\$) 9 Employer (See Instructions) 7 Not Employed 9 Employer (See Instructions) Amount of Contribution (\$) 03/02/2025 Full name of contribution out-state PAC (Def		The Instru	ction Guide explains how to complete this fo	orm.	1		
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4 Date 5 Fell name of contribution ox8-04-state PAC (D-4	2		on. Bridgette		3	Filer JD	
03/09/2025 Accounting, PVII \$1,000.00 6 Contributor address; City; State; Zip Code 2616 South Loop W 630 Principal cocupation / Job title (See Instructions) 9 Employer (See Instructions) Not Employed Patternet, City; State; Zip Code Annuant of Contribution (\$) S100.00 03/02/2025 Full name of contributor cost-of-state PAC (00*) Annuant of Contribution (\$) 03/02/2025 Full name of contributor cost-of-state PAC (00*) Annuant of Contribution (\$) 03/02/2025 Full name of contributor cut-of-state PAC (00*) Annuant of Contribution (\$) 04/04/2025 Full name of contributor cut-of-state PAC (10*) Annount of Contribution (\$) 03/02/2025 Full name of contributor cut-of-state PAC (10*) Annount of Contribution (\$) 03/02/2025 Baker Wording LLP contributor address; City; State; Zip Code) Annount of Contribution (\$) 03/02/2025 Benton, Levi contributor address; City; State; Zip Code) Annount of Contribution (\$) 03/02/2025 Full name of contributor cut-of-state PAC (10#) Annount of Contribution (\$) <td>4</td> <td></td> <td></td> <td></td> <td>7</td> <td>Amount of Contribution (\$)</td> <td></td>	4				7	Amount of Contribution (\$)	
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Missouri City, TX 77459 Principal occupation'/ Job title (See Instructions) Employer (See Instructions)							
Principal occupation'/ Job title (See Instructions) Employer (See Instructions)			4326 Lakeshore Forest Drive				
Principal occupation'/ Job title (See Instructions) Employer (See Instructions)			Missouri City, TX 77450				
		Drinning one		Employor (See Instruction	<u>,</u>		w
)		

The Instr	uction Guide explains how to complete this	; form,		Total pages Schedule A1: Sch: 2/7 Rpt: 5/25	
FILER NAM	E		-	Filer (D	
Smith-Law	son, Bridgette				
Date 03/09/2025	5 Full name of contributor 🔲 out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	\$50.0
Principal oc	cupation / Job title (See Instructions)	9 Employer (See Instructions	⊥ s)	10400408-00-0-0	
Educator		Alief ISD			
Date 03/09/2025	Full name of contributor Dout-of-state PAC (ID) Butler, Francis Contributor address; City; State; Zip Code 2419 Teal Run Place Dr		r.	Amount of Contribution (\$)	\$10.0
	Fresno, TX 77545				
Principal occ Not Employ	cupation / Job title (See Instructions) yed	Employer (See Instructions Not Employed	s)		<u>.</u> .
Date 05/12/2025		#:)		Amount of Contribution (\$)	\$100.0
	Missouri City, TX 77489				
Principal occ Retired	cupation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
Date 03/09/2025	Contributor address; City; State; Zip Code 3006 Sadie Court			Amount of Contribution (\$)	\$50.0
Principal occ Sales	Missouri City, TX 77459 cupation / Job title (See Instructions)	Employer (See Instructions VCA	s)		
Date 03/09/2025	Full name of contributor out-of-state PAC (ID# Gee, Sabriya Contributor address; City; State; Zip Code 6707 FAIRWOOD CREEK LN 650 SUGAR LAND, TX 77479-4610	<u>+</u>)		Amount of Contribution (\$)	\$100.0
	cupation / Job title (See Instructions)	Employer (See Instructions	ــــــ s)		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/25	
FILER NAME Smith-Lawso	on, Bridgette		3 Filer ID	
Date 04/06/2025	 5 Full name of contributor out-of-state PAC (ID#:_Goody, Nobi 6 Contributor address; City; State; Zip Code 2616 South Loop 650 Houston, TX 77054 		7 Amount of Contribution (\$)	\$1,000.0
Principal occu Not Employe	pation / Job title (See Instructions) d	9 Employer (See Instructions) Not Employed)	
Date 05/04/2025	Full name of contributor out-of-state PAC (ID#: Goody, Nobi Contributor address; City; State; Zip Code 2616 South Loop W Houston, TX 77054		Amount of Contribution (\$)	\$1,000.0
Principal occur Not Employe	pation / Job title (See Instructions) d	Employer (See Instructions))	
Date 02/22/2025	Full name of contributor out-of-state PAC (ID#: Grady Prestage Campaign Contributor address; City; State; Zip Code P.O. Box 885)	Amount of Contribution (\$)	\$2,500.(
Principal occur	Missouri City, TX 77459 pation / Job title (See Instructions)	Employer (See Instructions))	
Principal occur Date 03/04/2025		······) Amount of Contribution (\$)	\$1,000.0
Date 03/04/2025 Principal occur	Full name of contributor out-of-state PAC (ID#:_ Green, Ronald Contributor address; City; State; Zip Code 3757 Parkwood Dr. Houston, TX 77021 pation / Job title (See Instructions)	Employer (See Instructions)	Amount of Contribution (\$)	\$1,000.0
Date 03/04/2025	Full name of contributor out-of-state PAC (ID#:_ Green, Ronald Contributor address; City; State; Zip Code 3757 Parkwood Dr. Houston, TX 77021 pation / Job title (See Instructions)	Employer (See Instructions) Attorney	Amount of Contribution (\$)	\$1,000.0

