

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
	NICKNAME	LAST <i>Benson</i>	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of 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:		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Jessica</i>	MI
	NICKNAME	LAST <i>Praegey</i>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>7144 Carrousel 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 Day Year THROUGH Month Day Year <i>7 / 1 / 25</i> <i>THROUGH</i> <i>12 / 31 / 25</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>3 / 6 / 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) <i>Judge, Dallas County Court at Law #1</i>	13 OFFICE SOUGHT (if known) <i>Judge Dallas County Court at Law #1</i>	
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

OFFICE USE ONLY

Date Received: *2026 JAN 15 PM 4:23*

FILED

JOHN F. HARKEN
COUNTY CLERK
DALLAS COUNTY
DEPUTY

Date Hand-Delivered or Date Postmarked:

Receipt # Amount \$

Date Processed

Date Imaged

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

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

Dimetria Benson
Signature of Candidate/Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Dimetria Benson this the 15th day of January, 2026, 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)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

**FORM JC/OH
COVER SHEET PG 3**

<p>19 FILER NAME <i>D. Metria Benson</i></p>	<p>20 Filer ID (Ethics Commission Filers)</p>
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<p>21 SCHEDULE SUBTOTALS NAME OF SCHEDULE</p>	<p>SUBTOTAL AMOUNT</p>
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<p>1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</p>	<p><input checked="" type="checkbox"/> \$ <i>109,002.25</i></p>
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<p>2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</p>	<p><input checked="" type="checkbox"/> \$</p>
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<p>3. SCHEDULE B: PLEDGED CONTRIBUTIONS</p>	<p><input type="checkbox"/> \$</p>
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<p>4. SCHEDULE E: LOANS</p>	<p><input type="checkbox"/> \$</p>
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<p>5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</p>	<p><input checked="" type="checkbox"/> \$ <i>34,514.06</i></p>
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<p>6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</p>	<p><input type="checkbox"/> \$</p>
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<p>7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</p>	<p><input type="checkbox"/> \$</p>
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<p>8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</p>	<p><input type="checkbox"/> \$</p>
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<p>9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</p>	<p><input type="checkbox"/> \$</p>
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<p>10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH</p>	<p><input type="checkbox"/> \$</p>
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<p>11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</p>	<p><input type="checkbox"/> \$</p>
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<p>12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</p>	<p><input type="checkbox"/> \$</p>
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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

P. Metria Benson

3 Filer ID (Ethics Commission Filers)

4 Date

11/27/25

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

Karen Brooks

7 Amount of contribution (\$)

2,500⁰⁰

6 Contributor address; City; State; Zip Code

5825 Logan Drive Plano TX 75094

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

Toyota Texas

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

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

Date

11/6/25

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

Aubrey Nicole Pittman

Amount of contribution (\$)

5,000⁰⁰

Contributor address; City; State; Zip Code

901 Main St, #3670 Dallas TX 75202

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

The Pittman Law Firm

Law firm of contributor's spouse (if any)

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

Date

10/24/25

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

Shelli Morrison

Amount of contribution (\$)

1,578.42

Contributor address; City; State; Zip Code

120 E. Corsicana St Athens TX 75751

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

The Morrison 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

P Metria Benson

3 Filer ID (Ethics Commission Filers)

4 Date

10/22/25

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

Jules Slim

7 Amount of contribution (\$)

1652.49

6 Contributor address; City; State; Zip Code

PO Box 140306 Irving TX 75014

8 Contributor's principal occupation

attorney

9 Contributor's job title

10 Contributor's employer/law firm

Jules Slim Attorney

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

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

Date

10/16/25

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

Harry Friedman

Amount of contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

25 Glen Abbey Dr G11B Dallas TX 75218

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Friedman + Feiger

Law firm of contributor's spouse (if any)

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

Date

10/16/25

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

James Golf

Amount of contribution (\$)

1,578.47

Contributor address; City; State; Zip Code

12720 Merit Dr #1045 Dallas TX 75251

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Golf Law

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

D'Metria Benson

3 Filer ID (Ethics Commission Filers)

4 Date

10/2/25

5 Full name of contributor

out-of-state PAC ID#: _____

Luke LaFette

7 Amount of contribution (\$)

263.51

6 Contributor address;

City;

State;

Zip Code

7402 Woodsprings Dr Garland TX 75044

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

10/1/25

Full name of contributor

out-of-state PAC ID#: _____

Michael Lyons

Amount of contribution (\$)

5,000.00

Contributor address;

City;

State;

Zip Code

2101 Cedar Spring Rd #1900 Dallas 75201

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Lyons & Simmons

Law firm of contributor's spouse (if any)

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

Date

10/1/25

Full name of contributor

out-of-state PAC ID#: _____

William Kanute

Amount of contribution (\$)

105.72

Contributor address;

City;

State;

Zip Code

530 Frances Way Richardson TX 75081

Contributor's principal occupation

unemployed

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

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

P. Metcalf Benson

3 Filer ID (Ethics Commission Filers)

4 Date

9/26/25

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

Charles Hoedehede

7 Amount of contribution (\$)

5,000⁰⁰

6 Contributor address; City; State; Zip Code

675 E Royal Ln #1084 Irving TX 75039

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

9/26/25

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

Kelly Crain

Amount of contribution (\$)

26351

Contributor address; City; State; Zip Code

8720 Arthur Packed Dallas TX 75243

Contributor's principal occupation

attorney

Contributor's job title

Contributor's employer/law firm

Walters Puleo & Crain

Law firm of contributor's spouse (if any)

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

Date

9/25/25

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

Mark Tricer

Amount of contribution (\$)

105249

Contributor address; City; State; Zip Code

10445 N Central Expressway #600 Dallas TX

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.