FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087436 11 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Edward A. NAME Date Received **ELECTRONICALLY FILED** 01/02/2025 NICKNAME LAST **SUFFIX** Alan Bennett CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. BOX 584 MAILING Receipt # Amount **ADDRESS** Change of Address Waco, TX 76703 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Larry J. NAME NICKNAME LAST **SUFFIX** Lynch **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 10020 Forest View Dr **ADDRESS** (Residence or Business) Woodway, TX 76712 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (254) 405-5597 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 474 McLennan District Judge District 474

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 11

13 C / OH NAME	Bennett, Edward A. ((Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may have bee	olitical expenditures made by political n made without the candidate's or office rt this information only if they receive n	ceholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREAS	SURER NAME		
		COMMITTEE CAMPAIGN TREAS	SURER ADDRESS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUTION	S(OTHER THAN PLEDGES, LOANS,		
TOTALS		ES OF LOANS, OR CONTRIBUTIO		\$ 0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)				
EXPENDITURE TOTALS	3. TOTAL UNITEM	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 1,655.24	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		D AS OF THE LAST DAY OF THE	\$ 7,583.61	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ING LOANS AS OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT					
		true and correc	rm, under penalty of perjury, that the act and includes all information required Election Code.		
			The Honorable Edward A. Ben	nett	
			Signature of Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
Sworn to and subse	cribed before me, by the s	aid	, this the	day	
of	, 20, to ce	rtify which, witness my hand and s	eal of office.		
Signature of office	cer administering oath	Printed name of officer admir	nistering oath Title of office	er administering oath	

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

	3 of 11							
18 FILER NA Bennett,	ME Edward A. (The Honorable)	19 Filer ID 00087436	(Ethics Commission Filers)					
	NAME OF SCHEDULE							
1.	1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)							
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$					
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$					
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 851.62					
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 803.62					
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS ITO FILER	RETURNED	\$					

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services	Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel Out of Di OTHER (enter a	ristrict a category not listed above)	
_	Total manage Coloradula 54	a =====		Jenpiumo i				n Files ID	(Ethica Commission Files)
1	Total pages Schedule F1: Sch: 1/3 Rpt: 4/11		NAME ett, Edward A. (The Ho	norable)			3	Filer ID 00087436	(Ethics Commission Filers)
_	-								
4	Date	5 Payee							
L	08/25/2024	Chase	Chase						
6	Amount (\$)	7 Payee	address; City;	State;	Zip Cod	de			
	\$159.89	PO Bo	x 15298						
		WIlmii	ngton, DE 19850						
8	PURPOSE	(a) Catego	Ory (See Categories listed at the	e top of this sche	edule)	(b) Descr	ription		
	OF		Card Payment		,		•	ıtside of Texas. Con	mplete Schedule T.
	EXPENDITURE		•			Ch	eck if Austin, T	ΓX, officeholder livin	g expense
						cand	y for para	.de	
9	Complete ONLY if direct		te/Officeholder name	0	office souç	jht		Office h	ield
	expenditure to benefit C/OI								
	Date	Payee	name						
	12/27/2024	Texas	Independent Bar Asso	ociation					
	Amount (\$)	Payee	address; City;	State;	Zip Cod	de			
	\$48.00	1801	East 51st Street						
		Suite	365-474						
			, TX 78723						
	PURPOSE OF		Ory (See Categories listed at the	e top of this sche	edule)	(b) Descr			
	EXPENDITURE	Subsc	ription					ıtside of Texas. Con FX, officeholder livin	
									A which provides daily
									by Texas appeal courts
	Complete ONLY if direct		te/Officeholder name	0	office soug	jht		Office h	eld
	expenditure to benefit C/OI	4							
	Date	Payee	name						
	07/16/2024	Wayfa	ir MasterCard						
	Amount (\$)	Pavee	address; City;	State:	Zip Cod	de			
	\$15.00		ox 6772	Juic,	p 000				
	Ψ13.00	100	W 0112						
		Cicon	Fallo CD 57117						
			Falls, SD 57117		i				
	PURPOSE OF		Ory (See Categories listed at the	e top of this sche	edule)	(b) Descr	•		
	EXPENDITURE	Credit	Card Payment					itside of Texas. Con	•
						_	eck if Austin, i hly websi	TX, officeholder livin	ig expense
						HIOHL	iny websi	16 166	
	Complete ONLY if direct	Candida	te/Officeholder name		office soug	ıht		Office h	ald
	expenditure to benefit C/O		Le/Onicendidel Haine	U	mice sou(jiit		Office fi	ıcıu