m.		
	1 Total pages Schedule A1:	
	Sch: 4/7 Rpt: 7/25	, "
	3 Filer ID	
	· · · · · · · · · · · · · · · · ·	
)	7 Amount of Contribution (\$)	
		\$50.00
Employer (See instructions)		
	Manahatan ang ang ang ang ang ang ang ang ang a	
)	Amount of Contribution (\$)	¢1 500 00
		\$1,500.00
Employer (See Instructions)		
,		
<u> </u>	Amount of Contribution (\$)	*****
		\$50.00
Employer (See Instructions)		
Prosperity		
)	Amount of Contribution (\$)	
		\$100.00
Employer (See Instructions)		
Employer (See Instructions) It,Äôs A Lifestyle Outlet		
	Amount of Contribution (\$)	
	Amount of Contribution (\$)	\$100.00
	Amount of Contribution (\$)	\$100.00
	Amount of Contribution (\$)	\$100.00
	Amount of Contribution (\$)	\$100.00
It,Äôs A Lifestyle Outlet	Amount of Contribution (\$)	\$100.00
	Amount of Contribution (\$)	\$100.00
	Employer (See Instructions) Harris engineer departme	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/7 Rpt; 8/25	
2 FILER NAME		<u> </u>	3 Filer ID	•••••
	on, Bridgette			
4 Date	5 Full name of contributor Dut-of-state PAC (ID#:_		7 Amount of Contribution (\$)	
02/20/2025	Meyers, Andy	/		\$250.00
	6 Contributor address; City; State; Zip Code			
	423 Longview Dr			
	Sugar Land, TX 77478			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Fort Bend Co	punty	Commsioner		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
04/23/2025	Montano, Anton	/		\$25.00
	Contributor address; City; State; Zip Code			,
	1515 Hyde Park			
	40			
	Houston, TX 77006			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))	
Fort Bend Co	punty	Civil Attorney		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/09/2025	ONeal, Byron			\$500,00
	Contributor address; City; State; Zip Code			
	4 Chelsea Bivd			
	1119			
	Houston, TX 77006			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))	
Attorney		Fort Bend County		
Date	Full name of contributor 🛛 out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
03/09/2025	Quincy, Patrick			\$100.00
	Contributor address; City; State; Zip Code			
	1111 Mysterium Ln			
	Rosenberg, TX 77469			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions))	
Law Enforcer	ment	Fort Bend County		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/09/2025	Ragster, Arien			\$50.00
	Contributor address; City; State; Zip Code			
	929 North Lakewood Drive			
	Shreveport, LA 71107			
Principal occup Travel Agent	pation / Job title (See Instructions)	Employer (See Instructions) Diva of Destinations Trav		

