CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Commis 00086035	sion Filers)	2 Total pages fil	ed: 4
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Benjamin C			Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME			SUFFIX	01/14/2025	
		LAST		SUFFIX	01/14/2023	
	Ben	Bumgarner				
4 CANDIDATE /	ADDRESS / PO BOX; APT /	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
OFFICEHOLDER MAILING	5150 Kensington Ct.					
ADDRESS					Receipt #	Amount
Change of Address	Flower Mound, TX 75022					
	,				Date Processed	
					Date Imaged	
					Date illiageu	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER		Benjamin C.		1411		
NAME		Derijariiri C.				
	NIO(4) A LA					
		LAST		SUFFIX		
	Ben	Bumgarner				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY;	STA	ATE; ZIP CODE
ADDRESS	5150 Kensington Ct.					
(Residence or Business)						
	Flower Mound, TX 75022					
7 CAMPAIGN	AREA CODE PHON	E NUMBER E	VTENCION			
7 CAMPAIGN TREASURER		E NUMBER E	EXTENSION			
PHONE	(940) 205-2210					
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff	15th day after car	mpaign treasurer
] 000 day 20.0.0	оловион <u>П</u>	L	appointment (office	ceholder only)
	July 15	8th day before 6		Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)
				reporting inflit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	10/27/2024	TH	ROUGH	12/31/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pt	rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Distri	ict 63		State Represent		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 24

13 C / OH NAME	Bumgarner, Benjamir	n C (The Honorable)	14 Filer ID (Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expen These expenditures may have been made without I officeholders are required to report this informa	ut the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	
		COMMITTEE CAMPAIGN TREASURER ADDR	EESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER T ES OF LOANS, OR CONTRIBUTIONS MADE E		\$ 0.00
	NS)	\$ 52,901.03		
EXPENDITURE TOTALS		\$ 1,470.48		
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 196,521.58
CONTRIBUTION BALANCE	REPORTING PE			\$ 53,489.38
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS . TING PERIOD	AS OF THE LAST DAY	\$ 264,194.47
17 AFFIDAVIT		I swear, or affirm, under pen		
		true and correct and include under Title 15, Election Cod		o be reported by me
		The Honor	able Benjamin C Bumga	arner
		Signature	of Candidate or Officehole	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				C	OVER	SHEET PG 3 3 of 24
		NAM garne	ME or, Benjamin C (The Honorable)	19 Filer ID 00086035	(Ethics (Commission Filers)
			E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
:	L. [Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	52,801.03
2	2.	Х	\$	100.00		
;	3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4	1. [\$			
į	5.	Χ	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	196,521.58	
(S. [SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
-	7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$		
8	3.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
Ç	e. [SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
-	LO.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
-	11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	L2.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)		3	Filer ID (Ethics Commission 00086035	on Filers)
4	Date 12/09/2024	 Full name of contributor	00089136)	7	Amount of Contribution (\$)	\$2,000.00
		Washington, DC 20001				
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/04/2024	Full name of contributor			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75240				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#: Associated Builders & Contractors of Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78767				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/04/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78752 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#: Ben E. Keith Company Texas PAC Contributor address; City; State; Zip Code Fort Worth, TX 76102)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 2/9 Rpt: 5/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)			3	Filer ID (Ethics Commission 00086035	n Filers)
4	Date 12/05/2024	 5 Full name of contributor out-of-state PAC (ID#: Bird, Robert 6 Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$2,000.00
0	Dringing Lagge	Lantana, TX 76226	٦	Employer (Coo Instructions	<u></u>		
8	Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: Bumgarner, Ben Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	Flower Mound, TX 75022 pation / Job title (See Instructions)	Т	Employer (See Instructions	;) 		
	T Tillelpai occu	pation 7 oob title (occ mondellons)		Employer (See mondenone	"		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#: Cargo, Jon Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$100.00
		Flower Mound, TX 75028					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: Carter, Jim Contributor address; City; State; Zip Code Roanoke, TX 76262)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#: Cooke County Republican Women PAC Contributor address; City; State; Zip Code Gainesville, TX 76240)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBU	ITION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 3/9 Rpt: 6/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)			3	Filer ID (Ethics Commission 00086035	on Filers)
4	Date 12/14/2024	 Full name of contributor out-of-state PAC Dietz, William Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
		Flower Mound, TX 75028					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/12/2024	Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Anna, TX 75409 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Chairman	,		Gallagher Construction		mpany	
	Date 11/25/2024	Full name of contributor out-of-state PAC Gilmore, Donald Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$200.00
		Flower Mound, TX 75022					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor out-of-state PAC Gilmore, Donald W Contributor address; City; State; Zip Code Flower Mound, TX 75022)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor out-of-state PAC Holland & Knight Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701	(ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)			3	Filer ID (Ethics Commission 00086035	on Filers)
4	Date 12/12/2024	 Full name of contributor Husch Blackwell Strategie Contributor address; City; S 			7	Amount of Contribution (\$)	\$500.00
_	Dein sin al acces	Jefferson City, MO 65101		O Frankrije (O - krativski se	Ĺ		
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)		
	Date 12/12/2024	Full name of contributor Kerbow, David Contributor address; City; S				Amount of Contribution (\$)	\$50.00
	Principal occu	Flower Mound, TX 75028 pation / Job title (See Instructions		Employer (See Instructions	<u> </u>		
	Date 12/04/2024	Full name of contributor Lubbock Area Republicar Contributor address; City; S Lubbock, TX 79493				Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>(</u>		
	Date 12/12/2024	Full name of contributor Marshall, Galand Contributor address; City; S Lewisville, TX 75067	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 12/03/2024	Full name of contributor McGuire, Michael Contributor address; City; S Dallas, TX 75205	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,500.00
	Principal occu President &	pation / Job title (See Instructions	5)	Employer (See Instructions Andrews Distributing)		
	. resident &			, marewe bisinbuting			

	MONET	ARY POLITICAL CONTR	RIBUTIO	NS		SCHEDUI	E A1
	The Instruc	ction Guide explains how to com	plete this fo	rm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)			3	Filer ID (Ethics Commission 00086035	on Filers)
4	Date 11/04/2024	 Full name of contributor x out-of-s McGuireWoods Federal PAC Contributor address; City; State; Zip Co 	state PAC (ID#: <u>C</u>	00225342	7	Amount of Contribution (\$)	\$250.00
		Richmond, VA 23219					
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions	i)		
	Date 11/12/2024	National Association of Insurance a) Advisors - Texas PAC		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 12/09/2024	Full name of contributor out-of-s Nucor Corp PAC Contributor address; City; State; Zip Co	state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	Jewett, TX 75846 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/12/2024	Full name of contributor out-of-s Penn Entertainment Inc. Texas PAC Contributor address; City; State; Zip Co Wyomissing, PA 19610)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/14/2024	Rasti, Kelly				Amount of Contribution (\$)	\$100.00
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)		3	Filer ID (Ethics Commission 00086035	n Filers)
4	Date 12/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Deignigal	Austin, TX 78701	O Faralous (Coo Instructions	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/25/2024	Full name of contributor ut-of-state PAC (ID#:_ Rigby, Cliff Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$26.03
		Flower Mound, TX 75022				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: Rochelle, Dan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Lewisville, TX 75029				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_Roehrs, Valerie Contributor address; City; State; Zip Code Argyle, TX 76226			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Schatzline, Nathaniel Contributor address; City; State; Zip Code Fort Worth, TX 76161			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L 5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1	
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/9 Rpt: 10/24		
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)		3	Filer ID (Ethics Commissi 00086035	on Filers)	
4	Date 11/04/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10,000.00	
		Austin, TX 78701	.				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# Texas Bankers Association Bankers PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID# Texas Dairymen PAC Contributor address; City; State; Zip Code	<u> </u>		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78711 pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID# Texas Manufactured Housing Assn Inc PAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)			
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID# Texas Nursery & Landscape Association PAC Contributor address; City; State; Zip Code Cedar Park, TX 78613	:)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/24
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)		3	Filer ID (Ethics Commission Filers) 00086035
4	Date 12/04/2024	 Full name of contributor		7	Amount of Contribution (\$) \$1,000.00
		Austin, TX 78705			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Pipeline Assn PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ Texas REALTORS PAC (TREPAC) Contributor address; City; State; Zip Code Austin, TX 78768			Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Assn. Of Fire Fighters Action Comn Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Statewide Telephone Cooperative Inc PA Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
		•			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/24	
2	FILER NAME Bumgarner,	Benjamin C (The Honorable)		3	Filer ID (Ethics Commission 00086035	on Filers)
4	Date 12/04/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,000.00
	Delication of a con-	Fort Worth, TX 76185	lo Farala and Constructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ VSP Holding Company Inc. PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Rancho Cordova, CA 95670	T			
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Zachry Construction Corp PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		San Antonio, TX 78265	1	<u></u>		
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	5)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/24 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bumgarner, Benjamin C (The Honorable) 00086035 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/29/2024 Texas REALTORS PAC (TREPAC) \$100.00 Room Rental Expense for 7 Contributor address; City; State; Zip Code Campaign Event Austin, TX 78768 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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)

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 Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 1/11 Rpt: 14/24	2 FILER NAME Bumgarner, Benjamin C (The Honorable) 3 Filer ID (Ethics Commission Filers) 00086035
4	Date 12/23/2024	5 Payee name All Sorts Mailing Services
6	Amount (\$) \$499.46	7 Payee address; City; State; Zip Code 3335 Keller Springs Rd Ste 104
		Carrollton, TX 75006
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing Expense for COH Materials
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/06/2024	Cline, Greg
	Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 2910
		Austin, TX 78767
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contract Labor
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/06/2024	Payee name Cross Timbers Gazette
	Amount (\$) \$440.00	Payee address; City; State; Zip Code 6101 Long Prairie Rd #744
		Flower Mound, TX 75028
	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 COH Newspaper Advertising Expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/11 Rpt: 15/24	Bumgarner, Benjamin C (The Honorable) 00086035
4	Date	5 Payee name
	12/02/2024	Cross Timbers Gazette
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$625.00	6101 Long Prairie Rd #744
		Flower Mound, TX 75028
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense COH Newspaper Advertising Expense
		Continuouspaper / divertishing Expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
\vdash	Date	Payee name
	11/12/2024	Cross Timbers Gazette
_	Amount (\$)	Payee address; City; State; Zip Code
	\$625.00	6101 Long Prairie Rd #744
	Ψ023.00	olol Long Frame Na #144
		Flower Mound, TX 75028
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense COH Newspaper Advertising Expense
		COTTNewspaper Advertising Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davida dama
	11/06/2024	Payee name Curlee Young, Cole
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 2910
		Auglia TV 70767
		Austin, TX 78767
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense 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/Politica Credit Card Payment	/ - al Committe	ee Lega	Awards/Memorials Ex I Services			ages/	Contract Labor		Travel Out of OTHER (ente	District r a category not	listed above)
L		I _		Instruction Guid	e expiains i	now to con	npie	te this form.	ı .			
1	Total pages Schedule F1:	l							3	Filer ID	,	ommission Filers)
	Sch: 3/11 Rpt: 16/24			njamin C (The	Honorab	le)				0008603	5	
4	Date	1 1	ee name									
	12/19/2024	Cur	rlee Young,	Cole								
6	Amount (\$)	7 Pay	ee address;	City;	State;	Zip Cod	de					
	\$400.00	PO	Box 2910									
		Aus	stin, TX 7876	67								
8	PURPOSE	(a) Cat	egory (See Ca	tegories listed at the t	on of this sch	edule)	(b)	Description				
	OF			s/Contract Lab		,		Check if travel	outsi	de of Texas. C	omplete Schedu	le T.
