#### FORM C/OH **CANDIDATE / OFFICEHOLDER COVER SHEET PG 1 CAMPAIGN FINANCE REPORT** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. M CANDIDATE / MS/MRS/MR FIRST OFFICE USE ONLY **OFFICEHOLDER** Benny Glen NAME Date Received SUFFIX NICKNAME LAST Whitley ADDRESS / PO BOX; APT / SUITE #; CANDIDATE / CITY; ZIP CODE OFFICEHOLDER MAILING ADDRESS Change of Address $\subseteq$ CAMPAIGN MS/MRS/MR FIRST MI TREASURER Victor NAME SUFFIX NICKNAME LAST Vandergriff **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER **ADDRESS** (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER PHONE REPORT **TYPE** 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) X PERIOD Month Day Year Month Day Year COVERED 01/01/2015 THROUGH 06/30/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Tarrant County Commissioner Court Judge

GO TO PAGE 2

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

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

			2 of 14
Whitley, Benny Glen		14 Filer ID	
candidate / officeholder.	older's knowledge or		
COMMITTEE TYPE  GENERAL	COMMITTEE NAME	ВҮ	77 2011
SPECIFIC	COMMITTEE ADDRESS		TARRANT COL
	COMMITTEE CAMPAIGN TREASURER NAME		UNTY H I: I
			, 7 OR
LOANS, OR GUA	ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$ 0.00
TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 0.00
3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$ 0.00
4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 7,330.64
		AST DAY OF THE	\$ 71,985.95
		OF THE LAST DAY	\$ 0.00
NOTARY PUB STATE OF TEX My Comm. Exp. 08-26 STARY STAMP / SEAL ABO cribed before me, by the s	true and correct and includes all under Title 15, Election Code.  SE LIC KAS 1-2017  Signature of OVE  aid B. Calen whitey	Candidate or Officehold	be reported by me
	This box is for notice of particle and candidate / officeholder. consent. Candidates and COMMITTEE TYPE  GENERAL  SPECIFIC  1. TOTAL POLITIC LOANS, OR GU, 2. TOTAL POLITIC (OTHER THAN F. 3. TOTAL POLITIC REPORTING PE. 6. TOTAL PRINCIP OF THE REPORTING PE. My Comm. Exp. 08-26  NATALIE ROS NOTARY PUB STATE OF TE. My Comm. Exp. 08-26  TARY STAMP / SEAL ABout the control of the second per control of the secon	This box is for notice of political contributions accepted or political expenditures may have been made without to consent. Candidates and officeholders are required to report this information.  COMMITTEE TYPE  GENERAL  COMMITTEE ADDRESS  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS  1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER T LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LIBERT TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LIBERT TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD  I SWEAR, OR Affirm, under penalty true and correct and includes all under Title 15, Election Code.  I SWEAR, OR Affirm, Under penalty true and correct and includes all under Title 15, Election Code.  I SWEAR, OR AFFIRM THE STANDING LOANS AS OF THE CODE.  I SWEAR, OR AFFIRM THE STANDING LOANS AS OF THE STANDING LOANS AS OF THE REPORTING PERIOD  I SWEAR, OR AFFIRM THE STANDING LOANS AS OF THE STANDING LOANS AS OF THE SWEAR.  I SWEAR, OR AFFIRM THE STANDING LOANS AS OF THE SWEAR.  I SWEAR, OR AFFIRM THE SWEAR TH	This box is for notice of political contributions accepted or political expenditures made by political cor candidate / officeholder. These expenditures may have been made without the candidates or officeholders are required to report this information only if they receive notice consent. Candidates and officeholders are required to report this information only if they receive notice consent. Candidates are consent.  COMMITTEE TYPE  GENERAL  COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE NAME  COMMI

# SUBTOTALS - C/OH

# FORM C/OH **COVER SHEET PG 3**

3 of 14					
18 FILER NAME Whitley, Benny Glen	19 Filer ID				
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT				
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$			
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4. SCHEDULE E: LOANS		\$			
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,995.25		
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
8. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	4,335.39		
9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$			
10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			
**************************************		ELECTIONS ADMINISTRATOR	TARRANT COUNTY		