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The Instru	uction Guide explains how to complete this f	orm.	1	Total pages Schedule A1:	
				Sch: 6/7 Rpt: 9/25	
2 FILER NAME	= son, Bridgette		3	Filer ID	
			<u> </u>		
4 Date 04/23/2025	5 Full name of contributor out-of-state PAC (ID#: Roberts, Greg	· · · · · · · · · · · · · · · · · · ·	'	Amount of Contribution (\$)	# 0E 00
04/23/2023					\$25.00
	6 Contributor address; City; State; Zip Code 4522 Eagle Mountain Ct				
	4522 Eagle Mountain Ct		Ì		
	Richmond, TX 77406				
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	L 5)		
Fort Bend (County	Regulatory Compliance	Of	ïcer	
Date	Full name of contributor out-of-state PAC (ID#:)	ľ	Amount of Contribution (\$)	
03/09/2025					\$20.00
	Contributor address; City; State; Zip Code				
	3330 Prosperity CT				
	Missouri City, TX 77459				
-	upation / Job title (See Instructions)	Employer (See Instructions	i)		
Nurse Prac		VM			Window
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
03/09/2025					\$100.00
	Contributor address; City; State; Zip Code				
	11910 Joyce Lane				
	Needville, TX 77461				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	L		
Health Prof		FBC HHS			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
03/09/2025	Turner, Damien				\$50.00
	Contributor address; City; State; Zip Code				
	5923 Solara Ledge Ln				
	Sugar Land, TX 77479				
•	upation / Job title (See Instructions)	Employer (See Instructions)		
Director	······································	Cox Enterprises			
Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
03/09/2025	Wiseman, Nicolas				\$50.00
	Contributor address; City; State; Zip Code				
	8315 Bird Meadow Lane				
	Missouri City, TX 77489				
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions			
Driver	apadon / von die (dee instructions)	UPS	,		
2.770					
	•				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/7 Rpt: 10/25 2 FILER NAME 3 Filer ID Smith-Lawson, Bridgette 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/09/2025 bobrick, william \$25.00 6 Contributor address; City; State; Zip Code PO box 637 sugar land, TX 77478 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) organizer AFT of Texas Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 03/09/2025 ginyard, cynthia \$100.00 Contributor address; City; State; Zip Code 11418 Oak Lake Ridge Court Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 03/09/2025 \$10.00 semiens, tiffany Contributor address; City; State; Zip Code 8218 Cherryshire Ct

	Houston, TX 77083		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Cosmetolog	ist	SCircles	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/39
2	FILER NAME			3 Filer ID
	Smith-Laws	on, Bridgette		
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBU	JTIONS	\$
5	Date 01/01/2025	 7 Contributor address; City; State; Zlp Code 6850 Hwy 6)	8 Amount of 9 In-kind contribution contribution (\$) description \$600.00 Luncheon
		St. 200 Missouri City, TX 77459		Check if travel outside of Texas. Complete Schedule T.
10	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title ((FOR JUDICIAL) (See instructions)
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16	i If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

CONTRIBUTIO	PENDITURES FROM POLITIC. NS	AL		SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment	Fees Office Food/Beverage Expense Polling /- Gilt/Awards/Memorials Expense Printing	lepayme Overhea Expens J Expen	ent/Reimbursement ad/Rental Expense se	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	compl	ete this form,	· · · · · · · · · · · · · · · · · · ·
Total pages Schedule F1: Sch: 10/13 Rpt: 21/25	2 FILER NAME Smith-Lawson, Bridgette		3	B Filer ID
Date 05/16/2025	5 Payee name TX Gulf Coast AFL-CIO		<u></u>	
Amount (\$) \$225.00	7 Payee address; City; State; Zip 2506 Sutherlan St	Code	<u> </u>	
	Houston, TX 77023			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)		tside of Texas, Complete Schedule T. X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	 ought		Office held
Date 03/04/2025	Payee name Texas Party Box		<u> </u>	
Amount (\$) \$274,62	Payee address; City; State; Zip (P.O. Box 2252	Code		
	Richmond, TX 77406			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b)		tside of Texas, Complete Schedule T, X, officeholder living expense 'alSEF
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office si H	Jught	<u></u>	Office held
Date	Payee name			
04/06/2025	UH Alumní Association			
Amount (\$) \$1,460.00	Payee address; City; State; Zip 0 3204 Cullen Blvd	Code		
	Houston, TX 77204			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b)	l-s-s-al	tside of Texas, Complete Schedule T. X, officeholder living expense

