

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) 00080109	2 Total pages filed: 31		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Patricia Baca	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/05/2024	
	NICKNAME	LAST Bennett	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked	
	REDACTED PER 254.0313, GOV'T CODE			Receipt #	
				Amount	
				Date Processed	
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Richard E.	MI		
	NICKNAME Ric	LAST Bennett	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	
			STATE;	ZIP CODE	
		REDACTED PER 254.0313, GOV'T CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(817) 793-7544				
8 REPORT TYPE	<input type="checkbox"/> January 15				
	<input checked="" 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)	
9 PERIOD COVERED	Month	Day	Year	Month	
	01/01/2024		THROUGH	01/25/2024	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff
			<input type="checkbox"/> General	<input type="checkbox"/> Other	
			<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)		
	Family District Court Judge District 360 Tarrant		District Judge District 360		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 31

13 C / OH NAME Bennett, Patricia Baca (The Honorable) **14 Filer ID** (Ethics Commission Filers)
00080109

15 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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	50.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	36,214.49
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	7,917.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	40,850.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	31,155.00

17 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.

The Honorable Patricia Baca Bennett

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Bennett, Patricia Baca (The Honorable)	19 Filer ID (Ethics Commission Filers) 00080109
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 31,050.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5,164.49
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,886.50
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 31.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Alexis	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Mansfield, TX 76063	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Alexis Allen Law		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Katherine	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Euless, TX 76039	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Allen and Weaver PC		Law firm of contributor's spouse (if any) Allen and Weaver PC
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altman, Dan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Oncor Electric Delivery Company		Law firm of contributor's spouse (if any) Carrington, Coleman, Slomen & Blumenthal LLP
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Rebecca	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Managing Partner
10 Contributor's employer/law firm Armstrong Divorce and Family Law		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey & Galyen	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Bedford, TX 76021	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canas & Flores PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76164	
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)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/13 Rpt: 6/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantey Hanger LLP	7 Amount of Contribution (\$) \$1,500.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76102	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Goodman & Clark		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosby, Don	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76132	
Contributor's Principal Occupation Law		Contributor's Job Title Judge
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/13 Rpt: 7/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowles & Thompson PC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75202	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker Russell & Associates	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Mansfield, TX 76063	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutrer, Anita	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Bedford, TX 76021	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Anita K. Cutter Attorney at Law PLLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/13 Rpt: 8/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, George	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Colleyville, TX 76034	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title N/A
10 Contributor's employer/law firm N/A		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epstein, Robert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Epstein Family Law		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Jonathan	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Jonathan W. Fox PLLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/13 Rpt: 9/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Bodie	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Louis B. Freeman, III, PLLC		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goranson Bain Ausley	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hargrave, Jennifer	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75244	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Hargrave Family Law		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Jonathan	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76010	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Jackson, Landrith & Kulesz PC		11 Law firm of contributor's spouse (if any) Jackson, Landrith & Kulesz PC
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KoonsFuller, PC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75202	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Morgese, Brad	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Orsinger, Nelson, Downing, & Anderson		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loveless, James	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76109	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Webb Family Law		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, CW	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76111	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm MartinOostdyk PLLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAngus, Robert	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Verner, Brumley, Mueller, Parker PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/13 Rpt: 12/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McShan, Elizabeth	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75204	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Jodi McShan PLLC		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Thomas	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76110	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Griffith, Jay, Michel LLP		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A N/A		
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Dana	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Allen, TX 75013	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Palmer Law Group PC		Law firm of contributor's spouse (if any) Palmer Law Group PC
If contributor is a child, law firm of parent(s) (if any) N/A N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paschall, Belker	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Belker Paschall		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson & Smart PC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Arlington, TX 76016	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seidel, Adam	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Adam L. Seidel PC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Bowen, McKinley & Norton LLP <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisemore Law Firm PC PLLC <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$1,500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skipper, Frank (Mr.) <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Frank P. Skipper		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant County Patriots PAC <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76131	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tipton, Ty <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Insurance		Contributor's Job Title Owner
Contributor's employer/law firm TGTT Enterprises		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 01/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Kyle <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Law		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Kyle Whitaker		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Carol	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75219	
8 Contributor's Principal Occupation Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Carol A. Wilson PLLC		11 Law firm of contributor's spouse (if any) N/A
12 If contributor is a child, law firm of parent(s) (if any) N/A		N/A

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 17/31	
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 01/18/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffee Eitzen LLP	8 Amount of contribution (\$) \$118.49	9 In-kind contribution description Signage for fundraising event.
	7 Contributor address; City; State; Zip Code Dallas, TX 75219		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffee Eitzen LLP	Amount of contribution (\$) \$2,946.00	In-kind contribution description Food and beverages at fundraiser.
	Contributor address; City; State; Zip Code Dallas, TX 75219		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Stephanie	Amount of contribution (\$) \$2,100.00	In-kind contribution description Billboard
	Contributor address; City; State; Zip Code Arlington, TX 76016		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL) Law		Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
Contributor's employer/law firm (FOR JUDICIAL) Law Office of Stephanie A. Foster PC		Law firm of contributor's spouse (if any) (FOR JUDICIAL) N/A	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 18/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/05/2024	5 Payee name Bene-Marc Athletic Ins. Agency	
6 Amount (\$) \$158.00	7 Payee address; City; State; Zip Code 6301 Southwest Blvd. Ste. 101 Fort Worth, TX 76132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance for Meet & Greet with candidate event.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2024	Payee name Birdwell Communications	
Amount (\$) \$335.00	Payee address; City; State; Zip Code 10105 Locksey Dr. Benbrook, TX 76126	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design work for billboard and push cards.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name Calvery, Caleb	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 200 E. Weatherford St. Fort Worth, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security at Meet & Greet with candidate.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 2/12 Rpt: 19/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/08/2024	5 Payee name Constant Contact	
6 Amount (\$) \$10.66	7 Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails to potential donors.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2024	Payee name Fort Worth Republican Women	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 101613 Fort Worth, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense "BFF" donation.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2024	Payee name GoDaddy.com	
Amount (\$) \$204.54	Payee address; City; State; Zip Code 14455 N. Hayden Rd. Ste. 219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription fee (annual) for MicroSoft Office software.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 3/12 Rpt: 20/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/23/2024	5 Payee name Michaels Stores	
6 Amount (\$) \$24.88	7 Payee address; City; State; Zip Code 359 Carroll St. Fort Worth, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poster boards and pins/staples for attaching posters.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2024	Payee name Ownby, Craig (Mr.)	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 7106 Lighthouse Rd. Arlington, TX 76002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant retainer.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2024	Payee name Proof/Notarize Inc.	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 867 Boylston St. Boston, MA 02116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for verifying identity for placing ads on FaceBook.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 4/12 Rpt: 21/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
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4 Date 01/01/2024	5 Payee name Raise The Money
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6 Amount (\$) \$14.95	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
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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 01/03/2024	Payee name Raise The Money
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Amount (\$) \$13.14	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/08/2024	Payee name Raise The Money
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Amount (\$) \$24.75	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES 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: Sch: 5/12 Rpt: 22/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/09/2024	5 Payee name Raise The Money	
6 Amount (\$) \$108.55	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/10/2024	Payee name Raise The Money	
Amount (\$) \$24.75	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2024	Payee name Raise The Money	
Amount (\$) \$37.25	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 6/12 Rpt: 23/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/17/2024	5 Payee name Raise The Money	
6 Amount (\$) \$15.20	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2024	Payee name Raise The Money	
Amount (\$) \$5.15	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2024	Payee name Raise The Money	
Amount (\$) \$109.30	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 7/12 Rpt: 24/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/22/2024	5 Payee name Raise The Money	
6 Amount (\$) \$24.75	7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2024	Payee name Raise The Money	
Amount (\$) \$98.25	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/25/2024	Payee name Raise The Money	
Amount (\$) \$73.75	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 8/12 Rpt: 25/31	2	FILER NAME Bennett, Patricia Baca (The Honorable)	3	Filer ID (Ethics Commission Filers) 00080109
4	Date 01/11/2024	5	Payee name Staples		
6	Amount (\$) \$73.52	7	Payee address; City; State; Zip Code 1660 S. University Dr. Fort Worth, TX 76107		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cost of invitations (\$52.24) to Meet & Greet with candidate, plus \$15.68 fee to expedite printing.		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/23/2024		Payee name Staples		
	Amount (\$) \$22.73		Payee address; City; State; Zip Code 1660 S. University Dr. Fort Worth, TX 76107		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters for fundraiser.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 01/08/2024		Payee name Starboard Strategy Group		
	Amount (\$) \$2,500.00		Payee address; City; State; Zip Code 501 Samuels Ave. Ste. 610 Fort Worth, TX 76102		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant retainer.		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES 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: Sch: 9/12 Rpt: 26/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
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4 Date 01/17/2024	5 Payee name Starbucks
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6 Amount (\$) \$96.60	7 Payee address; City; State; Zip Code 2600 W. 7th St. Fort Worth, TX 76107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee for Meet & Greet with candidate.
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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 01/17/2024	Payee name Target
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Amount (\$) \$5.61	Payee address; City; State; Zip Code 301 Carroll St. Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ice for Meet & Greet with candidate.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/16/2024	Payee name Tarrant County GOP
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Amount (\$) \$208.20	Payee address; City; State; Zip Code 7524 Mosier View Court Ste. 230 Fort Worth, TX 76118
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TCGOP fundraiser. Ticket plus online processing fee (\$8.20).
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES 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: Sch: 10/12 Rpt: 27/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
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4 Date 01/03/2024	5 Payee name Texas Star Country Club
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6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code 1400 Texas Star Parkway Eules, TX 76040
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texas Star Republican Women luncheon.
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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 01/03/2024	Payee name The Women's Club of Fort Worth
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Amount (\$) \$160.00	Payee address; City; State; Zip Code 1316 Pennsylvania Ave. Fort Worth, TX 76104
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Venue fee for Meet & Greet with candidate.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/17/2024	Payee name Tom Thumb
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Amount (\$) \$327.39	Payee address; City; State; Zip Code 2400 W. 7th St. Fort Worth, TX 76107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/beverages/supplies for Meet & Greet with Candidate.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES 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: Sch: 11/12 Rpt: 28/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/18/2024	5 Payee name U.S. Postal Service	
6 Amount (\$) \$9.65	7 Payee address; City; State; Zip Code 1009 Oakwood Ln. Arlington, TX 76012	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Postage	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Priority mail postage.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name VeriCast/Harland Clarke	
Amount (\$) \$19.96	Payee address; City; State; Zip Code 2901 FM 157 Mansfield, TX 76063	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks ordered through Comerica Bank for campaign account.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2024	Payee name XL Digital Imaging, LLC	
Amount (\$) \$358.31	Payee address; City; State; Zip Code 11625 Columbia Center Drive Ste. 200 Dallas, TX 75229	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of Billboard sign.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES 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: Sch: 12/12 Rpt: 29/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109	
4 Date 01/25/2024	5 Payee name Zoom Video Communications, Inc.		
6 Amount (\$) \$21.66	7 Payee address; City; State; Zip Code 55 Almaden Blvd. 6th Flr. San Jose, CA 95113		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription fee.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 30/31	2 FILER NAME Bennett, Patricia Baca (The Honorable)	3 Filer ID (Ethics Commission Filers) 00080109
4 Date 01/20/2024	5 Payee name Tractor Supply Co.	
6 Amount (\$) \$31.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1550 Hwy. 157 N. Mansfield, TX 76063	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Device for driving campaign sign posts into ground.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 31/31
2 FILER NAME Bennett, Patricia Baca (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080109
LENDER INFORMATION	4 Name of lender Baca, Marie (Mrs.)	
	5 Lender address; City; State; Zip Code Arlington, TX 76001	
GUARANTOR INFORMATION	6 Name of guarantor	
<input checked="" type="checkbox"/> not applicable	7 Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender Bennett, Patricia	
	Lender address; City; State; Zip Code Mansfield, TX 76063	
GUARANTOR INFORMATION	Name of guarantor	
<input checked="" type="checkbox"/> not applicable	Guarantor address; City; State; Zip Code	
LENDER INFORMATION	Name of lender Bennett, Richard	
	Lender address; City; State; Zip Code Mansfield, TX 76063	
GUARANTOR INFORMATION	Name of guarantor	
<input checked="" type="checkbox"/> not applicable	Guarantor address; City; State; Zip Code	