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Event Expense Food/Beverage Expense
Gift/Awards/Memorials Expense 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 Contributions/ Donations Made By -Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 1/4 Rpt: 4/14 Whitley, Benny Glen 4 Date Payee name 01/14/2015 Awesome Biossums State: Zip Code 6 Amount (\$) Payee address; \$21.92 8100 Camp Bowie Blvd Fort Worth, TX 76116 **PURPOSE** (b) Description 2 (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas Complete 3chedule Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholde Flowers for Chief Knowles Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 03/20/2015 Awesome Blossums State; Zip Code Amount (\$) Payee address; City; \$60.93 8100 Camp Bowie Blvd Fort Worth, TX 76116 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Flowers Judge Bingham, Eric Fox's mother and Jay Singleton's mother Office held Candidate/Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 01/11/2015 Bank of Texas Amount (\$) Payee address; City; State; Zip Code \$32.40 PO Box 29775 Dallas, TX 75229-0775 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Additional checks Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/4 Rpt: 5/14	Whitley, Benny Glen
4	Date	5 Payee name
L	02/14/2015	Fort Worth Republican Women's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	7 Payee address; City; State; Zip Code  6937 Allen Place Dr.  7 Payee address; City; State; Zip Code  7 AR
L		7 Payee address; City; State; Zip Code 6937 Allen Place Dr.  Fort Worth, TX 76116  (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Check if travel outside of Texas. Complete Street Countribution to club  Contribution to club
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas Complete schedule To
ĺ		Candidate/Officeholder/Political Committee Candidate/Officeholder/living expenses
		Contribution to club
Ļ		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	02/06/2015	HEB Chamber
-	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	P O Box 969
	φ100.00	1 O BOX 303
		- W 1
L		Bedford, TX 76095
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense Chamber dues
		onumber dues
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		
	Date	Payee name
L	02/27/2015	Mid-Cities Pacesetters Rotary
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	P O Box 210421
		Bedford, TX 76095
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Dues & Sponsorships Check if travel outside of Texas. Complete Schedule T.
	_ /	Check if Austin, TX, officeholder living expense
		Dues and sponsorship of Rotary Club
-	Complete ONLY " "	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

Advertising Expense
Accounting/Sanking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Contributions/ Donations Made by Candidate/Officeholder/Politica		•	onais Expense on Guide explains h		ages	/Contract Labor		enter a catego	ory not listed ab	oove)
1	Total pages Schedule F1:	2	FILER NAME					3 Filer IC	)		
	Sch: 3/4 Rpt: 6/14		Whitley, Benny Glen								
4	Date	5	Payee name								
	03/16/2015		Northeast Republican C	lub					8 1	2	
6	Amount (\$)	7	Payee address; City;	State;	Zip Cod	de				<u> </u>	Ä
	\$10.00		1005 Fayette Drive						3		R
									1 5		≥π
		Ì	Euless, TX 76039						AD	<sup></sup>	二二
8	PURPOSE	(a)	Category (See Categories liste	d at the top of this sche	edule)	(b)	Description		-3-		ARRANT COUNTY
	OF EXPENDITURE	ı	Dues		1		Check if travel or	utside of Tex	as Complete	Schedule 1.	
	EXPERDITORE				- 1		Check if Austin,	TX, officeholo	der living exace	ise	
							Annual dues		3	8	~
<u> </u>					1						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder nam	e O	office soug	ght		Of	ffice held		
	experiditure to benefit C/O	_		,						····	
Г	Date	[	Payee name								
	03/20/2015		Tarrant Area Food Bank	(							
Γ	Amount (\$)	Γ	Payee address; City;	State;	Zip Co	de					
	\$20.00	l	2600 Cullen St								
			Fort Worth, TX 76107								
	PURPOSE OF	(a	Category (See Categories liste		edule)	(b)	Description				
	EXPENDITURE		Gift/Awards/Memorials	Expense			Check if travel o		-		
					1		Memorial for				
		ĺ			1						
┝	Complete ONLY if direct	Ц,	Candidate/Officeholder nam	e O	Office sough	aht		0	ffice held		
	expenditure to benefit C/O		Sarata a constituit de la constituit de			<b>9</b>					
┝	Date	_	Doves name					+			
	03/23/2015		Payee name Tarrant County College	Foundation							
_		_			Zin Co	do					
	Amount (\$)	l	Payee address; City; 1500 Houston St.	State,	Zip Co	ue					
	\$1,000.00	l	1500 Houston St.								
			Fort Worth, TX 76102-6	E04							
L		L									,
	PURPOSE OF	(a	Category (See Categories liste		edule)	(b)	Description Check if travel or	staids of Tou	no Cumulata I	Sabadida T	
	EXPENDITURE	ĺ	Gift/Awards/Memorials	Expense			Check if Austin,				
		l					Contribution to				
		l			1						
H	Complete ONLY if direct		Candidate/Officeholder nam	e O	Office sou	ght		0	ffice held		
	expenditure to benefit C/O			_							
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Palaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expen Legal Services  The Instruction Guide e	Salaries/	Nages/Contra			eut of District (enter a category	/ not listed a	bove)
1	Total pages Schedule F1:	2 FILER NAM	E			;	3 Filer ID	)		
	Sch: 4/4 Rpt: 7/14	Whitley, Be	enny Glen							
4	Date	5 Payee name						-		
L	02/10/2015	Tarrant Co	unty Jr. Livestock Sh	DW						
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$500.00	6713 Telep	hone Rd							
L		Fort Worth	, TX 76135							
8	PURPOSE OF		See Categories listed at the top		(b) Des	•				
	EXPENDITURE		ns/Donations Made E Officeholder/Political					as. Complete Sci der living expens		
		Cardinale/	Omcerio(der/Political	Committee				purchase		nt's entries
9	Complete ONLY if direct		ficeholder name	Office sou	ıght	-	Of	fice held		
	expenditure to benefit C/O	H								
	Date	Payee name								
	01/28/2015	Tarrant Co	unty Republican Part	у						
	Amount (\$)	Payee addre		State; Zip Co	ode					
	\$500.00	2405 Grav	el Dr							
L		Fort Worth	, TX 76118-6937							
	PURPOSE	(a) Category (5	See Categories listed at the top	of this schedule)	(b) Des	•				
	OF EXPENDITURE	Event Expe	ense					as. Complete Sci der living expens		
						onsorship o			5	
								2		
Г	Complete ONLY if direct		ficeholder name	Office sou	ight		Of	fice held		·
	expenditure to benefit C/O	Н ,								
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								ELECTIONS ADMINISTRATOR  BY:	11	TARRANT COUNTY 51.0.28282
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Fo	rms provided by Texas E	thics Commiss	ion www.e	thics.state.tx.u	15				Version	V/1 0 28282

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** 2015 Lath/Repaylicent/Reinaburgement Office Overhead/Reina Expenses 8 Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form I OR 3 Filer ID 1 Total pages Schedule G: 2 FILER NAME BY: Sch: 1/6 Rpt: 8/14 Whitley, Benny Glen Date Payee name 03/02/2015 **American Airlines** 6 Amount (\$) Payee address; State; Zip Code \$1.187.01 4000 E. Sky Harbor Blvd Reimbursement from political contributions intended Phoenix, AZ 85034 (b) Description x Check if travel outside of Texas, Complete Schedule T. 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense OF Travel Out of District **EXPENDITURE** Airfare to NACo Finance and Board Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/10/2015 **Dollar Tree Store** Amount (\$) Payee address; City; State; Zip Code \$100.00 1201 E FM 1187 Reimbursement from political contributions intended X Crowley, TX 76036-4371 **PURPOSE** Description Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Gift/Awards/Memorials Expense **EXPENDITURE** Toiletry supplies for Senior Citizen Event Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

		The second secon
Date 05/22/2015	Payee name Grand Hyatt	
00/21/2010	Grand Hydric	
Amount (\$)	Payee address; City; State; Zip C	ode
\$1,616.15	1571 Poipu Rd	
Reimbursement from political contributions intended	Koloa, HI 96756	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description X Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
LAFENDITORE		Hotel for National Association of Counties Finance and Board of Directors meeting
Complete <u>QNLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held

