

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: 28																		
3 CANDIDATE / OFFICEHOLDER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:40%; font-size: 0.8em;">FIRST</td> <td style="width:20%; font-size: 0.8em;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; color: blue; font-size: 1.2em;">Howard</td> <td style="text-align: center; color: blue; font-size: 1.2em;">S.</td> </tr> <tr> <td style="font-size: 0.8em;">NICKNAME</td> <td style="font-size: 0.8em;">LAST</td> <td style="font-size: 0.8em;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center; color: blue; font-size: 1.2em;">Smith</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI		Howard	S.	NICKNAME	LAST	SUFFIX		Smith		<div style="border: 1px solid black; padding: 5px; text-align: center;"> OFFICE USE ONLY </div> <div style="border: 1px solid black; padding: 5px; text-align: center;"> Date Received RECEIVED APR 06 2017 JH CITY SECRETARY'S CITY OF AMARILLO </div> <div style="border: 1px solid black; padding: 5px; text-align: center; font-size: 0.8em;"> Date Hand-delivered or Date Postmarked </div> <table style="width:100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <td style="width:50%;">Receipt #</td> <td style="width:50%;">Amount \$</td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> </table>		Receipt #	Amount \$	Date Processed		Date Imaged	
MS / MRS / MR	FIRST	MI																			
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Date Processed																					
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4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; font-size: 0.8em;">ADDRESS / PO BOX;</td> <td style="width:15%; font-size: 0.8em;">APT / SUITE #;</td> <td style="width:20%; font-size: 0.8em;">CITY;</td> <td style="width:10%; font-size: 0.8em;">STATE;</td> <td style="width:25%; font-size: 0.8em;">ZIP CODE</td> </tr> <tr> <td style="color: blue; font-size: 1.2em;">1616 S. Polk</td> <td></td> <td style="color: blue; font-size: 1.2em;">Amarillo, Tx</td> <td></td> <td style="color: blue; font-size: 1.2em;">79102</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	1616 S. Polk		Amarillo, Tx		79102										
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5 CANDIDATE / OFFICEHOLDER PHONE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 0.8em;">AREA CODE</td> <td style="width:40%; font-size: 0.8em;">PHONE NUMBER</td> <td style="width:40%; font-size: 0.8em;">EXTENSION</td> </tr> <tr> <td style="color: blue; font-size: 1.2em;">(806)</td> <td style="color: blue; font-size: 1.2em;">358-8381</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	(806)	358-8381															
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6 CAMPAIGN TREASURER NAME	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: 0.8em;">MS / MRS / MR</td> <td style="width:40%; font-size: 0.8em;">FIRST</td> <td style="width:20%; font-size: 0.8em;">MI</td> </tr> <tr> <td></td> <td style="text-align: center; color: blue; font-size: 1.2em;">Paul</td> <td></td> </tr> <tr> <td style="font-size: 0.8em;">NICKNAME</td> <td style="font-size: 0.8em;">LAST</td> <td style="font-size: 0.8em;">SUFFIX</td> </tr> <tr> <td></td> <td style="text-align: center; color: blue; font-size: 1.2em;">Matney</td> <td></td> </tr> </table>	MS / MRS / MR	FIRST	MI		Paul		NICKNAME	LAST	SUFFIX		Matney									
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7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; font-size: 0.8em;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="width:10%; font-size: 0.8em;">APT / SUITE #;</td> <td style="width:15%; font-size: 0.8em;">CITY;</td> <td style="width:10%; font-size: 0.8em;">STATE;</td> <td style="width:15%; font-size: 0.8em;">ZIP CODE</td> </tr> <tr> <td style="color: blue; font-size: 1.2em;">3918 Eaton</td> <td></td> <td style="color: blue; font-size: 1.2em;">Amarillo, Tx</td> <td></td> <td style="color: blue; font-size: 1.2em;">79109</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	3918 Eaton		Amarillo, Tx		79109								
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9 REPORT TYPE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><input type="checkbox"/> January 15</td> <td style="width:25%;"><input checked="" type="checkbox"/> 30th day before election</td> <td style="width:25%;"><input type="checkbox"/> Runoff</td> <td style="width:25%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
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10 PERIOD COVERED	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; font-size: 0.8em;">Month Day Year</td> <td style="width:10%; text-align: center; font-size: 0.8em;">THROUGH</td> <td style="width:40%; font-size: 0.8em;">Month Day Year</td> </tr> <tr> <td style="color: blue; font-size: 1.2em;">01 / 01 / 2017</td> <td></td> <td style="color: blue; font-size: 1.2em;">03 / 30 / 2017</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	01 / 01 / 2017		03 / 30 / 2017												
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05 / 06 / 2017																					
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Amarillo City Council Place 4																			