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officehoider/Politic Credit Card Payment	Fees Office C Food/Beverage Expense Polling y - Gitt/Awards/Memortals Expense Printing	epayment/Reimbursement Iverhead/Rental Expense Expense Expense IVages/Contract Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 11/13 Rpt: 22/25			3 Filer ID
Date 06/21/2025	5 Payee name Walgreens	,, _ _	
Amount (\$) \$47.27	7 Payee address; City; State; Zip C 2203 Texas Pkwy Missouri City, TX 77489	Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas, Complete Schedule T. TX, officeholder living expense arade
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sc H	pught	Office held
Date 04/19/2025	Payee name Walmart		
Amount (\$) \$25,61	Payee address; City; State; Zip C 5330 FM 1640	Code	
	Richmond, TX 77469		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		utside of Texas, Complete Schedule T. TX, officeholder living expense S
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ught	Office held
Date 02/28/2025	Payee name Wells Fargo		
Amount (\$) \$10,00	Payee address; City; State; Zip C 420 Montgomery St.	Code	
	San Francisco, CA 94163		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		utside of Texas, Complete Schedule T. TX, officeholder living expense CE FEE

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment	Fees O Food/Beverage Expense P y - Gift/Awards/Memorials Expense P	oan Repayment/Reimbursen office Overhead/Rental Exper folling Expense rinting Expense alaries/Wages/Contract Labo	nse Transportation Equipment & Related Expense Travei in District Travei Out of District or OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 12/13 Rpt: 23/25		Vio compiete a	3 Filer ID
Date 02/19/2025	5 Payee name Wells Fargo		
Amount (\$) \$35.00	 7 Payee address; City; State; Z 420 Montegomery St San Francisco, TX 94163 	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Accounting/Banking	Check if t	travel outside of Texas. Complete Schedule T, Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ce sought	Office held
Date 06/26/2025	Payee name Whole Foods		
Amount (\$) \$51.98	Payee address; City; State; Z 15900 Southwest Fwy	ip Code	
PURPOSE OF EXPENDITURE	Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedul Food/Beverage Expense	Check if t	travel outside of Texas, Complete Schedule T, Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Offic	ce sought	Office held
Date 06/28/2025	Payee name Wix	<u></u>	
Amount (\$) \$33.82	Payee address; City; State; Z 100 Gansenvoort	ip Code	
	New York, NY 10014		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Fees	Check if t	ກ travel outside of Texas, Complete Schedule T, Austin, TX, officeholder living expense Web page
1	Candidate/Officeholder name Offic	ce sought	Office held

POLITICAL EXI CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulling Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 13/13 Rpt: 24/25	2 FILER NAME 3 Smith-Lawson, Bridgette 3	Filer ID
4 Date 06/01/2025	5 Payee name YWCA	
6 Amount (\$) \$150.00	 7 Payee address; City; State; Zip Code 1020 19th St. Washington D.C., DC 20036 	· ·
8 PURPOSE OF EXPENDITURE		de of Texas. Complete Schedule T. officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date 06/01/2025	Payee name YWCA	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1021 19th St.	
PURPOSE OF EXPENDITURE		de of Texas, Complete Schedule T, officehokter living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date 05/14/2025	Payee name YWCA	
Amount (\$) \$105.64	Payee address; City; State; Zip Code 1021 19th St.	
	Washington D.C., DC 20036	
PURPOSE OF EXPENDITURE		de of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held

