

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

| | | | | | | |
|---|--|--------------------------|--|--|--------|----------|
| The C/OH Instruction Guide explains how to complete this form. | | | 1 Filer ID (Ethics Commission Filers) 00089991 | 2 Total pages filed: 15 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR Mr. | FIRST David L. | MI | OFFICE USE ONLY | | |
| | NICKNAME | LAST Bennett | SUFFIX | Date Received ELECTRONICALLY FILED 01/09/2026 | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; 3423 Ashfield Dr. | | | Date Hand-delivered or Date Postmarked | | |
| | Houston, TX 77082 | | | Receipt # | Amount | |
| | | | | Date Processed | | |
| | | | | Date Imaged | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Ms. | FIRST Leyla J. | MI | | | |
| | NICKNAME | LAST Ozkardesh | SUFFIX | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 12815 Ashford Hills Dr. | | APT / SUITE #; | CITY; | STATE; | ZIP CODE |
| | Houston, TX 77077 | | | | | |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE (281) | PHONE NUMBER 785-2425 | EXTENSION | | | |
| 8 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | | |
| 9 PERIOD COVERED | Month 07/01/2025 | Day | Year | Month 12/31/2025 | Day | Year |
| 10 ELECTION | ELECTION DATE Month 03/03/2026 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 11 OFFICE | OFFICE HELD (if any) None Place Houston District 149 Harris | | | 12 OFFICE SOUGHT (if known) State Representative Place Houston District 149 | | |

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

2 of 15

| | | | |
|--|--|--------------------------------------|---|
| 13 C / OH NAME | Bennett, David L. (Mr.) | | 14 Filer ID (Ethics Commission Filers) 00089991 |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| <input type="checkbox"/> Additional Pages | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ 51,491.36 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | | \$ 5,636.93 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 45,854.43 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | \$ 42,000.00 |

17 AFFIDAVIT

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

Mr. David L. Bennett

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 15

| | |
|--|--|
| 18 FILER NAME Bennett, David L. (Mr.) | 19 Filer ID (Ethics Commission Filers) 00089991 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | |
| 1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | |
| 2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | |
| 3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | |
| 4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS | |
| 5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | |
| 6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | |
| 7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | |
| 8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | |
| 9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | |
| 10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | |
| 11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | |
| 12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/15 |
| 2 FILER NAME Bennett, David L. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 08/29/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Dave | 7 Amount of Contribution (\$) \$6,000.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77082 | |
| 8 Principal occupation / Job title (See Instructions) Engineer | | 9 Employer (See Instructions) Self |
| Date 12/26/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Dave | Amount of Contribution (\$) \$42,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77082 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 11/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Dave | Amount of Contribution (\$) \$2,000.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77082 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 09/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Dave | Amount of Contribution (\$) \$5.52 |
| | Contributor address; City; State; Zip Code Houston, TX 77082 | |
| Principal occupation / Job title (See Instructions) Engineer | | Employer (See Instructions) Self |
| Date 09/12/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernhard, Sheila | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Houston, TX 77077 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/15 |
| 2 FILER NAME Bennett, David L. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 10/18/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Sharan | 7 Amount of Contribution (\$) \$104.48 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77079 | |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 09/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Sharan | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Houston, TX 77079 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 09/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Leslie | Amount of Contribution (\$) \$52.40 |
| | Contributor address; City; State; Zip Code Houston, TX 77077 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |
| Date 09/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Milinda | Amount of Contribution (\$) \$104.48 |
| | Contributor address; City; State; Zip Code Houston, TX 77071 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 09/03/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Milinda | Amount of Contribution (\$) \$5.52 |
| | Contributor address; City; State; Zip Code Houston, TX 77071 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | |
|---|---|--|--|
| <p>The Instruction Guide explains how to complete this form.</p> | | | <p>1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/15</p> |
| <p>2 FILER NAME Bennett, David L. (Mr.)</p> | | | <p>3 Filer ID (Ethics Commission Filers) 00089991</p> |
| <p>4 Date 10/12/2025</p> | <p>5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Stan</p> | <p>6 Contributor address; City; State; Zip Code Houston, TX 77018</p> | <p>7 Amount of Contribution (\$) \$26.35</p> |
| <p>8 Principal occupation / Job title (See Instructions) owner</p> | | <p>9 Employer (See Instructions) CGT GLOBAL</p> | |
| <p>Date 11/17/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanessa, Frey</p> | <p>Contributor address; City; State; Zip Code Houston, TX 77077</p> | <p>Amount of Contribution (\$) \$1,000.00</p> |
| <p>Principal occupation / Job title (See Instructions) Homemaker</p> | | <p>Employer (See Instructions) Retired</p> | |
| <p>Date 12/05/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vigil, Lee</p> | <p>Contributor address; City; State; Zip Code Houston, TX 77084</p> | <p>Amount of Contribution (\$) \$25.00</p> |
| <p>Principal occupation / Job title (See Instructions) Politics</p> | | <p>Employer (See Instructions) Texans for Greg Abbott</p> | |
| <p>Date 10/03/2025</p> | <p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bowden, jennifer</p> | <p>Contributor address; City; State; Zip Code Bryn Mawr, PA 19010</p> | <p>Amount of Contribution (\$) \$10.73</p> |
| <p>Principal occupation / Job title (See Instructions) retired</p> | | <p>Employer (See Instructions) retired</p> | |

LOANS

SCHEDULE E

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 7/15 |
| 2 FILER NAME Bennett, David L. (Mr.) | | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 12/26/2025 | 7 Name of lender Bennett, David | 9 out-of-state PAC (ID#: \$42,000.00) |
| 6 Is lender a financial institution? No | 8 Lender address; Houston, TX 77082 | 10 Interest Rate 0 |
| | | 11 Maturity Date 12/26/2026 |
| 12 Principal occupation / Job title (See Instructions) Business Owner/Retired Engineer | | 13 Employer (See Instructions) Self |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account <input type="checkbox"/> (See Instructions) |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| 20 Principal occupation | | 21 Employer (See Instructions) |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 1/8 Rpt: 8/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 12/31/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$22.66 | 7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Summary of fees from Anedot for reporting period |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/04/2025 | Payee name CAMPAIGN VERIFY WWW.CAMPAIGNV CARD: 9855 | |
| Amount (\$) \$95.00 | Payee address; City; State; Zip Code 1215 31st Street NW PO Box 3554 Washington, DC 20007-9998 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/17/2025 | Payee name CAROUSEL CHECKS 888-422-6122 CARD: 9855 | |
| Amount (\$) \$77.39 | Payee address; City; State; Zip Code 11152 Southwest Highway Palos Hills, IL 60465 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Checks |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 2/8 Rpt: 9/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 11/04/2025 | 5 Payee name CAROUSEL CHECKS 888-422-6122 CARD: 9855 | |
| 6 Amount (\$) \$119.89 | 7 Payee address; City; State; Zip Code 11152 Southwest Highway Palos Hills, IL 60465 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Checks |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/04/2025 | Payee name DNH*GODADDY 480-505-8855 CARD: 9855 | |
| Amount (\$) \$63.83 | Payee address; City; State; Zip Code 100 S. Mill Ave Suite 1600 Tempe, AZ 85281 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/17/2025 | Payee name DNH*GODADDY 480-505-8855 CARD: 9855 | |
| Amount (\$) \$16.69 | Payee address; City; State; Zip Code 100 S. Mill Ave Suite 1600 Tempe, AZ 85281 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a) | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 3/8 Rpt: 10/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 09/10/2025 | 5 Payee name DNH*GODADDY#3885030455 HTTPS://WWW.G CARD: 9855 | |
| 6 Amount (\$) \$19.50 | 7 Payee address; City; 100 S. Mill Ave Suite 1600 Tempe, AZ 85281 | State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/08/2025 | Payee name HOWDY Stratgies | |
| Amount (\$) \$2,000.00 | Payee address; City; 4302 Donna Bell Lane Houston, TX 77018 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 11/14/2025 | Payee name Harris County Republican Party | |
| Amount (\$) \$750.00 | Payee address; City; 8588 Katy Freeway Suite 445 Houston, TX 77024 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Primary Ballot Fee |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 4/8 Rpt: 11/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 11/14/2025 | 5 Payee name IN-N-OUT SHIPPING HOUSTON CARD: 9855 (Mail Box) | |
| 6 Amount (\$) \$257.50 | 7 Payee address; City; State; Zip Code 11807 Westheimer Rd Suite 550 Houston, TX 77077 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail Box 1 year lease |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/22/2025 | Payee name Magic Circle Republican Women | |
| Amount (\$) \$36.77 | Payee address; City; State; Zip Code 8588 Katy Freeway Suite 445 Houston, TX 77024 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Republican Women Event |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 10/14/2025 | Payee name NBD GRAPHICS 281-5748200 CARD: 9855 | |
| Amount (\$) \$334.49 | Payee address; City; State; Zip Code 917 S Mason Rd Katy, TX 77450 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 5/8 Rpt: 12/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 09/22/2025 | 5 Payee name NBD GRAPHICS 281-5748200 CARD: 9855 | |
| 6 Amount (\$) \$156.96 | 7 Payee address; City; 917 S Mason Rd Katy, TX 77450 | State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/09/2025 | Payee name NBD GRAPHICS 281-5748200 CARD: 9855 | |
| Amount (\$) \$106.63 | Payee address; City; 917 S Mason Rd Katy, TX 77450 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/03/2025 | Payee name NBD GRAPHICS 281-5748200 CARD: 9855 | |
| Amount (\$) \$251.68 | Payee address; City; 917 S Mason Rd Katy, TX 77450 | State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 6/8 Rpt: 13/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 12/03/2025 | 5 Payee name POLITICAL COMMS POLITICALCOMM CARD: 9855 | |
| 6 Amount (\$) \$250.00 | 7 Payee address; City; State; Zip Code 131 Continental Drive Suite 301 Neward, DE 19713 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messaging |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/03/2025 | Payee name POLITICAL COMMS POLITICALCOMM CARD: 9855 | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 131 Continental Drive Suite 301 Neward, DE 19713 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Polling Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Messaging |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 09/08/2025 | Payee name PS Print | |
| Amount (\$) \$1.41 | Payee address; City; State; Zip Code 5820 Harold Gatty Dr Salt Lake City, TX 84116 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Draft design. |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a) | | | |
|---|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 7/8 Rpt: 14/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 09/08/2025 | 5 Payee name TST*POBLANOS HOUSTON CARD: 9855 | |
| 6 Amount (\$) \$356.72 | 7 Payee address; City; State; Zip Code 1250 Eldridge Pkwy Houston, TX 77077 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kickoff Event |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/30/2025 | Payee name UZ MARKETING 832-598-7226 CARD: 9855 | |
| Amount (\$) \$173.20 | Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/16/2025 | Payee name UZ MARKETING 832-598-7226 CARD: 9855 | |
| Amount (\$) \$113.94 | Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 8/8 Rpt: 15/15 | 2 FILER NAME Bennett, David L. (Mr.) | 3 Filer ID (Ethics Commission Filers) 00089991 |
| 4 Date 12/01/2025 | 5 Payee name UZ MARKETING 832-598-7226 CARD: 9855 | |
| 6 Amount (\$) \$173.20 | 7 Payee address; City; 5900 Bingle Rd Houston, TX 77092 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |
| Date 12/01/2025 | Payee name UZ MARKETING 832-598-7226 CARD: 9855 | |
| Amount (\$) \$159.47 | Payee address; City; 5900 Bingle Rd Houston, TX 77092 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards Door Hangers T-Shirts |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought | Office held |