GO TO PAGE 2

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Howard Smith</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>25,619.61</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>—</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>—</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ <i>—</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>8,710.31</i>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>7,003.59</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>—</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>—</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>—</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>—</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>—</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>—</i>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

1-10-17

5 Full name of contributor

Gwen Frazee

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50⁰⁰

6 Contributor address;

City; State; Zip Code

1511 S. Lamar Amarillo, Tx 79102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1-10-17

Full name of contributor

Mr. & Mrs. W.H. (Bill) Brian

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$2,000⁰⁰

Contributor address;

City; State; Zip Code

2807 S. Lipscomb Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-17-17

Full name of contributor

Mr. & Mrs. Garland Sell

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500⁰⁰

Contributor address;

City; State; Zip Code

7801 Clearmeadow Amarillo, Tx 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-17-17

Full name of contributor

Frederick Griffin

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

504 S. Polk Ste. 101 Amarillo, Tx 79101

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

1-17-17

5 Full name of contributor out-of-state PAC (ID#: _____)

Mr. & Mrs. Jason Herrick

6 Contributor address; City; State; Zip Code

7901 Valcour Amarillo, TX 79119

7 Amount of contribution (\$)

\$1,000⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1-20-17

Full name of contributor out-of-state PAC (ID#: _____)

Mr. & Mrs. Randy Sharp

Contributor address; City; State; Zip Code

7909 Continental Pkwy. Amarillo, TX 79119

Amount of contribution (\$)

\$500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-20-17

Full name of contributor out-of-state PAC (ID#: _____)

Kevin & Jana Duncan

Contributor address; City; State; Zip Code

3721 Langtree Dr. Amarillo, TX 79109

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1-27-17

Full name of contributor out-of-state PAC (ID#: _____)

Sharon Ann Bowers

Contributor address; City; State; Zip Code

6700 Smoketree Amarillo, TX 79124

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

1-27-17

5 Full name of contributor

Bill Chudej

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$250⁰⁰

6 Contributor address;

City; State; Zip Code

1619 S. Tyler

Amarillo, TX 79102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1-30-17

Full name of contributor

Marcia R. Kelley

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

2301 Judy

Amarillo, TX 79106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-16-17

Full name of contributor

Greg & Kathy Glenn

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$60⁰⁰

Contributor address;

City; State; Zip Code

3300 Danvers

Amarillo, TX 79106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-16-17

Full name of contributor

Paul & Sandy Matney

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$150⁰⁰

Contributor address;

City; State; Zip Code

3918 Eaton

Amarillo, TX 79109

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

2-6-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Thomas Cambridge

6 Contributor address;

City; State; Zip Code

2201 Civic Circle Amarillo, Tx 79109

7 Amount of contribution (\$)

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-6-17

Full name of contributor

out-of-state PAC (ID#: _____)

Hugh & Tamara Bonifield

Contributor address;

City; State; Zip Code

4900 Erik Amarillo, Tx 79106

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-6-17

Full name of contributor

out-of-state PAC (ID#: _____)

Cliff Bickerstaff

Contributor address;

City; State; Zip Code

2604 Hawthorne Amarillo, Tx 79109

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-6-17

Full name of contributor

out-of-state PAC (ID#: _____)

Mr. & Mrs. J. B. Austin, III

Contributor address;

City; State; Zip Code

P.O. Box 9613 Amarillo, Tx 79105

Amount of contribution (\$)

\$200⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

2-6-17

5 Full name of contributor

Chip Staniswalis

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50⁰⁰

6 Contributor address;

City; State; Zip Code

2912 Arcadia Amarillo, Tx 79109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-14-17

Full name of contributor

Linda Brian

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

11 Didrickson Amarillo, Tx 79124

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-14-17

Full name of contributor

Bill & Bonnie Cox

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

6549 18th Street Rd. Greeley, CO 80634

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-14-17

Full name of contributor

Thomas Riney

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

600 Maxor Bldg.
320 S. Polk Amarillo, Tx 79101

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

6/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

2-14-17

5 Full name of contributor

Betty Solis

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100⁰⁰

6 Contributor address;

City; State; Zip Code

3319 Edenburg Amarillo, Tx 79106

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-14-17

Full name of contributor

Rob Law

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

3955 S. Soncy Amarillo, Tx 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-14-17

Full name of contributor

Marcus & Judy Norris

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50⁰⁰

Contributor address;

City; State; Zip Code

1620 S. Polk Amarillo, Tx 79102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-14-17

Full name of contributor

Andrew Hall

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250⁰⁰

Contributor address;