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	<u> </u>						
	Sch: 2/3 Rpt: 5/11	Bennett, Edward A. (The Honorable) 00087436						
4	Date	5 Payee name						
	08/17/2024	Wayfair MasterCard						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$36.00	PO Box 6772						
		Sioux Falls, SD 57117						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		website fee and parade entry fee						
		nosono iso ana parado sinaj iso						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
3	expenditure to benefit C/O							
_	Data							
	Date	Payee name						
	09/09/2024	Wayfair MasterCard						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$15.00	PO Box 6772						
		Sioux Falls, SD 57117						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense						
		Flywheelwebsite fee						
	Complete ONLY if direct	Condidate/Office holder name Office county						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date	Payee name						
	10/19/2024	Wayfair MasterCard						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$131.00	PO Box 6772						
		Sioux Falls, SD 57117						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		website fee; PO box rental						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	experiditure to beliefit C/Or	1						

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

ment Solicitation/Fundraising Expense
nse Transportation Equipment & Related Expense
Travel in District
Travel Out of District
or OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission	n Filers)
Sch: 3/3 Rpt: 6/11	Bennett, Edward A. (The Honorable)		00087436	
4 Date	5 Payee name			
11/09/2024	Wayfair MasterCard			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$73.33	PO Box 6772			
	Sioux Falls, SD 57117			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Credit Card Payment		avel outside of Texas. Complete Schedule T.	
EXPENDITURE	,		ustin, TX, officeholder living expense	
		MCRW lui	ncheon and website monthly fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held	
	· ·			
Date	Payee name			
12/19/2024	Wayfair MasterCard			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$73.40	PO Box 6772			
	Sioux Falls, SD 57117			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Credit Card Payment		avel outside of Texas. Complete Schedule T.	
			ustin, TX, officeholder living expense e and postage	
		Website ie	e and postage	
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht .	Office held	
expenditure to benefit C/O		igrit	Office field	
Data				
Date 08/19/2024	Payee name Wayteir MacterCord			
	Wayfair MasterCard			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$300.00	PO Box 6772			
	Sioux Falls, SD 57117			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Credit Card Payment	<u> </u>	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense	
			of Hope fundraiser	
		, 51111ay		
Complete ONLY if direct	Candidate/Officeholder name Office sou	l <u> </u>	Office held	
expenditure to benefit C/O		.9	Since field	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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 Insti	ruction Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 1/5 Rpt: 7/11	Bennett, Edward A.	00087436			
4 CREDIT CARD ISSUER		ncial institution yfair	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	
	\$58.40	12/11/2024	12/19/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co	
	USPS				
			Waco, TX 76712		
8 PURPOSE OF	(a) Category	of this sahadula)	(b) Description		
EXPENDITURE X Political	(See Categories listed at the top of this schedule) Advertising Expense postage for Christmas mail			ailout	
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
	\$15.00	08/07/2024	08/17/2024		
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Co	
	Chaubool		1229 Millwork Ave		
	Flywheel		Suite 301		
			Omaha, NE 68102		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
l <u>—</u>	Advertising Expense	or this schedule,	website maintenance		
X Political					
Non-Political	`	of Texas. Complete Schedule T.		, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held	
expenditure to benefit C/OH PAYMENT	(a) Amazunt Chausad	(h) Data of Chause	(a) Data(a) Credit Cond Inc.	u Deid	
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 08/17/2024	er Palu	
	\$21.00	08/08/2024			
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City, State, Zip Co	
	(a) rayce name		P.O. Box 65	Oity, State, 219 00	
	Westfest, Inc.	F.O. BOX 03			
			West, TX 76691		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	parade entry fee		
X Political	Event Expense				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held	
expenditure to benefit C/OH					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a cate)

Candidate/Onicerolden/Folitica	· ·	ruction Guide explains how	-	THER (effer a category not list	eu above)			
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
Sch: 2/5 Rpt: 8/11	Bennett, Edward A.	(The Honorable)		00087436				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$300.00	08/19/2024			r Paid			
7 PAYEE	(a) Payee name Archway of Hope		(b) Payee address; 2114 Austin Avenue Waco, TX 76701	City, State, Zip Code				
8 PURPOSE OF								
EXPENDITURE (See Categories listed at the top of this schedule) Event Expense			Retro Radio 2024 fundrais	sing event for Archwa	ay of Hope			
X Political								
	n-Political (c) Check if travel outside of Texas. Complete Schedule T.			, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
	(a) Amazunt Chavanad	(h) Data of Chause	(a) Data(a) Cradit Card Issue	u Daid				
PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 07/07/2024	(c) Date(s) Credit Card Issue 07/16/2024	er Pald				
PAYEE	(a) Payee name		(b) Payee address;	City, Stat	e, Zip Code			
	Flywheel		1229 Millwork Ave Suite 301 Omaha, NE 68102					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description monthly website fee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held				
PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 09/07/2024	(c) Date(s) Credit Card Issue 09/09/2024	r Paid				
PAYEE	(a) Payee name Flywheel		(b) Payee address; 1229 Millwork Ave Suite 301 Omaha, NE 68102	City, Stat	e, Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description website fee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Candidate/Officeholder name Office sought Office held								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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 F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 3/5 Rpt: 9/11	Bennett, Edward A.	(The Honorable)		00087436					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$					
6 PAYMENT	(a) Amount Charged \$15.00	15.00 10/07/2024 10/19/2024							
7 PAYEE	(a) Payee name (b) Payee address; 1229 Millwork Ave Suite 301 Omaha, NE 68102			City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	Advertising Expense								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense				
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office s			e sought	Office held					
PAYMENT	(a) Amount Charged \$116.00	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuel 10/19/2024	r Paid					
PAYEE	YEE (a) Payee name (b) Payee address; 424 Clay Ave Waco, TX 76703			City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description PO Box rental						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					
PAYMENT	(a) Amount Charged \$58.33	(b) Date of Charge 11/06/2024	(c) Date(s) Credit Card Issue 11/09/2024	r Paid					
PAYEE	(a) Payee name McLennan County I	Republican	(b) Payee address; P.O. Box 7291 Waco, TX 76710	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Event Expense								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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 Inst	ruction Guide explains how	to complete this f	orm.			
1 Total pages Schedule F4:	I: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 4/5 Rpt: 10/11	Bennett, Edward A.	. (The Honorable)			00087436		
4 CREDIT CARD ISSUER	Name of financial institution See previous See previous TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			\$			
6 PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 11/07/2024	(c) Date(s) Cre 11/09/2024	dit Card Issuer	Paid		
7 PAYEE	(a) Payee name (b) Payee address; 1229 Millwork Ave Suite 301 Omaha, NE 68102			City,	State,	Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description monthly website fee						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$15.00	(b) Date of Charge 12/07/2024	(c) Date(s) Cre 12/19/2024	dit Card Issuer	Paid		
PAYEE	(a) Payee name Flywheel		(b) Payee address; 1229 Millwork Ave Suite 301 Omaha, NE 68102			State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description monthly web:	site fee			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX, o	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	dit Card Issuer	Paid		
PAYEE	(a) Payee name		(b) Payee addr	ess;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
Political							
Non-Political Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica		ces Sa ruction Guide explains how		THER (enter a category not listed above)
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 5/5 Rpt: 11/11	Bennett, Edward A.	(The Honorable)		00087436
4	CREDIT CARD ISSUER		ncial institution ase	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6	PAYMENT	(a) Amount Charged \$159.89	(b) Date of Charge 08/24/2024	(c) Date(s) Credit Card Issue 08/25/2024	r Paid
7	PAYEE	(a) Payee name Sam's Club		(b) Payee address; 2301 East Waco Dr Waco, TX 76705	City, State, Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description candy for parade	
	X Political	Event Expense			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense
9	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held
е	xpenditure to benefit C/OH				