POLITICAL EX CONTRIBUTIO	PENDITURES FROM POLITICAL	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Overhead/Rental Expense Transpo Food/Beverage Expense Polling Expense Travel it By - Gitt/Awards/Memorials Expense Printing Expense Travel it cal Committee Legal Services Salaries/Wages/Contract Labor OTHER	tion/Fundraising Expense ortation Equipment & Related Expense n District Dut of District (enter a category not listed above)
1 Total pages Schedule F1: Sch: 1/13 Rpt: 12/25	2 FILER NAME 3 Filer (I Smith-Lawson, Bridgette 3	D
4 Date 05/23/2025	5 Payee name Amazon	
6 Amount (\$) \$35,21	7 Payee address; City; State; Zip Code 410 Terry Ave. N	,
8 PURPOSE OF EXPENDITURE	Seattle, WA 98109 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Tex Check if Austin, TX, officehold Toner	,
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice held
Date 03/30/2025	Payee name Avenida South Garage	inn yn argeleg yn arwyn yn yn yr fer yn Yfer Yndy yn
Amount (\$) \$20.00	Payee address; City; State; Zip Code 1710 Polk St.	
PURPOSE OF EXPENDITURE	Houston, TX 77003 (a) Category (See Categories listed at the top of this schedule) Garage Parking Check If travel outside of Texa Check If Austin, TX, officehold Garage Parking	•
Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice held
Date 03/04/2025	Payee hame B's Wine Bar	
Amount (\$) \$551.88	Payee address; City; State; Zip Code 8027 Hwy 6 Suite 100 Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texa Check if Austin, TX, officehold Food for Fundraiser 	
Complete ONLY if direct expenditure to benefit C/OF		fice held

POLITICAL EXI CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labo	ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 2/13 Rpt: 13/25	2 FILER NAME Smith-Lawson, Bridgette	3 Filer ID
4 Date 03/08/2025	 Payee name C.E. King High School 	
6 Amount (\$) \$54.09	7 Payee address; City; State; Zip Code 11433 E. Sam Houston Pkwy N Houston, TX 77044	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio Contributions/Donations Made By Check if Candidate/Officeholder/Political Committee Check if	on If travel outside of Texas, Complete Schedule T. If Austin, TX, officeholder living expense In to Football Team
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office heid
Date 04/25/2025	Payee name Child Advocates of Fort Bend County	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 5403 Avenue N	
PURPOSE OF EXPENDITURE		f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	I Candidate/Officeholder name Office sought H	Office held
Date 04/24/2025 Amount (\$) \$80.00	Payee name Dexter McCoy Commissioner Pct Payee address; City; State; Zip Code P.O. Box 1398	
φ00.00	Richmond, TX 77406	
PURPOSE OF EXPENDITURE		f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	LCandidate/Officeholder name Office sought H	Office held
	HER	

CONTRIBUTIO	PENDITURES FROM POLITICAL			SCHEDULE F1	
	EXPENDITURE CATE	ORIES FOR B	OX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholdet/Politic Credit Card Payment	Event Expense Fees Food/Beverage Expense g - Gitt/Awards/Memorials Expense	Loan Repayme Office Overhea Polling Expens Printing Expen Sataries/Wage	ent/Reimbursement d/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
Total pages Schedule F1: Sch: 3/13 Rpt: 14/25			·····	3 Filer ID	
Date 02/10/2025	5 Payee name Evite		J.	· · · · · · · · · · · · · · · · · · ·	
Amount (\$) \$73,53	7 Payee address; City; Sta 310 E. Colorado St.	ate; Zip Code			
	Glendale, CA 91205				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Fees	schedule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense tiOS	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought		Office held	
Date	Payee name			na na ann ann ann ann ann ann ann ann a	
02/16/2025	Flavor Fetish				
Amount (\$) \$541.25	Payee address; City; Sta 15147 O'Hara Dr.	ate; Zip Code			
	Houston, TX 77085				
		· · · · · · · · · · · · · · · · · · ·	Description	······································	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	schedule) (b)	Check if travel ou	utside of Texas. Complete Schedule T, TX, officeholder living expense	
OF	Food/Beverage Expense Candidate/Officeholder name	Schedule) (b) Office sought	Check if travel ou		
OF EXPENDITURE Complete ONLY if direct	Food/Beverage Expense Candidate/Officeholder name		Check if travel ou	TX, officeholder living expense	
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O	Food/Beverage Expense Candidate/Officeholder name H	Office sought	Check if travel ou	TX, officeholder living expense	
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O	Food/Beverage Expense Candidate/Officeholder name H Payee name Fort Bend County Links Incorporate	Office sought	Check if travel ou	TX, officeholder living expense	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 03/15/2025 Amount (\$)	Food/Beverage Expense Candidate/Officeholder name H Payee name Fort Bend County Links Incorporate Payee address; City; Sta	Office sought	Check if travel ou	TX, officeholder living expense	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Of Date 03/15/2025 Amount (\$)	Food/Beverage Expense Candidate/Officeholder name H Payee name Fort Bend County Links Incorporate Payee address; City; Sta 1200 Massachusetts Ave	Office sought d ate; Zip Code	Check if travel ou Check if Austin, Catering Description	TX, officeholder living expense	

CONTRIBUTIO	PENDITURES FROM POLITICA NS	L.	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Expense y - Glft/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/Memorials	yment/Reimbursement rheat/Rental Expense pense pense lages/Contract Labor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 4/13 Rpt: 15/25	The Instruction Guide explains how to con 2 FILER NAME Smith-Lawson, Bridgette	·	Filer iD
Date 05/16/2025	5 Payee name Fort Bend Regional Council	_	· · · · · · · · · · · · · · · · · · ·
Amount (\$) \$382,50	7 Payee address; City; State; Zip Co 10435 Greenbough Suite 250 Stafford, TX 77477	de	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		de of Texas, Complete Schedule T. officeholder living expense t
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sour H	ght	Office held
Date 04/23/2025	Payee name Gringos	98 <u></u>	
Amount (\$) \$230.45	Payee address; City; State; Zip Cor 24108 Southwest Fwy	de	
PURPOSE OF EXPENDITURE	Rosenberg, TX 77471. (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		de of Texas, Complete Schedule ⊤. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug H	jht	Office held
Date 02/25/2025	Payee name H-E-B	in the second	
Amount (\$) \$21.56	Payee address; City; State; Zip Cor 646 S. Flores St	le	
	San Antonio, TX 78204		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<u>Inned</u>	de of Texas, Complete Schedule T, officeholder living expense İSƏT
Complete ONLY if direct	Candidate/Officeholder name Office sou		Office held

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CONTRIBUTIO	PENDITURES FROM POLITIC NS	SCHEDULE F.		
EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan F Fees Office Food/Beverage Expense Polling y - Glit/Awards/Memorials Expense Printin al Committee Legal Services Salarie	Repayment/Reinbursement Solicitation/Fundraising Expense Overhead/Rental Expense Transportation Equipment & Related Expense g Expense Travel In District ng Expense Travel Out of District es/Wages/Contract Labor OTHER (enter a category not listed above)		
Total pages Sabadula E1:	The Instruction Guide explains how to	· · · · · · · · · · · · · · · · · · ·		
Total pages Schedule F1: Sch: 5/13 Rpt: 16/25	Smith-Lawson, Bridgette	3 Filer 1D		
Date	5 Payee name			
03/25/2025	Hyde Park Bar and Grill			
Amount (\$) \$69,54	7 Payee address; City; State; Zip 4206 Duval St.	Code		
	Austin, TX 78751			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food after Testifying on Bill		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	sought Office held		
Date	Payee name			
02/12/2025	Johnny Tamale			
Amount (\$) \$73.75	Payee address; City; State; Zip 2750 FM 1092	Code		
	Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas, Complete Schedule T, Check If Austin, TX, officeholder Ilving expense Dinner at Politcal Meeting		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	sought Office held		
Date	Payee name			
02/01/2025	Kendleton Floral Club			
Amount (\$) \$100.00	Payee address; City; State; Zip (P.O. Box 95	Code		
	Kendleton, TX 77451			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banquet Ticket		

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	EXPENDITURE CATEGORIES FOR BOX 8(a)	······
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Repayment/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense V - Git/Awards/Memorials Expense Printing Expense	ursement Solicitation/Fundraising Expense Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)
Total pages Schedule F1:		3 Filer ID
Sch: 6/13 Rpt: 17/25	Smith-Lawson, Bridgette	
Date 03/20/2025	5 Payee name LCISD	
Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 391.1. Avenue I	
	Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	iption sck if travel outside of Texas, Complete Schedule T. ack if Austin, TX, officeholder living expense neon Ticket
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date 01/19/2025	Payee name MLK Gala	na na na hana n Ina na hana na h
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 1053	
	Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	ption ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense Tickets
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
	Payee name	
Date	MLK Gala	
01/08/2025		
Date 01/08/2025 Amount (\$) \$600.00	Payee address; City; State; Zip Code P.O. Box 1053	
01/08/2025 Amount (\$)		
01/08/2025 Amount (\$)	P.O. Box 1053 Missouri City, TX 77459 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	ck if travel outside of Texas. Complete Schedule T. ck if Austin, ⊤X, officeholder living expense

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CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nt Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 7/13 Rpt: 18/25		3 Filer ID
Date 03/07/2025	5 Payee name Parcel Plus	
Amount (\$) \$168.00	 7 Payee address; City; State; Zip Code 5826 New Territory Blvd Sugar Land, TX 77479 	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if trav	vel outside of Texas, Complete Schedule T, stin, TX, officeholder living expense PE
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date 05/20/2025	Payee name Quincy4Constable	
Amount (\$) \$300,00	Payee address; City; State; Zip Code 5614 W. Grand Pkwy Ste 102 P.O. Box 253 Richmond, TX 77406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if trav Candidate/Officeholder/Political Committee Check if Aus	vel outside of Texas, Complete Schedule T. stin, TX, officeholder living expense ament Fundraiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held
Date 06/10/2025	Payee name Reddix, Lynette	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 8618 Bird Run Dr. , Missouri City, TX 77489	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made By Check if trav	vel outside of Texas. Complete Schedule ⊺. stin, ⊤X, otficeholder living expense
EXPENDITURE	Gala Ticket	t

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Lo Fees O Food/Beverage Expense Pr Gilt/Awards/Memorials Expense Pi	an Repayment/Reimbu fice Overhead/Rental f illing Expense inting Expense laries/Wages/Contract	xpense Transportation Equipment & Related Expense Travel in District Travel Out of District	
	The Instruction Guide explains how	/ to complete this	orm.	
Total pages Schedule F1: Sch: 8/13 Rpt: 19/25	2 FILER NAME Smith-Lawson, Bridgette		3 Filer ID	
Date 03/29/2025	5 Payee name Rosenberg Railroad Museum			
Amount (\$) \$250.00	7 Payee address; City; State; Z 1921 Avenue F	ip Code		
	Rosenberg, TX 77471			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committee	e Che	btion :k if travel outside of Texas. Complete Schedule T. :k if Austin, TX, officeholder living expense :TIONS	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought	Office held	
Date	Payee name		and a second	
01/03/2025	Run Sister Run PAC			
Amount (\$) \$123.60	Payee address; City; State; Z P.O. Box 66470	ip Code		
	Houston, TX 77266			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Contributions/Donations Made By Candidate/Officeholder/Political Committe	e Che	otion ki fi travel outside of Texas, Complete Schedule ⊺. ki fi Austin, TX, officehoider living expense h Ticket	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		e sought	Office held	
Date	Payee name			
04/19/2025	Sandy McGees			
Amount (\$) \$86.87	Payee address; City; State; Z 314 Morton	p Code		
	Richmond, TX 77469			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedul Food/Beverage Expense	Che Che	otion x if travel outside of Texas, Complete Schedule T. x if Austin, TX, officeholder living expense or Staff	
		e sought	Office held	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Glift/Awards/Memoriais Expense Printing E	bayment/Reimbursement erhead/Rental Expense kpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 9/13 Rpt: 20/25		3	Filer ID
Date 05/09/2025	5 Payee name Sneed, Kayla	, ,	
Amount (\$) \$100.00	 Payee address; City; State; Zip Co 150 W Sam Houston Pkwy N. 2333 Houston, TX 77024 	ode	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		lde of Texas. Complete Schedule T. , officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ight	Office held
Date 04/09/2025	Payee name Sneed, Kayla		
Amount (\$) \$115,00	Payee address; City; State; Zip Co 150 W Sam Houston Pkwy N 2333 Houston, TX 77024	ode	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		ide of Texas. Complete Schedule T. , officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ıght	Office held
Date	Payee name Sneed, Kayla	1 1. Maran Andrés an Antonio an	nin kan an a
04/09/2025			
04/09/2025 Amount (\$) \$100.00	Payee address; City; State; Zip Co 150 W Sam Houston Pkwy N 2333 Houston, TX 77024	ae	
Amount (\$)	150 W Sam Houston Pkwy N 2333	(b) Description	ide of Texas, Complete Schedule T. , officeholder living expense

					SCHEDULE
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	EXPENDITURE C Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expe al Committee Legal Services The Instruction Guide	Loan Rep Office Ove Polling Ex ense Printing E Salaries/V	ayment/Reimbursement erhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Exper Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F2:		explains now to co	implete this form.	3 Filer ID
	Sch: 1/1 Rpt: 38/39	Smith-Lawson, Bridgette			
4	TOTAL OF UNITEMI	ZED UNPAID INCURRED OBL	IGATIONS		\$
5	Date 04/27/2025	6 Payee name Alpha Merit Ball			L
7.	Amount (\$) \$201.25	8 Payee address; City; 2313 St. Paul St	State; Zip Co	ode	
		Baltimore, MD 21218			10.00.01.01.01.01.01.01.01.01.01.01.01.0
9	TYPE OF EXPENDITURE	Political	Non-Poli	tical	
10	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Gala Tickets 			

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	FORM C/OH - FR
The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **	Page 25 of 25
1 C/OH NAME	2 Filer ID
Smith-Lawson, Bridgette	attorneybridgette@yahoo.com
3 SIGNATURE	
I do not expect any further political contributions or political expenditures in connection with my cand as a final report terminates my campaign treasurer appointment. I also understand that I may not acc campaign expenditures without a campaign treasurer appointment on file.	
Signature of Ca	ndidate / Officeholder
4 FILER WHO IS NOT AN OFFICEHOLDER	
** Complete A & B below only if you are not an officeholder **	
	· * 8
A CAMPAIGN FUNDS	
Check only one:	
X I do not have unexpended contributions or unexpended interest or income earned from polit	ical contributions.
I have unexpended contributions or unexpended interest or income earned from political con- convert unexpended political contributions or unexpended interest or income earned on politi understand that I must file an annual report of unexpended contributions and that I may not unexpended interest or income earned on political contributions longer than six years after fit must dispose of unexpended political contributions and unexpended interest or income earned with the requirements of Election Code 254.204.	tical contributions to personal use. I also retain unexpended contributions or lling this report. Further, I understand that I
B ASSETS	
Check only one:	
X I do not retain assets purchased with political contributions or interest or other income from p	political contributions.
I do retain assets purchased with political contributions or interest or other income from political convert assets purchased with political contributions or interest or other income from political understand that I must dispose of assets purchased with political contributions in accordance 254.204.	I contributions to personal use. I also
	<i></i>
	*
Cinesta	e of Candidate
Signatur	
5 OFFICEHOLDER	
** Complete this section only if you are an officeholder ** I am aware that I remain subject to filing requirements applicable to an officeholder who doe also aware that I will be required to file reports of unexpended contributions if, after filing the retain political contributions, interest or other income from political contributions, or assets p interest or other income from political contributions.	last required report as an officeholder, I urchased with political contributions or
Signature	e of Officeholder