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:

OFFICE USE ONLY

Date Received

FILED 2019 JAN 14 PM 3:43 JOHN F. WARREN COUNTY CLERK DALLAS COUNTY BY _____ DEPUTY

Date Hand-delivered or Date Postmarked

Receipt #

Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: FIRST: D'Metra MI: V

NICKNAME: LAST: Benson SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

7324 Easton Ave. Ste 124, PMB 398 Dallas Tx 75214

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (214) PHONE NUMBER: 326-4853 EXTENSION:

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: FIRST: Jessica MI:

NICKNAME: LAST: Stettler-Praeger SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

7144 Carrousel Cir Dallas Tx 75214

8 CAMPAIGN TREASURER PHONE

AREA CODE: (214) PHONE NUMBER: 912-1879 EXTENSION:

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 $500 limit
- ☐ Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month / Day / Year: 7 / 1 / 18 THROUGH Month / Day / Year: 12 / 31 / 18

11 ELECTION

ELECTION DATE: Month / Day / Year: 11 / 6 / 18

ELECTION TYPE:
- ☐ Primary
- ☐ Runoff
- ☐ Other Description
- ☑ General
- ☐ Special

12 OFFICE

OFFICE HELD (if any): Judge Dallas County Court at Law No 1

13 OFFICE SOUGHT (if known): Judge Dallas County Court at Law No. 1

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

14 JC/OH NAME: D'Metria Benson

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.

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 8,541.06
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 595 06/XX
	4. TOTAL POLITICAL EXPENDITURES	$ 6590 57/XX
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 36,962 02/XX
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

18 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
JILLIAN TOWNSEND
Notary Public State of Texas
My Commission # 130579989
My Comm. Exp. March 11, 2020

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.

D'Metria Benson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said D'Metria Benson, this the 14th day of January, 20 19, to certify which, witness my hand and seal of office.

Jillian Townsend — Signature of officer administering oath

Jillian Townsend — Printed name of officer administering oath

Notary — Title of officer administering oath

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.	☑ SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	$ 8,541.06 XX
2.	☐ SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$
3.	☐ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	$
4.	☐ SCHEDULE E(J): LOANS (JUDICIAL)	$
5.	☑ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 6590.57 XX
6.	☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8.	☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9.	☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10.	☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12.	☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: 1 of 3

2 FILER NAME: D'Metria Benson

3 Filer ID (Ethics Commission Filers):

4 Date: 7/15/18

5 Full name of contributor: Glenn Holley ☐ out-of-state PAC ID#:

6 Contributor address: 3808 Runge Ct City: Irving State: TX Zip Code: 75038

7 Amount of contribution ($): $41.00

8 Contributor's principal occupation: Attorney

9 Contributor's job title:

10 Contributor's employer/law firm: Self

11 Law firm of contributor's spouse (if any):

12 If contributor is a child, law firm of parent(s) (if any):

Date: 12/28/18

Full name of contributor: Jim S Adler ☐ out-of-state PAC ID#:

Contributor address: 1900 W Loop S 20th Fl City: Houston State: TX Zip Code: 77027

Amount of contribution ($): $500

Contributor's principal occupation: Attorney

Contributor's job title:

Contributor's employer/law firm: Adler + Assoc / self

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date: 12/17/18

Full name of contributor: Evan Shaw ☐ out-of-state PAC ID#:

Contributor address: 2723 Fairmount St City: Dallas State: TX Zip Code: 75201

Amount of contribution ($): 5,000

Contributor's principal occupation: attorney

Contributor's job title:

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1: 2 of 3

2 FILER NAME: D'Melua Benson

3 Filer ID (Ethics Commission Filers):

4 Date: 12/19/18

5 Full name of contributor: James Erdle ☐ out-of-state PAC ID#:

6 Contributor address; City; State; Zip Code: 14801 Quorum Dr #6500 Dallas TX 75254

7 Amount of contribution ($): 250.00

8 Contributor's principal occupation: attorney

9 Contributor's job title:

10 Contributor's employer/law firm: Glast, Phillips + Murray

11 Law firm of contributor's spouse (if any):

12 If contributor is a child, law firm of parent(s) (if any):

Date: 12/19/18

Full name of contributor: Joseph Zapolsky ☐ out-of-state PAC ID#:

Contributor address; City; State; Zip Code: 14801 Quorum Dr #500 Dallas TX 75254

Amount of contribution ($): 250.00

Contributor's principal occupation: attorney

Contributor's job title:

Contributor's employer/law firm: Glast, Phillips + Murray

Law firm of contributor's spouse (if any):

If contributor is a child, law firm of parent(s) (if any):

Date: 9/25/18

Full name of contributor: Frank L Branson ☐ out-of-state PAC ID#:

Contributor address; City; State; Zip Code: 4514 Cole Ave Dallas TX 75205

Amount of contribution ($): 21,500

Contributor's principal occupation: attorney

Contributor's job title:

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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 1 of 6	2 FILER NAME Dimetria Benson	3 Filer ID (Ethics Commission Filers)
4 Date 9-12-18	5 Payee name Costco	
6 Amount ($) $171 39/xx	7 Payee address; City; State; Zip Code 8055 Churchill Way Dallas Tx	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office/jury supplies	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 10-1-18	Payee name Horseshoe Bay Hotel/Resort	
Amount ($) $384 88/xx	Payee address; City; State; Zip Code 200 Hi Circle North Horseshoe Bay Tx 78657	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Lodging	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 10-3-18	Payee name National Association of Women Judges	
Amount ($) $595 00/xx	Payee address; City; State; Zip Code 1001 Connecticut Avenue N.W Ste 1138 Washington D.C. 20036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - Dues/conference fees	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 2 of 6	2 FILER NAME D'Metria Benson	3 Filer ID (Ethics Commission Filers)
4 Date 11-7-18	5 Payee name State Bar of Texas	
6 Amount ($) $200 00/XX	7 Payee address; City; State; Zip Code 1414 Colorado St. Austin, Texas 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other – continuing education	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 10-22-18	Payee name El Dorado Hotel & Spa	
Amount ($) $196 24/XX	Payee address; City; State; Zip Code 309 W. San Francisco Santa Fe, NM 87501	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Continuing Education	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9-13-18	Payee name American Inns of Court	
Amount ($) $200 00/XX	Payee address; City; State; Zip Code 225 Reinekers Lane Ste 770 Alexandria, Va 22314	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Dues	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: 3 of 6	2 FILER NAME D'Metra Benson	3 Filer ID (Ethics Commission Filers)
4 Date 10-9-18	5 Payee name Hyatt Regency-San Antonio	
6 Amount ($) $553 54/XX	7 Payee address; City; State; Zip Code 123 Lasalo St. San Antonio, Tx 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Lodging-Travel out of District	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 7-11-18	Payee name Childress Fabrics	
Amount ($) $478 15/XX	Payee address; City; State; Zip Code 1908 South Good Latimer Dallas Tx 75226	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead expense reupholster furniture	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8-8-18	Payee name Childress Fabrics	
Amount ($) $724 78	Payee address; City; State; Zip Code 1908 South Good Latimer Dallas Tx 75226	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead Reupholster furniture	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 of 6	Dillemia Benson	

4 Date	5 Payee name
8/13/18	Costco

6 Amount ($)	7 Payee address; City; State; Zip Code
120.00	8055 Churchill Way Dallas TX 75251

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	supplies/jury/office	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
8/22/18	Southwest Airlines

Amount ($)	Payee address; City; State; Zip Code
227.97	8008 Herb Kelleher Way Dallas TX 75235

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Travel out of District	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
8/23/18	Oriental Rug Cleaning

Amount ($)	Payee address; City; State; Zip Code
300.94	3907 Ross Avenue Dallas TX 75204

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Office overhead/rug cleaning	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
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Fees
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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: 5 of 6

2 FILER NAME: D'Metria Benson

3 Filer ID (Ethics Commission Filers):

4 Date: 7-2-18

5 Payee name: Baker's Ribs

6 Amount ($): $111.17 XX

7 Payee address; City; State; Zip Code: 3033 Main St. Dallas TX 75226

8 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

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 7-2-18

Payee name: Dallas Bar Assn.

Amount ($): $395.00 XX

Payee address; City; State; Zip Code: 2101 Ross Ave Dallas, TX 75201

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Other - continuing education

Description
- [ ] Check if travel outside of Texas. Complete Schedule T.
- [ ] Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 7-5-18

Payee name: Texas Center for the Judiciary

Amount ($): $275.00 XX

Payee address; City; State; Zip Code: 1210 San Antonio St Ste 800 Austin, TX 78701

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Other - education expense

Description
- [ ] Check if travel outside of Texas. Complete Schedule T.
- [ ] Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By Candidate/Officeholder/Political Committee
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Fees
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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: 6 of 6	2 FILER NAME D'Metrian Benson	3 Filer ID (Ethics Commission Filers)
4 Date 9/10/18	5 Payee name Marriott Marquis Houston	
6 Amount ($) 656.88	7 Payee address; City; State; Zip Code 1777 Walker Avenue Houston TX 77010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Outside District Medical Conference	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 5940	Payee name ANB	
Amount ($) 7-1-18 - 12/31/18	Payee address; City; State; Zip Code P.O. Box 40, Terrell TX 75160	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees service charges	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED