JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	omplete this form.	1 Filer ID (Ethics Comm 00080109	· ·	2 Total page	es filed: 31
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		E USE ONLY
OFFICEHOLDER	The Honorable	Patricia Baca				E USE UNET
NAME		T diffold Baoa			Date Received	
					ELECTRON	IICALLY FILED
	NICKNAME	LAST		SUFFIX	02/05/2024	
		Bennett		00111/		
		Definiell				
4 CANDIDATE /	ADDRESS / PO BOX; A	NPT / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-deliver	ed or Date Postmarked
OFFICEHOLDER						
MAILING ADDRESS					Receipt #	Amount
	REDACTED PER 2	254.0313, GOV 1 (JODE			
Change of Address					Date Processed	
					Date Imaged	
					Date imaged	
E 044/54/01						
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST			MI	
NAME	Mr.	Richard E.				
	NICKNAME	LAST			SUFFIX	
	Ric	Bennett			0011.00	
	INIC	Denneu				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY	,	STATE; ZIP CODE
TREASURER ADDRESS						
ADDITESS	REDACTED PER 2	254 0313 GOVT	CODE			
(Residence or Business)						
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER						
PHONE	(817) 793-7544					
8 REPORT		_		_		
TYPE	January 15	X 30th day before	e election	Runoff		r campaign treasurer (officeholder only)
			ala atian 🗖		_	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report	(Attach C/OH-FR)
9 PERIOD	Month Day Ye	ar		Month Day	Year	
COVERED	01/01/2024	TI	HROUGH	01/25/202	24	
10 ELECTION	ELECTION DATE	1		ELECTION TYPE		
	Month Day Ye		Primary		Other	
	03/05/2024	ar XF	linary	Kunon	Unier	
	03/03/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGH	T (if known)	
	Family District Court Ju	Idao District 260 T	orrant			
		INDE DISTRICT 300 1	anan	District Judge D	131101 300	
	•			•		
		GO	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	thics.state.tx.u	S	Ve	ersion V3.5.1.9000c47

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 31

I

13 C / OH NAME	Bennett, Patricia Bac	a (The Honorable)	14 Filer ID	(Ethics Commission Filers)
			00080109	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or offic	ceholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 50.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 36,214.49
EXPENDITURE TOTALS	· · ·	IZED POLITICAL EXPENDITURES	,	\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 7,917.50
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 40,850.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 31,155.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Honora	ble Patricia Baca Be	ennett
		Signature o	f Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subso	ribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of offic	er administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Tex	xas Ethics Commissior	www.ethics.state.tx.us		Version V3.5.1.9000c47

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 31

18 FILER Benn		IE Patricia Baca (The Honorable)	19 Filer ID 00080109	(Ethics	Commission Filers)
		E SUBTOTALS	00000103	T	
NAME	EOFS	SCHEDULE		SU	IBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	31,050.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	5,164.49
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$	7,886.50
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	31.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

The Instru	ction Guide explains ho	w to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/31
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bennett, Pa	tricia Baca (The Honorable)			00080109
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/18/2024	Allen, Alexis			\$100.00
	6 Contributor address; City; S			
	Mansfield, TX 76063			
8 Contributor's	Principal Occupation		9 Contributor's Job Title	
Law			Attorney	
10 Contributor's	employer/law firm		11 Law firm of contributor's sp	bouse (if any)
Alexis Allen	Law		N/A	
12 If contributor	is a child, law firm of parent(s) (if	any)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/15/2024	Allen, Katherine			\$250.00
	Contributor address; City; S	State; Zip Code		1
	Euless, TX 76039			
Contributor's	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
Allen and W	eaver PC		Allen and Weaver PC	
If contributor	is a child, law firm of parent(s) (if	any)	·	
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/19/2024	Altman, Dan			\$500.00
	Contributor address; City; S	State; Zip Code		
	Fort Worth, TX 76102			
Contributor's	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's	employer/law firm		Law firm of contributor's sp	bouse (if any)
Oncor Elect	ric Delivery Company		Carrington, Coleman, S	lomen & Blumenthal LLP
If contributor	s a child, law firm of parent(s) (if	any)	L	
N/A			N/A	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/31
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bennett, Pati	ricia Baca (The Honorable)		00080109
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/09/2024	Armstrong, Rebecca		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Plano, TX 75024		
	Principal Occupation	9 Contributor's Job Title	
Law		Managing Partner	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
	ivorce and Family Law	N/A	
	s a child, law firm of parent(s) (if any)	N1/A	
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/16/2024	Bailey & Galyen		\$5,000.00
	Contributor address; City; State; Zip Code		
	Bedford, TX 76021		
Contributor's [Contributor's Job Title	
Contributors P	Principal Occupation		
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/16/2024	Canas & Flores PLLC	/	\$1,000.00
	Contributor address; City; State; Zip Code		
	Fort Worth, TX 76164		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	hy Tayas Ethics Commission		Version V3 5 1 9000c47

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

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

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 5/13 Rpt: 8/31
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	tricia Baca (The Honorable)		00080109
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)
01/09/2024	Dodson, George		\$200.00
	6 Contributor address; City; State; Zip Code		
	Colleyville, TX 76034		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Retired		N/A	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
N/A		N/A	
12 If contributor i	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
01/10/2024	Epstein, Robert		\$500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75225		
Contributor's	I Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's	employer/law firm	Law firm of contributor's s	oouse (if any)
Epstein Fam	nily Law	N/A	
If contributor i	is a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
01/01/2024	Fox, Jonathan	/	\$300.00
01/01/2024	Contributor address; City; State; Zip Code		
	Continuation address, City, State, Zip Code		
	Grapevine, TX 76051		
O a staile standa		Operativity of a late Title	
	Principal Occupation	Contributor's Job Title	
Law		Attorney	
Contributor's employer/law firm		bouse (if any)	
	of Jonathan W. Fox PLLC	N/A	
	is a child, law firm of parent(s) (if any)		
N/A		N/A	

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/13 Rpt: 9/31
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ricia Baca (The Honorable)		00080109
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/15/2024	Freeman, Bodie		\$500.00
	6 Contributor address; City; State; Zip Code		
	Fort Worth, TX 76179		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Law		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
	f Louis B. Freeman, III, PLLC	N/A	
	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor out-of-state PAC (ID#:	\ \	Amount of Contribution (\$)
01/23/2024	Goranson Bain Ausley)	\$2,000.00
01/23/2024	· · · · · · · · · · · · · · · · · · ·		φ2,000.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75206		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2024	Hargrave, Jennifer		\$500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75244		
	Principal Occupation	Contributor's Job Title	
Law Attorney			
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
Hargrave Family Law N/A			
If contributor is	s a child, law firm of parent(s) (if any)	•	
N/A		N/A	

The Instru	ction Guide explains how to	o complete this forr	n.	1 Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/31
2 FILER NAME	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Bennett, Pat	ricia Baca (The Honorable)			00080109
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/08/2024	Jackson, Jonathan			\$500.00
	6 Contributor address; City; State	; Zip Code		
	Arlington, TX 76010			
8 Contributor's	Principal Occupation	9	Contributor's Job Title	
Law			Attorney	
10 Contributor's	employer/law firm	11	Law firm of contributor's sp	ouse (if any)
Jackson, La	ndrith & Kulesz PC		Jackson, Landrith & Kul	esz PC
12 If contributor i	s a child, law firm of parent(s) (if any)			
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/05/2024	KoonsFuller, PC			\$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 sp	ouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/21/2024	La Morgese, Brad			\$1,000.00
	Contributor address; City; State			
	Dallas, TX 75225			
	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)		
-	Orsinger, Nelson, Downing, & Anderson N/A		N/A	
	s a child, law firm of parent(s) (if any)		N1/A	
N/A			N/A	

The Instru	ction Guide explains how t	o complete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/31
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Bennett, Pat	ricia Baca (The Honorable)			00080109
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/04/2024	Loveless, James			\$500.00
	6 Contributor address; City; Stat			
	Fort Worth, TX 76109			
8 Contributor's I	Principal Occupation		9 Contributor's Job Title	
Law			Attorney	
10 Contributor's e			11 Law firm of contributor's sp	pouse (if any)
Webb Family	y Law		N/A	
	s a child, law firm of parent(s) (if any	/)		
N/A			N/A	
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/22/2024	Martin, CW			\$500.00
	Contributor address; City; Stat	e; Zip Code		
	Fort Worth, TX 76111			
Contributor's I	Principal Occupation		Contributor's Job Title	
Law			Attorney	
	employer/law firm		Law firm of contributor's sp	pouse (if any)
MartinOostd	-		N/A	
	s a child, law firm of parent(s) (if any	/)	N1/A	
N/A			N/A	-
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/25/2024				\$1,500.00
	Contributor address; City; Stat	e; Zip Code		
	Dallas, TX 75219			
	Principal Occupation		Contributor's Job Title	
Law			Attorney	
Contributor's employer/law firmLaw firm of contributor's spVerner, Brumley, Mueller, Parker PCN/A		pouse (if any)		
	-	<u> </u>	N/A	
N/A	s a child, law firm of parent(s) (if any	()	N/A	
			N/A	

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

The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/31	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Bennett, Pat	ricia Baca (The Honorable)	00080109	
4 Date	5 Full name of contributor out-of-state PAC (ID	#:)	7 Amount of Contribution (\$)
01/18/2024	Paschall, Belker		\$250.00
	6 Contributor address; City; State; Zip Code		
	Fort Worth, TX 76107		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	·
Law		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
Belker Pasc	nall	N/A	
12 If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	
Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)	Amount of Contribution (\$)
01/10/2024	Robinson & Smart PC		\$1,000.00
	Contributor address; City; State; Zip Code		
	Arlington, TX 76016		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)
le santaile dan i			
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID	#:)	Amount of Contribution (\$)
01/25/2024	Seidel, Adam		\$250.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75206		
Contributor's	Principal Occupation	Contributor's Job Title	
Law		Attorney	
	employer/law firm	Law firm of contributor's s	nouse (if any)
Adam L. Sei		N/A	
If contributor i	s a child, law firm of parent(s) (if any)		
N/A		N/A	

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

The Instru	ction Guide explains how t		1 Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/31			
2 FILER NAME		3 F	iler ID (Ethics Commission	Filers)		
Bennett, Pat	ricia Baca (The Honorable)	0	0080109			
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 A	mount of Contribution (\$)	
01/25/2024	Tarrant County Patriots PAC					\$500.00
	6 Contributor address; City; State	e; Zip Code				
	Fort Worth, TX 76131					
8 Contributor's F	Principal Occupation		9 Contributor's Job Title			
10 Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse	(if any)	
12 If contributor is	s a child, law firm of parent(s) (if any	()				
Date	Full name of contributor	out-of-state PAC (ID#:)	A	Amount of Contribution (\$)	
01/16/2024	Tipton, Ty					\$100.00
	Contributor address; City; State			"		
	Euless, TX 76040					
Contributor's Principal Occupation Contributor's Job Title						
Insurance			Owner			
Contributor's e	employer/law firm		Law firm of contributor's sp	pouse	(if any)	
TGTT Enterp	orises		N/A			
	s a child, law firm of parent(s) (if any)				
N/A			N/A			
Date	Full name of contributor	out-of-state PAC (ID#:)	A	Amount of Contribution (\$)	
01/17/2024	Whitaker, Kyle					\$250.00
	Contributor address; City; State	e; Zip Code		"		
	Fort Worth, TX 76107					
Contributor's F	Principal Occupation		Contributor's Job Title			
Law			Attorney			
	employer/law firm		Law firm of contributor's sp	pouse	(if any)	
Law Office o	f Kyle Whitaker		N/A			
	s a child, law firm of parent(s) (if any	')				
N/A			N/A			

	The Instru	ction Guide explains how	1		es Schedule A(J)1 13 Rpt: 16/31	:		
2	FILER NAME		3	Filer ID	(Ethics Commission	on Filers)		
	Bennett, Pat	ricia Baca (The Honorable)				0008010)9	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount o	f Contribution (\$)	
	01/18/2024	Wilson, Carol						\$250.00
		6 Contributor address; City; S	tate; Zip Code		1			
		Dallas, TX 75219						
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
	Law			Attorney				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oouse (if any)			
	Law Office o	f Carol A. Wilson PLLC		N/A				
12	If contributor is	s a child, law firm of parent(s) (if a	any)					
	N/A							

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE	A2
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 17/31				
2 FILER NAME Bennett, Pa	: tricia Baca (The Honorable)	 Filer ID (Ethics Commission Filers) 00080109 				
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 01/18/2024	 6 Full name of contributor out-of-state PAC (ID#: Duffee Eitzen LLP 7 Contributor address; City; State; Zip Code 	8 Amount of 9 In-kind contribution contribution (\$) description \$118.49 I Signage for fundraising event.				
	Dallas, TX 75219		I Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	upation / 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 contributo	r'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 out-of-state PAC (ID#: Duffee Eitzen LLP Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$2,946.001 Food and beverages at fundraiser.			
	Dallas, TX 75219		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / 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 contributo	or'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 out-of-state PAC (ID#: Foster, Stephanie Contributor address; City; State; Zip Code Arlington, TX 76016)	Amount of In-kind contribution contribution (\$) description \$2,100.00 I Billboard			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions) -JUDICIAL)			
Contributor's Law	principal occupation (FOR JUDICIAL)	Contributor's job title Attorney	(FOR JUDICIAL) (See instructions)			
Law Office of	employer/law firm (FOR JUDICIAL) of Stephanie A. Foster PC	Law firm of contributo N/A	itor's spouse (if any) (FOR JUDICIAL)			
If contributor i N/A	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 1/12 Rpt: 18/31		Bennett, Patricia Baca (The Honorable))			00080109
4	Date	5	Payee name				
	01/05/2024		Bene-Marc Athletic Ins. Agency				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$158.00		6301 Southwest Blvd.				
			Ste. 101				
			Fort Worth, TX 76132				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Event Expense	suulo)	Check if travel		de of Texas. Complete Schedule T.
							officeholder living expense
					insurance ior	IVI	eet & Greet with candidate event.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	01/16/2024		Birdwell Communications				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$335.00		10105 Locksey Dr.				
			Benbrook, TX 76126				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)			de of Texas. Complete Schedule T.
							officeholder living expense billboard and push cards.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C)ffice sou	ght		Office held
	Date		Payee name				
	01/17/2024		Calvery, Caleb				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$150.00		200 E. Weatherford St.				
			Fort Worth, TX 76102				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)	(b) Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Event Expense		Check if Austin	, тх	officeholder living expense & Greet with candidate.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimbursement ead/Rental Expense ense ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/12 Rpt: 19/31		Bennett, Patricia Baca (The Honorable))			00080109
4	Date 01/08/2024	5	Payee name Constant Contact				
6 Amount (\$) 7 Payee address; City; State; Zip Code \$10.66 1601 Trapelo Rd. Waltham, MA 02451							
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Emails to potential donors.					officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	01/21/2024		Fort Worth Republican Women				
	Amount (\$)Payee address;City;State;Zip Code\$100.00PO Box 101613						
			Fort Worth, TX 76185				
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi			, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held
	Date		Payee name				
	01/02/2024		GoDaddy.com				
	Amount (\$) \$204.54		Payee address; City; State; 14455 N. Hayden Rd. Ste. 219 Scottsdale, AZ 85260	Zip Coc	e		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense (annual) for MicroSoft Office
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice soug	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 3/12 Rpt: 20/31		Bennett, Patricia Baca (The Honorable)			00080109
4	Date 01/23/2024		Payee name Michaels Stores				
6 Amount (\$) \$24.88 Fort Worth, TX 76107 7 Payee address; City; State; Zip Code 539 Carroll St.							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Poster boards and pins/staples for attaching points					officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	01/02/2024		Ownby, Craig (Mr.)				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$2,500.00		7106 Lighthouse Rd. Arlington, TX 76002				
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht		Office held
	Date		Payee name				
	01/16/2024		Proof/Notarize Inc.				
	Amount (\$) \$25.00		Payee address; City; State; 867 Boylston St.	Zip Co	le		
			Boston, MA 02116				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Advertising Expense	edule)	Check if Austin	, тх	ide of Texas. Complete Schedule T. , officeholder living expense I identity for placing ads on
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	· ·			2	Filer ID (Ethics Commission Filers)
1	Sch: 4/12 Rpt: 21/31	2	Bennett, Patricia Baca (The Honorable))		J	00080109
4	Date	5	Payee name				
	01/01/2024		Raise The Money				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$14.95		P.O. Box 26466				
			Little Rock, AR 72221				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description		
	OF	Ľ	Fees	euule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE						, officeholder living expense
					Processing for	ee.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O)ffice sou	Jht		Office held
	Date		Payee name				
	01/03/2024		Raise The Money				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$13.14		P.O. Box 26466				
			Little Rock, AR 72221				
PURPOSE OF EXPENDITURE			Category (See Categories listed at the top of this sche Fees	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O)ffice sou	Jht		Office held
	Date		Payee name				
	01/08/2024		Raise The Money				
	Amount (\$)		-	Zip Co	le		
	\$24.75		P.O. Box 26466	2.0 00			
	¢2 m 0						
			Little Rock, AR 72221				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Fees				ide of Texas. Complete Schedule T.
	-				Processing for		, officeholder living expense
					FICESSING	. e.	
_	Complete ONLV if direct	L	andidate/Officeholder name)ffico cour	uht		Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office soug	jin		Office held
-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense Legal Services 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)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 5/12 Rpt: 22/31	Bennett, Patricia Baca (The Honorable)	00080109					
4	Date 01/09/2024	Payee name Raise The Money						
6	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) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Processing fee.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/10/2024	Raise The Money						
	Amount (\$)Payee address;City;State; Zip Code\$24.75P.O. Box 26466							
	DUDDOOF	Little Rock, AR 72221						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 2 C.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	01/15/2024	Raise The Money						
	Amount (\$) \$37.25	Payee address; City; State; Zip Code P.O. Box 26466						
		Little Rock, AR 72221						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 2 C.					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2				2	Filer ID (Ethics Commission Filers)
1	Sch: 6/12 Rpt: 23/31	2	Bennett, Patricia Baca (The Honorable))		3	00080109
4	Date	5	Payee name				
	01/17/2024		Raise The Money				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$15.20		P.O. Box 26466				
			Little Rock, AR 72221				
8	PURPOSE	(a)			(b) Description		
Ŭ	OF	(,	Category (See Categories listed at the top of this sche Fees	edule)		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austir	n, TX	, officeholder living expense
					Processing for	ee.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	Jht		Office held
	Date		Payee name				
	01/18/2024		Raise The Money				
	Amount (\$)	-		Zip Co	10		
	\$5.15		P.O. Box 26466				
	\$5.15 P.O. BOX 20400						
			Little Rock, AR 72221				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)			ide of Texas. Complete Schedule T.
					Processing for		, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O)ffice sou	ıht		Office held
	Date		Payee name				
	01/21/2024		Raise The Money				
	Amount (\$)		Payee address; City; State;	Zip Co	le		
	\$109.30		P.O. Box 26466				
			Little Rock, AR 72221				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Fees				ide of Texas. Complete Schedule T. , officeholder living expense
					processing fe		, omcenolder living expense
					processing it		
_	Complete ONLV if direct	Ļ	andidato/Officabalder name)ffico cour	uht		Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O)ffice sou	jin		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office C Polling I Printing Salaries	Expens Expens Expens Wage	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2			p-		2	Filer ID (Ethics Commission Filers)
1	Sch: 7/12 Rpt: 24/31	2	Bennett, Patricia Baca (The Honoral	ole)			3	00080109
4	Date 01/22/2024	5	Payee name Raise The Money					
6	Amount (\$) \$24.75	7	Payee address; City; Sta P.O. Box 26466 Little Rock, AR 72221	te; Zip C	Code			
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Processing fee.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ought			Office held
	Date		Payee name					
	01/24/2024		Raise The Money					
	Amount (\$) \$98.25		Payee address; City; Sta P.O. Box 26466	te; Zip C	Code			
	PURPOSE		Little Rock, AR 72221 Category (See Categories listed at the top of this	schodulo)	(b)	Description		
	OF EXPENDITURE		Fees	Scheudie)		Check if travel	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	bught			Office held
	Date		Payee name					
	01/25/2024		Raise The Money					
	Amount (\$) \$73.75		Payee address; City; Sta P.O. Box 26466	te; Zip C	Code			
			Little Rock, AR 72221					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Fees	schedule)	(b)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	bught			Office held

	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 Expens Gift/Awards/Memorials I Legal Services The Instruction Gu	Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead lense pens ages	e /Contract Labor		Solicitation/Func Transportation E Travel in District Travel Out of Dis OTHER (enter a	quipment & Rela	ated Expense
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Com	mission Filers)
-	Sch: 8/12 Rpt: 25/31			tricia Baca (The	Honorable	e)			5	00080109		
4	Date	5	Payee name									
	01/11/2024		Staples									
6	Amount (\$) \$73.52	7	Payee addres 1660 S. Uni Fort Worth,	versity Dr.	State;	; Zip Coo	de					
8	PURPOSE	(a)	Category (Se	e Categories listed at th	e ton of this sch	edule)	(b)	Description				
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Construction of the second schedule of the second schedule of the second schedule of the schedu							Greet with					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	01/23/2024		Staples									
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de					
	\$22.73		1660 S. Uni Fort Worth,	-								
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Event Expe	e Categories listed at th	e top of this sch	edule)	(b)		, тх,	de of Texas. Com officeholder living raiser.		Γ.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	01/08/2024		Starboard S	trategy Group								
	Amount (\$) \$2,500.00		Payee addres 501 Samuel Ste. 610 Fort Worth,	s Ave.	State;	; Zip Coo	de					
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Consulting E	e Categories listed at th Expense	e top of this sch	edule)	(b)		, тх,	de of Texas. Com officeholder living 1er.		r.
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Office sou	ght			Office he	eld	

			EXPENDITURE CATE	GORIE	S FOR I	3OX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	O P S	Office Overhe Polling Experi Printing Experisations Galaries/Wag	nse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	•				3	Filer ID (Ethics Commission Filers)		
1	Sch: 9/12 Rpt: 26/31	2	Bennett, Patricia Baca (The Honora	able)			3	00080109		
4	Date	5	Payee name							
	01/17/2024		Starbucks							
6	Amount (\$)	7	Payee address; City; Si	tate; Z	Zip Code	;				
	\$96.60		2600 W. 7th St.							
			Fort Worth, TX 76107							
8	PURPOSE	(2)			0					
0	OF	(a)	Category (See Categories listed at the top of thi	s schedu	ile) (L	Description	outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Event Expense					, officeholder living expense		
						Coffee for Me	eet	& Greet with candidate.		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Offi	ce sough	t		Office held		
	Date		Payee name							
	01/17/2024		Target							
	Amount (\$)		-	tate: 7	Zip Code	<u> </u>				
	\$5.61		301 Carroll St.	iaie, z						
	40.01		SUI Carron St.							
			Fort Worth, TX 76107							
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedu	_{ile)} (k	Description				
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						Ice for Meet a	& G	Greet with candidate.		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	ce sough	t		Office held		
	Date		Payee name							
	01/16/2024		Tarrant County GOP							
	Amount (\$)		Payee address; City; Si	tate: Z	Zip Code					
	\$208.20		7524 Mosier View Court		p 0000					
	\$200.20		Ste. 230							
			Fort Worth, TX 76118							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	s schedu	ile) (k) Description				
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
								ser. Ticket plus online processing		
						fee (\$8.20).				
	Complete ONLV if direct	Ļ	Candidate/Officeholder name	Offi	ce sough	· · ·		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Ulli	ce sougi	ι		Once new		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 10/12 Rpt: 27/31									
4	Date 01/03/2024		Payee name Texas Star Country Club							
6	Amount (\$)		-	Zin Co	10					
0	\$25.00	\$25.00 1400 Texas Star Parkway								
			Euless, TX 76040							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Texas Star Republican Women luncheon.							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	01/03/2024		The Women's Club of Fort Worth							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$160.00		1316 Pennsylvania Ave. Fort Worth, TX 76104							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense eet & Greet with candidate.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	01/17/2024		Tom Thumb							
	Amount (\$) \$327.39		Payee address; City; State; 2400 W. 7th St.	Zip Co	le					
			Fort Worth, TX 76107							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Event Expense	edule)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense s/supplies for Meet & Greet with			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	office sou	ht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2				2	Filer ID (Ethics Commission Filers)	
-	Sch: 11/12 Rpt: 28/31		Bennett, Patricia Baca (The Honorable))			00080109	
4	Date	5	Payee name			•		
	01/18/2024		U.S. Postal Service					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$9.65		1009 Oakwood Ln.					
			Arlington, TX 76012					
8	PURPOSE	<u> </u>	Category (See Categories listed at the top of this sche		(b) Description			
-	OF		Postage	edule)		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		. cottigo		Check if Austir	n, TX	, officeholder living expense	
					Priority mail	pos	stage.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O)ffice sou	ght		Office held	
	Date		Payee name					
	01/17/2024		VeriCast/Harland Clarke					
	Amount (\$)		Payee address; City; State;	Zip Co	10			
	\$19.96		2901 FM 157	210 00				
	φ19.90		2301 FM 137					
			Mansfield, TX 76063					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T.	
							, officeholder living expense	
					campaign ac			
	Complete ONLY if direct		andidate/Officeholder name O)ffice sou			Office held	
	expenditure to benefit C/OF				jin			
	Date		Payee name					
	01/03/2024		XL Digital Imaging, LLC					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$358.31		11625 Columbia Center Drive					
			Ste. 200					
			Dallas, TX 75229					
	PURPOSE				(b) Description			
	OF		Category (See Categories listed at the top of this sche Advertising Expense	edule)		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Adventising Expense				, officeholder living expense	
					Printing of Bi	llbc	bard sign.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name O)ffice sou	ght		Office held	
⊢								

	Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense									
	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		nmittee	Fees Food/Beverage E Gift/Awards/Mem Legal Services		Office Overhea Polling Expens Printing Expen	d/Rental Expense e		Transportation Travel in Distric Travel Out of D	Equipment & Related Expense
	Credit Card Payment			The Instructio	n Guide explains	how to compl	ete this form.			
1	Total pages Schedule F1:							3	Filer ID	(Ethics Commission Filers)
	Sch: 12/12 Rpt: 29/31				The Honorable	2)			00080109	
4	Date 01/25/2024		Payee nan Zoom Vid	ne leo Communic	ations, Inc.					
6	Amount (\$) \$21.66		Payee add 55 Almad 6th Flr. San Jose		State	; Zip Code				
8	PURPOSE OF EXPENDITURE		Category Fees	(See Categories liste	d at the top of this sch	_{edule)} (b)		in, TX	, officeholder livin	nplete Schedule T. Ig expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/C	Officeholder nam	e (Dffice sought			Office h	neld

	POLITICAL EX	(PENDITURES FROM PERSON	AL FUNDS	SCHEDULE G
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement erhead/Rental Expense xpense xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
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	7 Payee address; City; State; Zip Co 1550 Hwy. 157 N.	ode	
	Reimbursement from political contributions intended	Mansfield, TX 76063		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense g campaign sign posts into ground.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

OUTSTAN	NDING LOANS		SCHEDULE L
The Instruction	on Guide explains how to complete this form.		Total pages Schedule L: Sch: 1/1 Rpt: 31/31
2 FILER NAME Bennett, Patricia	a 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		
X not applicable	7 Guarantor address; City; State; Zip Code		
LENDER INFORMATION	Name of lender Bennett, Patricia Lender address; City; State; Zip Code		
GUARANTOR	Mansfield, TX 76063 Name of guarantor		
INFORMATION			
X 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		
X not applicable	Guarantor address; City; State; Zip Code		