	EXPENDITURE							Check if Austin,			ing expense	
								Campaign Co	ontr	act Labor		
9	Complete ONLY if direct expenditure to benefit C/OI		lidate/Officeho	older name	C	Office soug	ght			Office	held	
	CAPERIORALE TO DETICITE C/OI	· 1										
	Date	Pay	ee name									
	11/06/2024	Del	lorbe, Davis									
	Amount (\$)	Pay	ee address;	City;	State;	Zip Cod	de					
	\$250.00	111	L1 Lexington	Ave								
		Apt	916									
			wer Mound,	TX 75028								
	PURPOSE	(a) Cat	egory (See Ca	tegories listed at the t	on of this sch	edule)	(b)	Description				
	OF EXPENDITURE			Contract Lab		,			outsi	de of Texas. C	omplete Schedu	le T.
	EXPENDITORE							Check if Austin,			ing expense	
								Campaign Co	ontr	act Labor		
	Complete ONLY if direct expenditure to benefit C/OI		lidate/Officeho	older name	C	Office soug	ght			Office	held	
	Date	1 1	ee name									
L	11/12/2024	Der	nton County	Republican Pa								
	Amount (\$)	Pay	ee address;	City;	State;	Zip Cod	de					
	\$1,031.21	292	21 Country C	lub Rd. #102								
		Der	nton, TX 762	210								
	PURPOSE	(a) Cat	egory _{(See Ca}	tegories listed at the t	top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		ent Expense					—			omplete Schedu	le T.
								Check if Austin,				
								Sponsorship	or (Jounty Pa	ny ⊑vent	
	Complete ONLY if direct	Cond	lidate/Officeho	older name		Office soug	tdr			Office	held	
	expenditure to benefit C/OI		iiuale/OIIICEII	nuci iiaille	C	vilice Soul	yııl			Onice	neiu	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/11 Rpt: 17/24	Bumgarner, Benjamin C (The Honorable) 00086035
4	Date	5 Payee name
	12/03/2024	Flower Mound Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,500.00	700 Parker Square Rd # 100
		Flower Mound, TX 75028
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		COH Membership Dues
_	Complete ONL V if direct	Condidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Data	
	Date	Payee name
	11/12/2024	Henrickson, Lisa
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	9031 Cedar Ridge
		Argyle, TX 76226
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Catering and Coordination of Campaign Event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/28/2024	Hernandez, David
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	253 East Round Grove Road
	7 200.00	
		Lewisville, TX 75067
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

al Committee	Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	Printing E Salaries/V	Wages/Contr		Travel Out of Distr OTHER (enter a ca	ict ategory not listed above)
2 FILER NAME				3		(Ethics Commission Filers)
Bumgarner,	Benjamin C (The Hone	orable)			00086035	
5 Payee name						
Lewisville Aı	rea Chamber of Comm	erce				
7 Payee addres	ss; City; S	state; Zip Co	ode			
551 N Valley	y Pkwy					
Lewisville, T	X 75067					
(a) Category (Se	e Categories listed at the top of th	is schedule)	(b) Des	cription		
Fees			_			
						жропос
Candidate/Offic	ceholder name	Office sou	<u>ı </u>		Office held	d
Н						
Payee name						
Mailchimp						
Payee addres	ss; City; S	state; Zip Co	ode			
675 Ponce of	de Leon Ave NE	•				
Ste 5000						
Atlanta, GA	30308					
(a) Category (Sa	e Categories listed at the top of th	is schedule)	(b) Des	cription		
	a categories iisted at the top of th	Joi icadic)		•		-A- Cabadala T
Advertising I	Expense				ide of Texas. Compl	
	Expense			heck if Austin, TX	, officeholder living e	expense
	Expense			heck if Austin, TX		expense
Advertising I		Office see	COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
		Office sou	COI	heck if Austin, TX	, officeholder living e	expense SE
Advertising I Candidate/Offici		Office sou	COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office		Office sou	COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Offici	ceholder name		COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office H Payee name Mailchimp Payee addres	ceholder name	Office sou State; Zip Co	COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office Payee name Mailchimp Payee addres 675 Ponce of	ceholder name		COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000	ceholder name ss; City; S de Leon Ave NE		COI	heck if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA	ceholder name ss; City; S de Leon Ave NE 30308	state; Zip Cc	COI	check if Austin, TX	, officeholder living e keting Expens	expense SE
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA (a) Category (Se	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of th	state; Zip Cc	COI ught ode	cription	, officeholder living e keting Expens Office held	expense Ge d
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of th	state; Zip Cc	COI ight (b) Des	cription	, officeholder living e keting Expens	ete Schedule T.
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA (a) Category (Se	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of th	state; Zip Cc	col	cription check if Austin, TX	officeholder living eketing Expens Office held	ete Schedule T.
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA (a) Category (Se	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of th	state; Zip Cc	col	cription check if Austin, TX	officeholder living eketing Expens Office held	ete Schedule T.
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce condidate, GA (a) Category (See Advertising I	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of the Expense	state; Zip Cc	(b) Des	cription check if Austin, TX	officeholder living eketing Expens Office held	ete Schedule T. Expense Se Be Expense Expense Se Se
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA (a) Category (Se Advertising I	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of the Expense	itate; Zip Co	(b) Des	cription check if Austin, TX	officeholder living eketing Expens Office held ide of Texas. Comple, officeholder living eketing Expens	ete Schedule T. Expense Se Be Expense Expense Se Se
Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce condidate, GA (a) Category (See Advertising I	ceholder name ss; City; S de Leon Ave NE 30308 e Categories listed at the top of the Expense	itate; Zip Co	(b) Des	cription check if Austin, TX	officeholder living eketing Expens Office held ide of Texas. Comple, officeholder living eketing Expens	ete Schedule T. Expense Se Be Expense Expense Se Se
	2 FILER NAME Bumgarner, 5 Payee name Lewisville Al 7 Payee addres 551 N Valley Lewisville, T (a) Category (See Fees Candidate/Office H Payee name Mailchimp Payee addres 675 Ponce of Ste 5000 Atlanta, GA	The Instruction Guide expl 2 FILER NAME Bumgarner, Benjamin C (The Hono 5 Payee name Lewisville Area Chamber of Comm 7 Payee address; City; S 551 N Valley Pkwy Lewisville, TX 75067 (a) Category (See Categories listed at the top of the Fees Candidate/Officeholder name H Payee name Mailchimp Payee address; City; S 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	The Instruction Guide explains how to complete the sumgarner, Benjamin C (The Honorable) 5 Payee name Lewisville Area Chamber of Commerce 7 Payee address; City; State; Zip Complete the Steep State; Zip Complete Steep State; Zip Complete Steep State; Zip Complete Steep State; Zip Complete Steep Steep Steep State; Zip Complete Steep	The Instruction Guide explains how to complete thi 2 FILER NAME Bumgarner, Benjamin C (The Honorable) 5 Payee name Lewisville Area Chamber of Commerce 7 Payee address; City; State; Zip Code 551 N Valley Pkwy Lewisville, TX 75067 (a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Mailchimp Payee name Mailchimp Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	The Instruction Guide explains how to complete this form. 2 FILER NAME Bumgarner, Benjamin C (The Honorable) 5 Payee name Lewisville Area Chamber of Commerce 7 Payee address; City; State; Zip Code 551 N Valley Pkwy Lewisville, TX 75067 (a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Payee name Mailchimp Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	The Instruction Guide explains how to complete this form. 2 FILER NAME Bumgarner, Benjamin C (The Honorable) 5 Payee name Lewisville Area Chamber of Commerce 7 Payee address; City; State; Zip Code 551 N Valley Pkwy Lewisville, TX 75067 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Candidate/Officeholder name Payee name Mailchimp Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
_		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1: Sch: 6/11 Rpt: 19/24	Bumgarner, Benjamin C (The Honorable)	3 Filer ID (Ethics Commission Filers) 00086035
4	Date	5 Payee name	
	12/30/2024	Mailchimp	
6	Amount (\$) \$479.70	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Ste 5000 Atlanta, GA 30308	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	utside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin,	TX, officeholder living expense
		COH Email M	arketing Expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/12/2024	Melton, Kalon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,000.00		
	\$5,000.00	3928 Creek Hollow Way	
		The Colony, TX 75067	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Eabor	utside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Campaign Co	ntract Labor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/31/2024	Melton, Kalon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,500.00	3928 Creek Hollow Way	
		The Colony, TX 75067	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Campaign Co	ntract Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		
	Sch: 7/11 Rpt: 20/24	Bumgarner, Benjamin C (The Honorable) 00086035		
4	Date	5 Payee name		
	10/31/2024	Melton, Kalon		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$1,000.00	3928 Creek Hollow Way		
		The Colony, TX 75067		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Campaign Contract Labor		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
	Date	Payee name		
	10/28/2024	Murphy Nasica & Associates		
	Amount (\$)	Payee address; City; State; Zip Code		
\$78,000.00 PO Box 1648				
		Austin, TX 78767		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Design and Placement of Streaming Campaign		
		Ads - Reported on Prior Sch F2		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
	Date	Payee name		
	10/28/2024	Murphy Nasica & Associates		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$22,756.20	PO Box 1648		
		Austin, TX 78767		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
		Design, Data, Postage and Production of Campaign		
		Mail Advertisements		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	experientale to beliefft C/OI	·		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 21/24	Bumgarner, Benjamin C (The Honorable) 00086035
4	Date	5 Payee name
	10/31/2024	Murphy Nasica & Associates
6	Amount (\$) \$22,779.59	7 Payee address; City; State; Zip Code PO Box 1648
		Austin, TX 78767
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 Design, Data, Postage and Production of Campaign Mail Advertisements
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/01/2024	Murphy Nasica & Associates
	Amount (\$) \$11,412.50	Payee address; City; State; Zip Code PO Box 1648
		Austin, TX 78767
	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 Design and Placement of Digital Voter Contact
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/01/2024	Murphy Nasica & Associates
	Amount (\$) \$3,500.00	Payee address; City; State; Zip Code PO Box 1648
		Austin, TX 78767
	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 Video Advertising Production Expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 22/24	Bumgarner, Benjamin C (The Honorable) 00086035
4	Date	5 Payee name
L	11/19/2024	Texas Political Solutions, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	PO Box 685201
		Austin, TX 78768
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Compliance Services
		Campaign compliance convices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/22/2024	Waterloo Communications
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$27,500.00	91 Red River St
		Unit 2404
		Austin, TX 78701
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Consulting Expense
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/29/2024	WinRed
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$39.45	1776 Wilson Blvd
	4000	
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Processing Fees for Online Campaign Contributions:
		Oct 29 - Dec 14
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
1		
ı		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/11 Rpt: 23/24	Bumgarner, Benjamin C (The Honorable) 00086035
4	Date	5 Payee name
	11/06/2024	Woodard, Jordan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	10109 Cherry Hill Ln
		Providence Village, TX 76226
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EX. ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Contract Labor
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	11/08/2024	i360 LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$18.59	2300 Clarendon Blvd
		Ste 800
		Arlington, VA 22201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense COH Technology Expense
		COTT reclinology Expense
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	12/02/2024	i360 LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	2300 Clarendon Blvd
	4120.00	Ste 800
		Arlington, VA 22201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		COH Technology Expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made E
Candidate/Officeholder/Politic

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)
_	Sch: 11/11 Rpt: 24/24	Bumgarner, Benjamin C (The Honorable)	00086035
4	Date 12/30/2024	5 Payee name i360 LLC	
6	Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 2300 Clarendon Blvd	
		Ste 800 Arlington, VA 22201	
8	PURPOSE OF EXPENDITURE	emee everneda/Kental Expense	tside of Texas. Complete Schedule T. X, officeholder living expense gy Expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/25/2024	Payee name i360 LLC	
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 2300 Clarendon Blvd Ste 800 Arlington, VA 22201	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	tside of Texas. Complete Schedule T. X, officeholder living expense ngy Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/23/2024	Payee name i360 LLC	
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 2300 Clarendon Blvd Ste 800 Arlington, VA 22201	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertical Expense	tside of Texas. Complete Schedule T. X, officeholder living expense gy Expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held