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 2020 JAN 15 PM 12:58 JOHN F. WARREN COUNTY CLERK DALLAS COUNTY DEPUTY

Date Hand-delivered or Date Postmarked

Receipt # | Amount $

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: | FIRST: D'Metria | MI: V

NICKNAME: | LAST: Benson | SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

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

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

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE: (214) | PHONE NUMBER: 320-4853 | 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 / 19 THROUGH Month Day Year: 12 / 31 / 19

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 #1

13 OFFICE SOUGHT (if known): JUDGE, Dallas County Court at Law #1

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

14 JC/OH NAME

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, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	$ 0
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ -0-
3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 807 31/XX
4.	**TOTAL POLITICAL EXPENDITURES**	$ 8724 72/XX
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 49,052 58/XX
6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ -0-

EXPENDITURE TOTALS

CONTRIBUTION BALANCE

OUTSTANDING LOAN TOTALS

18 AFFIDAVIT

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Dmetria Benson, this the 14 day of Jan, 20 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

A S H RODRIGUEZ
Notary Public, State of Texas
Comm. Expires 06-24-2022
Notary ID 124210102

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
D'Metria Benson	

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☐ SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	$
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	$ 8724 72/21
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	$

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)
1/5	D'Metria Benson	

4 Date	5 Payee name
7-29-19	Sonny Forjan

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$129.99 XX	302 N. Market St.	Dallas	Tx	75202

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of the schedule): Food Beverage Expense

(b) Description: Intern hand

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
8-16-19	UPS Store

Amount ($)	Payee address;	City;	State;	Zip Code
300.00 XX	7324 Easton Ave. Ste 124	Dallas	Tx	75214

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of the schedule): Office Overhead Exp.

Description: Rental expense

☐ 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
8-30-19	Texas Center for the Judiciary

Amount ($)	Payee address;	City;	State;	Zip Code
$295.00 XX	1210 San Antonio St	Austin	Tx	78701

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of the schedule): Other

Description: Judicial Education expense

☐ 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)
2/5	D'Metria Benson	

4 Date	5 Payee name
9-6-19	JW Marriott

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$826.63 TX	23808 Resort Pkwy	San Antonio	TX	78261

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

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

Date	Payee name
9-3-19	National Judicial College

Amount ($)	Payee address;	City;	State;	Zip Code
$1000.00 TX	College Drive	Reno	NV	89557

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Other	Judicial Education Expense
	☐ 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
9-12-19	Allianz Travel

Amount ($)	Payee address;	City;	State;	Zip Code
$450.00 TX	9950 Mayland Dr	Richmond	VA	23233

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Other	Travel insurance for out of country travel
	☐ 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)
3/5	Dimetria Benson	

4 Date	5 Payee name
9-23-19	Hotel Cardinal

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$1923 84/XX	4 Rue Élisée Reclus	Bordeaux	France	33000

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Travel out of District

(b) Description: Hotel expense

(c) ☑ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

Date	Payee name
9-25-19	Dimetria Benson

Amount ($)	Payee address;	City;	State;	Zip Code
$221.59/XX	4 Rue Élisée Reclus	Bordeaux	France	33000

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Travel out of District

Description: food/Beverage expense

☐ 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
10-8-19	Texas Bar Foundation

Amount ($)	Payee address;	City;	State;	Zip Code
$1250 00/XX	515 Congress Ave. Ste 1755	Austin	Tx	78701

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Contributions/Donations

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: 4/5

2 FILER NAME: DiMetria Benson

3 Filer ID (Ethics Commission Filers):

4 Date: 10-9-19

5 Payee name: American Inns of Court

6 Amount ($): $200.00

7 Payee address; City; State; Zip Code: 225 Reinekers Lane Ste 770 Alexandria Va. 22314

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Dues/Fees

(b) Description: Dues

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

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

---

Date: 10-17-19

Payee name: Costco

Amount ($): $167.22

Payee address; City; State; Zip Code: 8055 Churchill Way Dallas Tx 75251

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Food/Beverage Expense

Description: Jury supplies

☐ 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: 10-28-19

Payee name: Bed Bath & Beyond

Amount ($): $110.36

Payee address; City; State; Zip Code: 8005 Park Lane Dallas Tx 75231

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): Office overhead

Description: furnishings

☐ 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)
5/5	Dillestria Benson	

4 Date	5 Payee name
11-12-19	Michaels

6 Amount ($)	7 Payee address;	City;	State;	Zip Code
$ 300 00/xx	5500 Greenville Ave #400	Dallas	Tx	75206

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

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

Date	Payee name
10-15-19	Dallas County Democratic Party

Amount ($)	Payee address;	City;	State;	Zip Code
$ 500 00/xx	1414 N. Washington Ave	Dallas	Tx	75204

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Contributions	
	☐ 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
12-23-19	Fine China

Amount ($)	Payee address;	City;	State;	Zip Code
$ 248 87/xx	1914 Commerce St	Dallas	Tx	75201

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Food Beverage Expense	Staff holiday luncheon
	☐ 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

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:

2 FILER NAME: D'Metria Benson

3 Filer ID (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee: Hotel Cardinal

5 Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [x] Schedule F1
- [ ] Schedule F2
- [ ] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC
- [ ] Schedule B-SS

6 Dates of travel: 9-23-19 / 9-27-19

7 Name of person(s) traveling: D'Metria Benson

8 Departure city or name of departure location: Dallas

9 Destination city or name of destination location: Bordeaux, France

10 Means of transportation: Air

11 Purpose of travel (including name of conference, seminar, or other event): Conference NIC Judicial Renaissance

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [ ] Schedule F1
- [ ] Schedule F2
- [ ] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC
- [ ] Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- [ ] Schedule A2
- [ ] Schedule B
- [ ] Schedule B(J)
- [ ] Schedule C2
- [ ] Schedule D
- [ ] Schedule F1
- [ ] Schedule F2
- [ ] Schedule F4
- [ ] Schedule G
- [ ] Schedule H
- [ ] Schedule COH-UC
- [ ] Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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