

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: 8

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Smitham Pamela
NICKNAME LAST SUFFIX
Pamela Luther

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
133 N. Riverfront Blvd. 3rd floor
Dallas, TX 75207 LB 10

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(469) 569-2917

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Lou Ann Richardson
NICKNAME LAST SUFFIX

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
6905 Battle Creek
Fort Worth, TX 76116

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(469) 400-3812

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
☒ July 15 ☐ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year
1 / 1 / 25 THROUGH 6 / 30 / 25

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year ☒ Primary ☐ Runoff ☐ Other Description
3 / 3 / 26 ☐ General ☐ Special

12 OFFICE

OFFICE HELD (if any) Dallas County
Crim Appeals No. 2

13 OFFICE SOUGHT (if known)

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

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JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 3000
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3000
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ _____
	4. TOTAL POLITICAL EXPENDITURES	\$ 96.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 3,749.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Pamela Smitham "Pamela Luther", and my date of birth is 10/19/1960.
My address is 133 N. Riverfront Blvd, Dallas, TX, 75207, USA.
(street) (city) (state) (zip code) (country)
Executed in Dallas County, State of TX, on the 1 day of July, 20 25.
(month) (year)
Pamela Luther
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3000
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ —
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ —
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ —
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 96.82
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ —
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ —
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ —
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ —
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ —
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ —
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ —

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4
2 FILER NAME <i>Pamela Luther</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-23-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Robert Lenz</i>	7 Amount of contribution (\$) <i>\$ 250</i>
6 Contributor address; City; State; Zip Code <i>3341 Purdue Ave Dallas TX 75225</i>		
8 Contributor's principal occupation <i>Attorney/Retired</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Retired Attorney</i>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-22-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Randall Isenberg</i>	Amount of contribution (\$) <i>\$ 500</i>
Contributor address; City; State; Zip Code <i>4303 N. Central Expwy Dallas TX 75205</i>		
Contributor's principal occupation <i>Lawyer</i>		Contributor's job title <i>Lawyer</i>
Contributor's employer/law firm <i>Randall Isenberg, PC</i>		Law firm of contributor's spouse (if any) <i>—</i>
If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-21-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>William Burrows</i>	Amount of contribution (\$) <i>\$ 250</i>
Contributor address; City; State; Zip Code <i>4420 Staten Island Dr. Plano Dallas, TX 75024</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Law Office of David Burrows</i>		Law firm of contributor's spouse (if any) <i>—</i>
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4
2 FILER NAME Pamela Luther		3 Filer ID (Ethics Commission Filers)
4 Date 5-21-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Terry Bentley Hill	7 Amount of contribution (\$) \$ 250
6 Contributor address; City; State; Zip Code 3131 McKinney Ave. Dallas, TX 75204		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Law Office of Terry Bentley Hill		11 Law firm of contributor's spouse (if any) —
12 If contributor is a child, law firm of parent(s) (if any)		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Raymond Hindieh	Amount of contribution (\$) \$250
	Contributor address; City; State; Zip Code 1412 S Buckner Blvd, Dallas TX 75217	
Contributor's principal occupation Lawyer		Contributor's job title Lawyer
Contributor's employer/law firm Hindieh Law PLLC		Law firm of contributor's spouse (if any) —
If contributor is a child, law firm of parent(s) (if any)		

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: E.X. Martin	Amount of contribution (\$) \$ 100
	Contributor address; City; State; Zip Code 4100 Stanford Ave. Dallas TX 75225	
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) —
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4
2 FILER NAME <i>Pamela Luther</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>5-19-25</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Marcus Fellman</i>	7 Amount of contribution (\$) \$ 500
6 Contributor address; City; State; Zip Code <i>4131 N. Central Expy Dallas TX 75204</i>		
8 Contributor's principal occupation <i>Attorney</i>		9 Contributor's job title <i>Attorney</i>
10 Contributor's employer/law firm <i>Fellman Law Office</i>		11 Law firm of contributor's spouse (if any) _____
12 If contributor is a child, law firm of parent(s) (if any)		

Date <i>5-28-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Al Ellis</i>	Amount of contribution (\$) \$ 100
Contributor address; City; State; Zip Code <i>3811 Twittle Creek Dallas TX 75219</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Sommerman McCafferty</i>		Law firm of contributor's spouse (if any) _____
If contributor is a child, law firm of parent(s) (if any)		

Date <i>6-26-25</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: <i>Raymond Hindieh</i>	Amount of contribution (\$) \$ 300
Contributor address; City; State; Zip Code <i>1412 S Buckner Blvd., Dallas TX 75217</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>Hindieh Law Firm</i>		Law firm of contributor's spouse (if any) _____
If contributor is a child, law firm of parent(s) (if any)		

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 (JUDICIAL)

SCHEDULE A(J)1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4
2 FILER NAME Pamela Lether		3 Filer ID (Ethics Commission Filers)
4 Date 6-30-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Warren / Josh Abrams	7 Amount of contribution (\$) \$500
6 Contributor address; City; State; Zip Code 10300 N. Central Expy. Dallas TX 75231		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Warren Abrams, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>1</u>		2 FILER NAME <u>Pamela Luther</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>5-15-25</u>		5 Payee name <u>Campaign Partner</u>			
6 Amount (\$) <u>\$34</u>		7 Payee address; <u>Still River, MA 014510000</u>		City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Campaign Website Set-up</u>		(b) Description <u>Website for (617-500-7251) contributions</u>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <u>6-15-25</u>		Payee name <u>Campaign Partner</u>			
Amount (\$) <u>\$29</u>		Payee address; <u>Still River, MA</u>		City; State; Zip Code <u>617-500-7251</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Campaign Website (Advertising)</u>		Description <u>Monthly charge for Donation website</u>		
	<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 <u>5-15-25</u>		Payee name <u>WIX</u>			
Amount (\$) <u>\$33.82</u>		Payee address; <u>100 Gansevoort St. New York, NY</u>		City; State; Zip Code <u>10014</u>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Domain Name fee</u>		
	<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	

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