City; State; Zip Code

500 S. Taylor LB 249 Amarillo, Tx 79101

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

2-14-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Bill Gilliland

6 Contributor address;

City; State; Zip Code

500 S. Taylor LB 249 Amarillo, Tx 79101

7 Amount of contribution (\$)

\$1,000⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2-14-17

Full name of contributor

out-of-state PAC (ID#: _____)

Rick & Rita Kuehl

Contributor address;

City; State; Zip Code

5215 Clearwater Amarillo, Tx 79110

Amount of contribution (\$)

\$250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-28-17

Full name of contributor

out-of-state PAC (ID#: _____)

Randy & Debbie Jeffers

Contributor address;

City; State; Zip Code

6214 McCoy Amarillo, Tx 79109

Amount of contribution (\$)

\$250⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-28-17

Full name of contributor

out-of-state PAC (ID#: _____)

William & Bev Harris

Contributor address;

City; State; Zip Code

7802 Stuyvesant Amarillo, Tx 79121

Amount of contribution (\$)

\$200⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-9-17

5 Full name of contributor

Amarillo Assoc. of Realtors, Inc.

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$5,000⁰⁰

6 Contributor address; City; State; Zip Code

5601 Enterprise Circle Amarillo

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-9-17

Full name of contributor

Michael Hughes

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$2,000⁰⁰

Contributor address; City; State; Zip Code

2806 S. Parker Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

Terry Caviness

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500⁰⁰

Contributor address; City; State; Zip Code

3004 S. Lipscomb Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

Jon T. Oden

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address; City; State; Zip Code

500 S. Taylor LB 242 Amarillo, Tx 79101

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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1 Total pages Schedule A1:

9/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-9-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Richard & Sanette Phillips

6 Contributor address;

City; State; Zip Code

6112 Adirondack Amarillo, Tx 79106

7 Amount of contribution (\$)

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Jeff Mitchell

Contributor address;

City; State; Zip Code

19504 Quail Hollow Dr. Canyon, Tx 79015

Amount of contribution (\$)

\$200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Andrew & Dorothy Mitchell

Contributor address;

City; State; Zip Code

3004 S. Hughes Amarillo, Tx 79109

Amount of contribution (\$)

\$200⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Mr. & Mrs. Greg Mitchell

Contributor address;

City; State; Zip Code

3005 S. Ong Amarillo, Tx 79109

Amount of contribution (\$)

\$200⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-9-17

5 Full name of contributor

Glen Parkey

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$250⁰⁰

6 Contributor address;

City; State; Zip Code

P.O. Box 2966

Amarillo, Tx 79105

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-9-17

Full name of contributor

Samuel Reeves

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250⁰⁰

Contributor address;

City; State; Zip Code

3920 Linda

Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

George Raffkind

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250⁰⁰

Contributor address;

City; State; Zip Code

2205 S. Georgia Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

Mrs. Jim Simms

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250⁰⁰

Contributor address;

City; State; Zip Code

14 Willow Bridge Dr. Amarillo, Tx 79106

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

11/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-9-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Bob & Wanda Damon

6 Contributor address; City; State; Zip Code

8405 New England Dr. Amarillo, Tx 79119

7 Amount of contribution (\$)

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

L. Louise Box

Contributor address; City; State; Zip Code

6501 Dreyfuss Amarillo, Tx 79106

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Dorothy Caldwell

Contributor address; City; State; Zip Code

4 Monet Rue Amarillo, Tx 79121

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Harvey Elms

Contributor address; City; State; Zip Code

6304 Jameson Amarillo, Tx 79106

Amount of contribution (\$)

\$25⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

12/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-9-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Steven E. R'Jana Becker

6 Contributor address;

City; State; Zip Code

7821 Cervin Dr. Amarillo, Tx 79121

7 Amount of contribution (\$)

\$30⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-9-17

Full name of contributor

out-of-state PAC (ID#: _____)

Autrey Burke

Contributor address;

City; State; Zip Code

4407 Andrews Amarillo, Tx 79106

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-13-17

Full name of contributor

out-of-state PAC (ID#: _____)

John Hornstra

Contributor address;

City; State; Zip Code

7904 Prosper Amarillo, Tx 79119

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-13-17

Full name of contributor

out-of-state PAC (ID#: _____)

James E. Pam Beckham

Contributor address;

City; State; Zip Code

1507 S. Lamar Amarillo, Tx 79102

Amount of contribution (\$)

\$200⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

13/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-13-17

5 Full name of contributor

Ella Jane Tracy

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$25⁰⁰

6 Contributor address;

City; State; Zip Code

5509 Berget Amarillo, Tx 79106

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-13-17

Full name of contributor

Andrea Burke

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$25⁰⁰

Contributor address;

City; State; Zip Code

6906 Daniel Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-14-17

Full name of contributor

Mike & Marilyn Standefer

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

4805 Spartanburg Amarillo, Tx 79119

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-14-17

Full name of contributor

Tony Rhodes

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

6 Cambridge Rd. Amarillo, Tx 79124

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

14/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-14-17

5 Full name of contributor

Paul Matney

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$150⁰⁰

6 Contributor address;

City; State; Zip Code

3918 Eaton Amarillo, Tx 79109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-17-17

Full name of contributor

Dean Morrison

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500⁰⁰

Contributor address;

City; State; Zip Code

2609 S. Hughes Amarillo, Tx 79106

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

Sam & Carol Lovelady

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

2817 S. Crockett Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

F.G. Collard, III

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250⁰⁰

Contributor address;

City; State; Zip Code

10 Edgewater Amarillo, Tx 79106

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

15/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-17-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Jeff Reasoner

7 Amount of contribution (\$)

\$100⁰⁰

6 Contributor address;

City; State; Zip Code

7313 Smoketree Amarillo, Tx 79124

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Milt & Lueise Tyson

Amount of contribution (\$)

\$50⁰⁰

Contributor address;

City; State; Zip Code

2220 S. Tyler Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Emmett & Nancy Rice

Amount of contribution (\$)

\$300⁰⁰

Contributor address;

City; State; Zip Code

2605 Teckla Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Keith & Neva Blair

Amount of contribution (\$)

\$50⁰⁰

Contributor address;

City; State; Zip Code

1534 S. Alabama Amarillo, Tx 79102

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

16/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-17-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Rudy Kaye Gleason

6 Contributor address;

City; State; Zip Code

P.O. Box 50477 Amarillo, Tx 79159

7 Amount of contribution (\$)

\$ 50⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Lilia Escajeda

Contributor address;

City; State; Zip Code

P.O. Box 33044 Amarillo, Tx 79120

Amount of contribution (\$)

\$ 100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Jerry & Margaret Hodge

Contributor address;

City; State; Zip Code

320 S. Polk Ste. 100 Amarillo, Tx 79101

Amount of contribution (\$)

\$ 500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-17-17

Full name of contributor

out-of-state PAC (ID#: _____)

Ron & Cheri Boyd

Contributor address;

City; State; Zip Code

809 S. Tyler Amarillo, Tx 79101

Amount of contribution (\$)

\$ 500⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

17/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-20-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Gary & Gaylia Polk

6 Contributor address;

City; State; Zip Code

3507 Edgewood Amarillo Tx 79109

7 Amount of contribution (\$)

\$100⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-20-17

Full name of contributor

out-of-state PAC (ID#: _____)

Leon & Sue Church

Contributor address;

City; State; Zip Code

6903 Cayman Amarillo, Tx 79124

Amount of contribution (\$)

\$100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-20-17

Full name of contributor

out-of-state PAC (ID#: _____)

Steven Dalrymple

Contributor address;

City; State; Zip Code

1521 S. Rusk Amarillo, Tx 79102

Amount of contribution (\$)

\$500⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-21-17

Full name of contributor

out-of-state PAC (ID#: _____)

Nancy Burton

Contributor address;

City; State; Zip Code

6104 Dreyfuss Amarillo, Tx 79106

Amount of contribution (\$)

\$50⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

18/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-21-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Doug & Ruth Srader

6 Contributor address;

City; State; Zip Code

12332 S. Osage Amarillo, Tx 79118

7 Amount of contribution (\$)

\$200⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-23-17

Full name of contributor

out-of-state PAC (ID#: _____)

Don & Clarecia Jackson

Contributor address;

City; State; Zip Code

3504 Edgewood Amarillo, Tx 79109

Amount of contribution (\$)

\$50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-23-17

Full name of contributor

out-of-state PAC (ID#: _____)

Paul Harpole Campaign

Contributor address;

City; State; Zip Code

P.O. Box 30481 Amarillo, Tx 79120

Amount of contribution (\$)

\$224⁶¹

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-23-17

Full name of contributor

out-of-state PAC (ID#: _____)

Barry Peterson

Contributor address;

City; State; Zip Code

600 S. Tyler Ste. 1600 Amarillo, Tx 79101

Amount of contribution (\$)

\$250⁰⁰

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

19/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-23-17

5 Full name of contributor

John Mozda

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$500⁰⁰

6 Contributor address;

City; State; Zip Code

2808 S. Bonham Amarillo, Tx 79109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-23-17

Full name of contributor

Donald Smith Ellis

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$750⁰⁰

Contributor address;

City; State; Zip Code

2401 S. Georgia Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-27-17

Full name of contributor

Robert & Janice Harsch

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

3407 Rutson Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-27-17

Full name of contributor

Mr. & Mrs. Dale Bippis

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$30⁰⁰

Contributor address;

City; State; Zip Code

1614 Jordan Amarillo, Tx 79106

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

20/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-27-17

5 Full name of contributor

Mark & Amy Hughes

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$500⁰⁰

6 Contributor address;

City; State; Zip Code

6503 Palacio Amarillo, Tx 79109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-27-17

Full name of contributor

Mr. & Mrs. W.F. Countiss

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500⁰⁰

Contributor address;

City; State; Zip Code

3805 Carlton Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-27

Full name of contributor

John Kritser

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$500⁰⁰

Contributor address;

City; State; Zip Code

P.O. Box 31388 Amarillo, Tx 79120

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2-23-17

Full name of contributor

Steven Pair

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50⁰⁰

Contributor address;

City; State; Zip Code

7811 Legacy Amarillo, Tx 79119

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

21/21

2 FILER NAME

Howard Smith

3 Filer ID (Ethics Commission Filers)

4 Date

3-13-17

5 Full name of contributor

Thomas Novak

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$50⁰⁰

6 Contributor address;

City; State; Zip Code

9100 Perry Amarillo, Tx 79119

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-5-17

Full name of contributor

Edward Morris

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

3501 Cinderella Amarillo, Tx 79121

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-6-17

Full name of contributor

Larry Jackson

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100⁰⁰

Contributor address;

City; State; Zip Code

6008 Rutgers Amarillo, Tx 79109

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-14-17

Full name of contributor

Data Gate

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$300⁰⁰

Contributor address;

City; State; Zip Code

3419 Thornton Amarillo Tx 79109

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Howard Smith	3 Filer ID (Ethics Commission Filers)
--	-------------------------------------	---------------------------------------

4 Date 1-18-2017	5 Payee name City of Amarillo
----------------------------	---

6 Amount (\$) \$100⁰⁰	7 Payee address; City; State; Zip Code 509 S.E. 7th Amarillo, Tx 79101
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (filing)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 1-20-17	Payee name U.S. Postal Service
------------------------	--

Amount (\$) \$47⁰⁰	Payee address; City; State; Zip Code 505 S.E. 9th Amarillo, Tx 79105
---	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 2-3-17	Payee name Whit-Co
-----------------------	------------------------------

Amount (\$) \$24³⁶	Payee address; City; State; Zip Code 1500 S. Polk Amarillo, Tx 79101
---	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other: Office Supplies	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	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:	2 FILER NAME <i>Howard Smith</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>3-9-17</i>	5 Payee name <i>Double U Marketing</i>	
6 Amount (\$) <i>\$8049⁸²</i>	7 Payee address; City; State; Zip Code <i>160B Washington Amarillo, Tx 79101</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>3-23-17</i>	Payee name <i>U.S. Postal Service</i>	
Amount (\$) <i>\$441⁰⁰</i>	Payee address; City; State; Zip Code <i>505 S.E. 9th Amarillo, Tx 79105</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Solicitation / Fundraising Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <i>3-27-17</i>	Payee name <i>Office Depot</i>	
Amount (\$) <i>\$29²³</i>	Payee address; City; State; Zip Code <i>2622 Wolflin Village Amarillo, Tx 79109</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Solicitation / Fundraising Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | 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:	2 FILER NAME <i>Howard Smith</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>1st Quarter</i>	5 Payee name <i>Pay Pal</i>	
6 Amount (\$) <i>\$18.90</i>	7 Payee address; City; State; Zip Code <i>www.paypal.com</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Solicitation/Fundraising Expense</i>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | 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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: 1	2 FILER NAME Howard Smith	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 7,003.59
5 Date 3-13-17	6 Payee name Double U Marketing	
7 Amount (\$) \$7,003.59	8 Payee address; City; State; Zip Code 1608 Washington Amarillo, Tx 79101	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 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	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Howard Smith 15 Filer ID (Ethics Commission Filers)

16 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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25,619.61
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,710.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 16,909.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT

FRANCES HIBBS
NOTARY PUBLIC,
STATE OF TEXAS
My Commission Expires 08-19-2019

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.

Howard Smith
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Howard Smith, this the 6th day of April, 20 17, to certify which, witness my hand and seal of office.

Frances Hibbs Frances Hibbs City Secretary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath