

# 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:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <i>D'Metria</i>	MI	OFFICE USE ONLY  Date Received  By  JOHN F. WARREN COUNTY CLERK DALLAS COUNTY DEPUTY  2026 JAN 15 PM 4:23  FILED		
	NICKNAME	LAST <i>Benson</i>	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE; ZIP CODE		
<i>7324 Gaston Ave. Ste. 124, PMS 398 Dallas, Texas 75214</i>						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE <i>(214)</i>	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Jessica</i>	MI	Receipt #      Amount \$		
	NICKNAME	LAST <i>Praeger</i>	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;			CITY; STATE; ZIP CODE		
	<i>7144 Carousel Cir Dallas Tx 75</i>					
8 CAMPAIGN TREASURER PHONE	AREA CODE <i>(214)</i>	PHONE NUMBER <i>912 -</i>	EXTENSION			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15		<input 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 Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)	
10 PERIOD COVERED	Month <i>7</i>	Day <i>1</i>	Year <i>25</i>	Month <i>12</i>	Day <i>31</i>	Year <i>25</i>
11 ELECTION	ELECTION DATE Month <i>3</i> Day <i>4</i> Year <i>26</i>	ELECTION TYPE  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description  <input type="checkbox"/> General <input type="checkbox"/> Special				
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)		
	<i>Judge, Dallas County Court at Law #1</i>			<i>Judge, Dallas County Court at Law #1</i>		
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.					
Additional Pages		COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS			

GO TO PAGE 2

# 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)	\$ <u>-0-</u>	
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>100,052.25</u>	
3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>803.33</u>	
4. TOTAL POLITICAL EXPENDITURES	\$ <u>35,514.06</u>	
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>88,462.07</u>	
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>-0-</u>	
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.		



Demetria Benson  
Signature of Candidate/Officeholder

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Demetria Benson this the 15<sup>th</sup> day of January,  
20 20, to certify which, witness my hand and seal of office.

Alejandra Ortiz  
Signature of officer administering oath

Alejandra Ortiz  
Printed name of officer administering oath

Title of officer administering oath

OR

**(2) Unsworn Declaration**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.  
(month) (year)

Demetria Benson  
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH		COVER SHEET PG 3	
19 FILE NAME	20 Filer ID (Ethics Commission Files)		
D'Metria Benson			
21 SUBTOTALS		NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 160,52.25	2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
SUBTOTAL AMOUNT		SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
\$ 160,52.25		\$	
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		6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
\$ 34,514.06		\$	
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 FILE	
\$		\$	

# 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:
2 FILER NAME <i>P Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>11/27/25</i>	5 Full name of contributor <i>Karen Brooks</i>	6 Contributor address; City; State; Zip Code <i>5825 Logan Drive Dallas TX 75094</i>
7 Amount of contribution (\$) <i>2,500.00</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Tm, Toyota, Lexus</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>11/4/25</i>		Full name of contributor <i>Aubrey Nick Pittman</i>
Contributor address; City; State; Zip Code <i>901 Main St, #3670 Dallas TX 75202</i>		Amount of contribution (\$) <i>5,000.00</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>The Pittman Law Firm</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>10/27/25</i>		Full name of contributor <i>Shelli Morrison</i>
Contributor address; City; State; Zip Code <i>120 E. Corsicana St Athens TX 75751</i>		Amount of contribution (\$) <i>1,578.47</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>The Morrison 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:																
2 FILER NAME <i>P Merlin Benson</i>		3 Filer ID (Ethics Commission Filers)																
4 Date <i>10/22/25</i>	5 Full name of contributor <i>Jules Stein</i>	6 Contributor address; City; State; Zip Code <i>PO Box 140306 Dallas TX 75244</i>																
7 Amount of contribution (\$) <i>1652.49</i>																		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title																
10 Contributor's employer/law firm <i>Jules Stein Attorney</i>		11 Law firm of contributor's spouse (if any)																
12 If contributor is a child, law firm of parent(s) (if any)																		
<table border="1"> <tr> <td>Date <i>10/16/25</i></td> <td>Full name of contributor <i>Harry Friedman</i></td> <td>□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>25 Glen Alpine Dr 611B Dallas TX 75248</i></td> <td>Amount of contribution (\$) <i>\$11000.00</i></td> </tr> <tr> <td colspan="2">Contributor's principal occupation <i>attorney</i></td> <td colspan="2">Contributor's job title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm <i>Friedman + Feiger</i></td> <td colspan="2">Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> <td></td> </tr> </table>			Date <i>10/16/25</i>	Full name of contributor <i>Harry Friedman</i>	□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>25 Glen Alpine Dr 611B Dallas TX 75248</i>	Amount of contribution (\$) <i>\$11000.00</i>	Contributor's principal occupation <i>attorney</i>		Contributor's job title		Contributor's employer/law firm <i>Friedman + Feiger</i>		Law firm of contributor's spouse (if any)		If contributor is a child, law firm of parent(s) (if any)			
Date <i>10/16/25</i>	Full name of contributor <i>Harry Friedman</i>	□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>25 Glen Alpine Dr 611B Dallas TX 75248</i>	Amount of contribution (\$) <i>\$11000.00</i>															
Contributor's principal occupation <i>attorney</i>		Contributor's job title																
Contributor's employer/law firm <i>Friedman + Feiger</i>		Law firm of contributor's spouse (if any)																
If contributor is a child, law firm of parent(s) (if any)																		
<table border="1"> <tr> <td>Date <i>10/16/25</i></td> <td>Full name of contributor <i>James Goff</i></td> <td>□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>12720 Merit Brw Hous Dallas TX 75251</i></td> <td>Amount of contribution (\$) <i>1578.47</i></td> </tr> <tr> <td colspan="2">Contributor's principal occupation <i>attorney</i></td> <td colspan="2">Contributor's job title</td> </tr> <tr> <td colspan="2">Contributor's employer/law firm <i>Goff Law</i></td> <td colspan="2">Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> <td></td> </tr> </table>			Date <i>10/16/25</i>	Full name of contributor <i>James Goff</i>	□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>12720 Merit Brw Hous Dallas TX 75251</i>	Amount of contribution (\$) <i>1578.47</i>	Contributor's principal occupation <i>attorney</i>		Contributor's job title		Contributor's employer/law firm <i>Goff Law</i>		Law firm of contributor's spouse (if any)		If contributor is a child, law firm of parent(s) (if any)			
Date <i>10/16/25</i>	Full name of contributor <i>James Goff</i>	□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>12720 Merit Brw Hous Dallas TX 75251</i>	Amount of contribution (\$) <i>1578.47</i>															
Contributor's principal occupation <i>attorney</i>		Contributor's job title																
Contributor's employer/law firm <i>Goff Law</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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>10/1/25</i>	5 Full name of contributor <i>Lulu LaFitte</i>	6 Contributor address; City; State; Zip Code <i>7102 Woodspring Dr Garland TX 75044</i>
7 Amount of contribution (\$) <i>263.51</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>self</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>10/1/25</i>		Full name of contributor <i>Michael Lyons</i>
		□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>2101 Cedar Springs Rd #1900 Dallas 75201</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Lyons &amp; Simmons</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>10/1/25</i>		Full name of contributor <i>William Kanute</i>
		□ out-of-state PAC ID#: Contributor address; City; State; Zip Code <i>530 Frances Way Richardson TX 75081</i>
Contributor's principal occupation <i>unemployed</i>		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

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>P' Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/26/25</i>	5 Full name of contributor <i>Charles Hoedebek</i>	6 Contributor address; City; State; Zip Code <i>675 E Royal Ln #1084 Dallas TX 75231</i>
7 Amount of contribution (\$) <i>5,000.00</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>self</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>9/26/25</i>		Full name of contributor <i>Kelly Cain</i>
Contributor address; City; State; Zip Code <i>8720 Arthur Packett Dallas TX 75213</i>		Amount of contribution (\$) <i>26351</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Walters Bullock &amp; Cain</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Mark Tuer</i>
Contributor address; City; State; Zip Code <i>10440 N Central Expressway #600 Dallas TX</i>		Amount of contribution (\$) <i>105249</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Freddie Gabriel</i>	6 Contributor address; City; State; Zip Code <i>111 W Mockingbird Ln #1200 Dallas TX 75247</i>
7 Amount of contribution (\$) <i>263 51</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Law Office Domingo Garcia</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>9/25/25</i>		Full name of contributor <i>Alex Hogan</i>
Contributor address; City; State; Zip Code <i>600 Summerwood Ct R Soto 75115</i>		Amount of contribution (\$) <i>243 51</i>
Contributor's principal occupation <i>a Hornet</i>		Contributor's job title
Contributor's employer/law firm <i>Law Office Domingo Garcia</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Laura Wright</i>
Contributor address; City; State; Zip Code <i>567 Peavy Rd Dallas TX 75218</i>		Amount of contribution (\$) <i>105 72</i>
Contributor's principal occupation <i>a Hornet</i>		Contributor's job title
Contributor's employer/law firm <i>Walters Ballela &amp; Crain</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

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2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Sharita Blacknall</i>	6 Contributor address: <input type="checkbox"/> out-of-state PAC ID#: _____ City: _____ State: _____ Zip Code: _____ <i>5445 Legacy Dr #650 Plano 75024</i>	
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title	
10 Contributor's employer/law firm <i>The Blacknall Firm</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>9/24/25</i>		Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address: <input type="checkbox"/> out-of-state PAC ID#: _____ City: _____ State: _____ Zip Code: _____ <i>9300 LBJ Freeway #1185 Dallas TX 75213</i>	Amount of contribution (\$) <i>125</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title	
Contributor's employer/law firm <i>Stradley Law Firm</i>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date <i>9/24/25</i>		Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address: <input type="checkbox"/> out-of-state PAC ID#: _____ City: _____ State: _____ Zip Code: _____ <i>5938 Vanderbilt Ave Dallas 75206</i>	Amount of contribution (\$) <i>26351</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title	
Contributor's employer/law firm <i>Gillespie Sanford LLP</i>		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/24/25</i>	5 Full name of contributor <i>Katelyn Logic</i>	6 Contributor address, City, State, Zip Code <i>1700 Mercer Pkwy #11404 Dallas TX 75234</i>
7 Amount of contribution (\$) <i>100.00</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Logic Law firm</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>9/24/25</i>		Full name of contributor <i>Warren Armstrong</i>
Contributor address, City, State, Zip Code <i>6014 Goodwin Ave Dallas TX 75248</i>		Amount of contribution (\$) <i>526.50</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Armstrong Law</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/22/25</i>		Full name of contributor <i>Damian Williams</i>
Contributor address, City, State, Zip Code <i>10505 Wyatt St Dallas TX 75218</i>		Amount of contribution (\$) <i>526.50</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>unemployed</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  
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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:
2 FILER NAME <i>D'Nebrin Bensen</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/21/25</i>	5 Full name of contributor <i>Adam L Crone</i>	6 Contributor address; City; State; Zip Code <i>123 N Crockett St #200 Sherman TX 75090</i>
7 Amount of contribution (\$) <i>526.50</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>LeCrone Law Firm</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>9/21/25</i>		Full name of contributor <i>William D. Wiles</i>
Contributor address; City; State; Zip Code <i>1301 Wunder Brook Dr. Garland TX 75044</i>		Amount of contribution (\$) <i>210.91</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Wager LLP</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/19/25</i>		Full name of contributor <i>Kelly Liebbe</i>
Contributor address; City; State; Zip Code <i>10446 N Central Express Dallas TX 75231</i>		Amount of contribution (\$) <i>1652.49</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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2 FILER NAME <i>N'Neilin Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/18/25</i>	5 Full name of contributor <i>John Owen</i>	6 Contributor address; City; State; Zip Code <i>10670 N. Central Expressway #530 Dallas TX 75231</i>
7 Amount of contribution (\$) <i>26351</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Owen + Fazio</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>9/18/25</i>		Full name of contributor <i>Roseanne Mills</i>
Contributor address; City; State; Zip Code <i>4406 Casaloma Ave Dallas TX 75244</i>		Amount of contribution (\$) <i>16572</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/17/25</i>		Full name of contributor <i>Ladd Sanger</i>
Contributor address; City; State; Zip Code <i>3506 Maple Ave #100 Dallas 75214</i>		Amount of contribution (\$) <i>263044</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Slade Davis Sanger</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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/15/25</i>	5 Full name of contributor <i>P. Michael McCullough</i>	6 Contributor address; City; State; Zip Code <i>12222 Merit Drive #1200 Dallas TX 75251</i>
7 Amount of contribution (\$) <i>526.99</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>McCullough Mediation</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>9/15/25</i>		Full name of contributor <i>Hardin Ramsey</i>
Contributor address; City; State; Zip Code <i>3860 W. Northwy #270 Dallas TX 75220</i>		Amount of contribution (\$) <i>1,000.00</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>self</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/19/25</i>		Full name of contributor <i>Dawn Estes</i>
Contributor address; City; State; Zip Code <i>35611 Turtle Creek Blvd #2000 Dallas TX 75219</i>		Amount of contribution (\$) <i>500.00</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Elder Thorne Evans + Robinson</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:
2 FILER NAME <i>D'Metria Bevan</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/2/25</i>	5 Full name of contributor <i>Lennie Bollerger</i>	6 Contributor address; City; State; Zip Code <i>2128 Virginia St McKinney TX 752069</i>
7 Amount of contribution (\$) <i>5,000.00</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Wormington &amp; Bollerger</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>9/2/25</i>		Full name of contributor <i>Walters Kraus Paul + Siegel</i>
Contributor address; City; State; Zip Code <i>3141 Hood St #700 Dallas TX 75219</i>		Amount of contribution (\$) <i>2630.44</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Walters Kraus Paul + Siegel</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/2/25</i>		Full name of contributor <i>Bruce Steckler</i>
Contributor address; City; State; Zip Code <i>12720 Hillcrest Dallas TX 75236</i>		Amount of contribution (\$) <i>2630.44</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Steckler Waerne Lowe</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:
2 FILER NAME <i>D'Melvin Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>8/29/25</i>	5 Full name of contributor <i>Scott Barber</i>	6 Contributor address; City; State; Zip Code <i>2908 MastersCircle Dallas TX 75214</i>
7 Amount of contribution (\$) <i>105249</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Bennett Legal</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>8/28/25</i>		Full name of contributor <i>Charla Aldous</i>
Contributor address; City; State; Zip Code <i>4311 Oaklawn Ave #150 Dallas TX 75214</i>		Amount of contribution (\$) <i>5,000.00</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Aldous Law</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>8/27/25</i>		Full name of contributor <i>Ben Taylor</i>
Contributor address; City; State; Zip Code <i>2621 Lakefront Ct Dallas TX 75231</i>		Amount of contribution (\$) <i>100.00</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Ted Blyant Assoc</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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>8/27/25</i>	5 Full name of contributor <i>Scott Kidzi</i>	6 Contributor address; City; State; Zip Code <i>10440 N Central Expressway Dallas 75231</i>
7 Amount of contribution (\$) <i>105249</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Self / The Kidzi Firm</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>8/26/25</i>		Full name of contributor <i>Richen Brantley</i>
Contributor address; City; State; Zip Code <i>855 Texas Street #100 Fort Worth TX 76102</i>		Amount of contribution (\$) <i>263044</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Brantley Kelly PLLC</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>8/15/25</i>		Full name of contributor <i>Sean Breen</i>
Contributor address; City; State; Zip Code <i>1500 Pearl St Austin TX 78705</i>		Amount of contribution (\$) <i>105249</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Howry Breen + Herman</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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>8/25/25</i>	5 Full name of contributor <i>Brian Lauten</i>	6 Contributor address: <i>3811 Turtle Creek Blvd Dallas TX 75214</i> City: _____ State: _____ Zip Code: _____
7 Amount of contribution (\$) <i>1052 49</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Brian Lauten PC</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>8/25/25</i>		Full name of contributor <i>Ben Martin</i>
Contributor address: <i>3500 McElroy Ave Dallas TX 75219</i>		City: _____ State: _____ Zip Code: _____
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Self/Ben Martin Law Group</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>8/30/25</i>		Full name of contributor <i>Carter Arnett PLLC</i>
Contributor address: <i>8150 N Central Expressway #500 Dallas 75204</i>		City: _____ State: _____ Zip Code: _____
Contributor's principal occupation <i>attorneys</i>		Contributor's job title
Contributor's employer/law firm <i>Carter Arnett PLLC</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.

2 FILER NAME <i>P. Metria Benson</i>		1 Total pages Schedule A(J)1: 1
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Jessica Prager</i>	3 Filer ID (Ethics Commission Filers) 7 Amount of contribution (\$) <i>100</i>
6 Contributor address: <i>7104 Carranca Circle Dallas TX 75214</i>	City: _____ State: _____ Zip Code: _____	
8 Contributor's principal occupation <i>retired</i>	9 Contributor's job title	
10 Contributor's employer/law firm <i>N/A</i>	11 Law firm of contributor's spouse (if any) <i>Laurence J Prager</i>	
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>	Full name of contributor <i>Kathy Shepard / Salon Millennium</i>	Amount of contribution (\$) <i>\$100</i>
Contributor address: <i>2117 E Southlake Blvd #160 Southlake TX 76092</i>	City: _____ State: _____ Zip Code: _____	
Contributor's principal occupation <i>handlener</i>	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 <i>9/25/25</i>	Full name of contributor <i>Gant &amp; Hails</i>	Amount of contribution (\$) <i>\$1,000</i>
Contributor address: <i>1409 Botham Jean Blvd #711 Dallas TX 75215</i>	City: _____ State: _____ Zip Code: _____	
Contributor's principal occupation <i>attorneys</i>	Contributor's job title	
Contributor's employer/law firm <i>Gant &amp; Hails</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:
2 FILER NAME <i>D. Martin Person</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Damyle Holland</i>	6 Contributor address; City: State: Zip Code <i>329 Centre St. Dallas TX 75208</i>
7 Amount of contribution (\$) <i>250<sup>00</sup></i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Damyle Holland Law Firm</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>9/25/25</i>		Full name of contributor <i>Van Shaw</i>
Contributor address; City: State: Zip Code <i>2723 Fairmount St Dallas TX 75201</i>		Amount of contribution (\$) <i>5,000<sup>00</sup></i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Law Office of Van Shaw</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Jay Brousseau</i>
Contributor address; City: State: Zip Code <i>2608 Army Blvd Dallas TX 75207</i>		Amount of contribution (\$) <i>100</i>
Contributor's principal occupation <i>photographer</i>		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.

# 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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Thomas Shaw</i>	6 Contributor address; City; State; Zip Code <i>8404 Greenwell Street A101 Dallas TX 75243</i>
7 Amount of contribution (\$) <i>2,000<sup>00</sup></i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Law Office Thomas E Shaw</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>9/25/25</i>		Full name of contributor <i>Ted B Lyon</i>
Contributor address; City; State; Zip Code <i>18601 LB5 #525 Town East Forest Mesquite TX 75150</i>		Amount of contribution (\$) <i>5,000</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Ted B Lyon + Assoc</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Haynes &amp; Boone</i>
Contributor address; City; State; Zip Code <i>2801 N Harwood #2300 Dallas TX 75201</i>		Amount of contribution (\$) <i>3,000<sup>00</sup></i>
Contributor's principal occupation <i>attorneys</i>		Contributor's job title
Contributor's employer/law firm <i>Haynes &amp; Boone</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1:															
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)															
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Bell Nunnally &amp; Martin LLP</i>	6 Contributor address: <i>2323 Ross Ave, #1900 Dallas TX 75201</i> 7 Amount of contribution (\$) <i>1,500</i>															
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title															
10 Contributor's employer/law firm <i>Bell Nunnally</i>		11 Law firm of contributor's spouse (if any)															
12 If contributor is a child, law firm of parent(s) (if any)																	
<table border="1"> <tr> <td>Date <i>9/25/25</i></td> <td>Full name of contributor <i>Miller Copeland LLP</i></td> <td>Amount of contribution (\$) <i>\$500.00</i></td> </tr> <tr> <td>Contributor address: <i>406 Servco #1 Dallas TX 75201</i></td> <td>City: _____ State: _____ Zip Code: _____</td> <td></td> </tr> <tr> <td>Contributor's principal occupation <i>attorney</i></td> <td>Contributor's job title</td> <td></td> </tr> <tr> <td>Contributor's employer/law firm <i>Miller Copeland</i></td> <td colspan="2">Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date <i>9/25/25</i>	Full name of contributor <i>Miller Copeland LLP</i>	Amount of contribution (\$) <i>\$500.00</i>	Contributor address: <i>406 Servco #1 Dallas TX 75201</i>	City: _____ State: _____ Zip Code: _____		Contributor's principal occupation <i>attorney</i>	Contributor's job title		Contributor's employer/law firm <i>Miller Copeland</i>	Law firm of contributor's spouse (if any)		If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>	Full name of contributor <i>Miller Copeland LLP</i>	Amount of contribution (\$) <i>\$500.00</i>															
Contributor address: <i>406 Servco #1 Dallas TX 75201</i>	City: _____ State: _____ Zip Code: _____																
Contributor's principal occupation <i>attorney</i>	Contributor's job title																
Contributor's employer/law firm <i>Miller Copeland</i>	Law firm of contributor's spouse (if any)																
If contributor is a child, law firm of parent(s) (if any)																	
<table border="1"> <tr> <td>Date <i>9/25/25</i></td> <td>Full name of contributor <i>Kershaw Anderson Kiz, PLLC</i></td> <td>Amount of contribution (\$) <i>250.00</i></td> </tr> <tr> <td>Contributor address: <i>12400 Coit Rd #800 Dallas TX 75251</i></td> <td>City: _____ State: _____ Zip Code: _____</td> <td></td> </tr> <tr> <td>Contributor's principal occupation <i>attorney</i></td> <td>Contributor's job title</td> <td></td> </tr> <tr> <td>Contributor's employer/law firm <i>Kershaw Anderson Kiz</i></td> <td colspan="2">Law firm of contributor's spouse (if any)</td> </tr> <tr> <td colspan="3">If contributor is a child, law firm of parent(s) (if any)</td> </tr> </table>			Date <i>9/25/25</i>	Full name of contributor <i>Kershaw Anderson Kiz, PLLC</i>	Amount of contribution (\$) <i>250.00</i>	Contributor address: <i>12400 Coit Rd #800 Dallas TX 75251</i>	City: _____ State: _____ Zip Code: _____		Contributor's principal occupation <i>attorney</i>	Contributor's job title		Contributor's employer/law firm <i>Kershaw Anderson Kiz</i>	Law firm of contributor's spouse (if any)		If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>	Full name of contributor <i>Kershaw Anderson Kiz, PLLC</i>	Amount of contribution (\$) <i>250.00</i>															
Contributor address: <i>12400 Coit Rd #800 Dallas TX 75251</i>	City: _____ State: _____ Zip Code: _____																
Contributor's principal occupation <i>attorney</i>	Contributor's job title																
Contributor's employer/law firm <i>Kershaw Anderson Kiz</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:	
2 FILER NAME <i>P. Metrin Benson</i>		3 Filer ID (Ethics Commission Filers)	
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Candy Solls</i>	6 Contributor address: <i>11700 Preston Rd Ste Dallas</i> City: <i>Dallas</i> State: <i>TX</i> Zip Code: <i>75236</i>	7 Amount of contribution (\$) <i>100</i>
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title	
10 Contributor's employer/law firm <i>Self</i>		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 <i>Frank L. Braason PC</i>	□ out-of-state PAC ID#: <i>4514 Col Ave #1802 Dallas TX 75205</i>	Amount of contribution (\$) <i>2,500</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title	
Contributor's employer/law firm <i>Frank L. Braason PC</i>		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	□ out-of-state PAC ID#:	Amount of contribution (\$)
Contributor address; City; State: Zip Code			
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**  
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# 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	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date	5 Payee name
--------	--------------

6 Amount (\$)	7 Payee address;	City:	State:	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
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	(c) <input type="checkbox"/> Check if individual's residence address.	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address;	City:	State:	Zip Code
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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
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Date	Payee name
------	------------

Amount (\$)	Payee address;	City:	State:	Zip Code
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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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**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	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date <i>8-22-25</i>	5 Payee name <i>Von Lane Bus Line</i>	
6 Amount (\$) <i>\$ 254 00</i>	7 Payee address; <i>3300 W Mockingbird Ln. Dallas, Texas 75235</i>	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  <i>TRAVEL</i>	(b) Description  <i>Travel out of District</i>
	<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>8-28-25</i>	Payee name <i>Reilly Echoes Printing</i>	
Amount (\$) <i>\$ 750 00</i>	Payee address; <i>1710 S Harwood St. Dallas, Texas 75215</i>	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  <i>Printing Expense</i>	Description  <i>Campaign Materials</i>
	<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 <i>8-26-25</i>	Payee name <i>Jay Brousseau Photography</i>	
Amount (\$) <i>1086 56</i>	Payee address; <i>2608 Irving Blvd. Dallas, Texas 75207</i>	City; State; Zip Code
<input type="checkbox"/> Check if individual's residence address.		
  <b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  <i>Other</i>	Description  <i>Marketing</i>
	<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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

**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	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:	2 FILER NAME <i>D'Metria Benson</i>	3 Filer ID (Ethics Commission Filers)	
4 Date <i>9-9-25</i>	5 Payee Name <i>Espy Consulting</i>		
6 Amount (\$) <i>\$1 2000.00</i>	7 Payee address; <i>4206 Goodfellow DR Dallas, Texas 75229</i>	City: _____ State: _____ Zip Code: _____	
	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Consulting Expense</i>	(b) Description	
	(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 <i>8-21-25</i>	Payee name <i>UPS Store</i>		
Amount (\$) <i>\$1 204.00</i>	Payee address; <i>7324 Gaston Ave. Ste 124, PMB 398 Dallas Tx 75214</i>	City: _____ State: _____ Zip Code: _____	
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Campaign Expense</i>	Description <i>P.O. Box rental</i>	
	<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 <i>9-18-24</i>	Payee name <i>Elite News</i>		
Amount (\$) <i>\$1 800.00</i>	Payee address; <i>P.O. Box 380071 Duncanville, Tx 75138</i>	City: _____ State: _____ Zip Code: _____	
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	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

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**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	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
	\$ 1500 <del>99</del>	P.O. Box 130987 Dallas, Texas 75313-0987	
	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Contribution	Advertising scholarship	
	<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		
9-30-25	Mac Taylor Inn of Court		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 250 <del>00</del>	P.O. Box 750116 Dallas, Texas 75275-0116		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Dues		
	<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		
9-30-25	Oak Hall Industries		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 605 <del>07</del>	840 Union St. P.O. Box 1878 Salem, Va 24153		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Other	Judicial Robe	
	<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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**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	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Campaign Expense	Advertising	
	<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		
10-7-25	The Blair Foundation		
Amount (\$)	Payee address; City; State; Zip Code		
\$480.00	P.O. Box 380071 Duncanville, Texas 75183		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Advertising Expense	Campaign Publicity	
	<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		
10-8-25	Democracy Toolbox		
Amount (\$)	Payee address; City; State; Zip Code		
\$4000.00	P.O. Box 6250 McKinney, Texas 75071		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Consulting Expense	Consulting	
	<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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**POLITICAL EXPENDITURES MADE  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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**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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Consulting Expense	Advertising	
	<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		
10-21-25	Johnston, Toby Baruch		
Amount (\$)	Payee address; City; State; Zip Code		
# 2557 50	12377 Merit Dr. Dallas, Texas 75251		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Legal Services		
	<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		
11-16-25	Dallas County Democratic Party		
Amount (\$)	Payee address; City; State; Zip Code		
# 2500 00	1414 N. Washington Ave Dallas, Texas 75204		
<input type="checkbox"/> Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Fees	filing fee	
	<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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**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	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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
	<input type="checkbox"/> Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
	Consulting Expense	Consulting	
	<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		
12-7-25	Costco		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 155 70	8055 Churchill Way Dallas, Texas 75251		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Campaign Expense	Stamps	
	<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		
12-16-25	Homegoods		
Amount (\$)	Payee address; City; State; Zip Code		
\$ 151 41	8188 Park Lane Dallas, Texas 75231		
	<input type="checkbox"/> Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	Campaign Expense	Staff-gifts	
	<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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
4 Date	5 Payee name			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$ 560 89 XX	500 Crescent Ct. Ste 135, Dallas, Tx 75201			
<input type="checkbox"/> Check if individual's residence address.				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
	Campaign Expense	Staff luncheon		
	<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			
12/31/25	Donor box			
Amount (\$)	Payee address; City; State; Zip Code			
3,958 14	526 Belleview Blvd 4106 Alexandria VA 22307			
<input type="checkbox"/> Check if individual's residence address.				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Fees			
	<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			
11-24-25	North Texas Food Bank			
Amount (\$)	Payee address; City; State; Zip Code			
\$ 100 00 XX	3677 Mapleshade Lane Plano, Texas 75075			
<input type="checkbox"/> Check if individual's residence address.				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Contribution	Donation to food bank		
	<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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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### 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:	2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>8-10-25</i>	5 Payee name <i>Democracy Toolbox</i>		
6 Amount (\$) <i>\$ 4000.00</i>	7 Payee address; <i>P.O. Box 6250 McKinney Texas 75071</i>	City:	State: Zip Code
<input type="checkbox"/> Check if individual's residence address.			
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule)  <i>Consulting Expense</i>	(b) Description  <i>Consulting</i>	
	(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	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
<input type="checkbox"/> Check if individual's residence address.			
  <b>PURPOSE OF EXPENDITURE</b>	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
<input type="checkbox"/> Check if individual's residence address.			
  <b>PURPOSE OF EXPENDITURE</b>	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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# 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:
2 FILER NAME <i>D'Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Benson + Budd</i>	6 Contributor address; City: State: Zip Code <i>3102 Oaklawn Ave #1100 Dallas TX 75219</i>
7 Amount of contribution (\$) <i>5,000</i>		
8 Contributor's principal occupation <i>attorney</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Benson + Budd</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>9/25/25</i>		Full name of contributor <i>Payma Law Center</i>
Contributor address; City: State: Zip Code <i>1126 N. Zang Blvd Dallas TX 75203</i>		Amount of contribution (\$) <i>\$1,000</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Payma Law Center</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Jeff Tillerson</i>
Contributor address; City: State: Zip Code <i>1201 Main St #1300 Dallas TX 75202</i>		Amount of contribution (\$) <i>5,000</i>
Contributor's principal occupation <i>attorney</i>		Contributor's job title
Contributor's employer/law firm <i>Tillerson, Johnson + Patten</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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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:
2 FILER NAME <i>DI Metria Benson</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>9/25/25</i>	5 Full name of contributor <i>Baron + Blue</i>	6 Contributor address; City: State: Zip Code <i>3306 Oaklawn Ave #3rd Flr Dallas TX 75219</i>
7 Amount of contribution (\$) <i>5000</i>		
8 Contributor's principal occupation <i>a Horkey</i>		9 Contributor's job title
10 Contributor's employer/law firm <i>Baron + Blue</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>9/25/25</i>		Full name of contributor <i>Gran Law Group</i>
Contributor address: City: State: Zip Code <i>500 N Akard St #1925 Dallas TX 75201</i>		Amount of contribution (\$) <i>500.00</i>
Contributor's principal occupation <i>a Horkey</i>		Contributor's job title
Contributor's employer/law firm <i>Gran Law Group</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date <i>9/25/25</i>		Full name of contributor <i>Mastrogianni Merskey + Flynn</i>
Contributor address: City: State: Zip Code <i>8080 N Central Expressway #1300 Dallas TX 75206</i>		Amount of contribution (\$) <i>250.00</i>
Contributor's principal occupation <i>a Horkeys</i>		Contributor's job title
Contributor's employer/law firm <i>Mastrogianni Merskey + Flynn</i>		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.