C/OH

# **POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

FILED TARRANT COUNTY

SCHEDULE G

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

ent Expense

Loan Replane URein buse

office Overhead Rein buse

office Overhead Rein buse Event Expense Fees

nse Sticktion/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Polling Ex Printing Ex Salaries/V Jins how to co	pense Censes Miles Pand Capes Contract Labor Miles	PS STR	Travel in District Travel Out of District OTHER (enter a category not listed above) ATOR
1	Total pages Schedule G: Sch: 2/6 Rpt: 9/14	2 FILER NAM Whitley, Be		BY:		3	Filer ID
4	Date	5 Payee name	!		·····		
	03/19/2015	_	Women of Arlington				
6	Amount (\$)	7 Payee addre	ess; City; St	ate; Zip Co	de		
	\$20.00	P O Box 14	1317				
	Reimbursement from political contributions intended	Arlington,	TX 76094				
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	s schedule)	(b) Description		eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beve	rage Expense				eck if Austin, TX, officeholder living expense
					Lunch at club me	eetin	og .
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held
Г	Date	Payee name					
	06/22/2015	Target					
	Amount (\$)	Payee addre	• •	ate; Zip Co	de		
	\$77.08	1400 Preci	nct Line Rd				
	X Reimbursement from political contributions intended	Hurst, TX	76053-3828				
	PURPOSE OF		See Categories listed at the top of this	s schedule)	Description	_	eck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Ove	rhead/Rental Expense		L	_	eck if Austin, TX, officeholder living expense
		,			Candy for the off	nce	
┝	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held
L	expenditure to benefit C/OH		nouce name		Onice Sought		
Γ	Date	Payee name	!				
	01/31/2015	The Fort W	orth Club				
Г	Amount (\$)	Payee addre	ess; City; St	ate; Zip Co	de		
	\$197.02	306 West S	Seventh St				
	Reimbursement from political contributions						
L	intended	Fort Worth	TX 76102				
	PURPOSE OF		See Categories listed at the top of this	s schedule)	Description [		eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense
ı	EXPENDITURE	Dues			Dues for January	_	
					320 20 20 20 20 20 20 20 20 20 20 20 20 2		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought		Office held
Γ							

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
		FILED			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	Fees Food/Beverage Expense Oit//wards/Memorials Expense Printing	epayment/Reimbursement  Solicitation/Fundraising Expense  Transportation Equipment & Related Expense  Travel in District  Travel Out of District			
1 Total pages Schedule G: Sch: 3/6 Rpt: 10/14	2 FILER NAME Whitley, Benny Glen BY:	3 Filer ID			
4 Date 02/28/2015	5 Payee name The Fort Worth Club				
6 Amount (\$) \$197.02	7 Payee address; City; State; Zip C 306 West Seventh St	Code			
Reimbursement from political contributions intended	Fort Worth, TX 76102				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
EXPENDITURE	Dues	Check if Austin, TX, officeholder living expense  Dues for February			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
03/31/2015	The Fort Worth Club				
Amount (\$)	Payee address; City; State; Zip C	Code			
\$197.02	306 West Seventh St				
Reimbursement from political contributions intended	Fort Worth, TX 76102				
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
EXPENDITURE	Dues	Dues for MARCH			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
04/30/2015	The Fort Worth Club				
Amount (\$) \$197.02	Payee address; City; State; Zip C 306 West Seventh St	Code			
Reimbursement from political contributions intended	Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Dues	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Dues for April			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
		Vi V4 0 2929			

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G FILED **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Travel in District Advertising Expense Accounting/Banking Loan Repartment/Reimburgement Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Printing Expense Travel Out or Lisuica Salaries/Wages/Contrait Little | 125 OTHER (enter a category not listed above) Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this found! HISTRATOR 3 Filer ID 1 Total pages Schedule G: 2 FILER NAME BY:\_ Sch: 4/6 Rpt: 11/14 Whitley, Benny Glen 4 Date Payee name 05/31/2015 The Fort Worth Club State; Zip Code 6 Amount (\$) Payee address; City; \$197.02 306 West Seventh St Reimbursement from political contributions intended Fort Worth, TX 76102 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** (b) Description 8 (a) Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Dues **EXPENDITURE** Dues for May Office sought Complete **ONLY** if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 06/30/2015 The Fort Worth Club State: Zip Code Payee address; City; Amount (\$) \$197.02 306 West Seventh St Reimbursement from political contributions intended X Fort Worth, TX 76102 PURPOSE Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Dues **EXPENDITURE** Dues for June Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 01/31/2015 The Fort Worth Club State; Zip Code Payee address; Amount (\$) \$32.00 306 West Seventh St Reimbursement from political contributions intended Fort Worth, TX 76102 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Exchange Club lunches January 7th & 28th Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## POLITICAL EXPENDITURES FROM PERSONAL FUNDS

FISCHEDULE G

### 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 Solidian of the state of the st

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule G:	2 FILER NAME	3 FileMD		
	Sch: 5/6 Rpt: 12/14	Whitley, Benny Glen			
4	Date	5 Payee name			
ı	02/28/2015	The Fort Worth Club			
6	Amount (\$)	7 Payee address; City; State; Zip C	ode		
	\$16.00	306 West Seventh St			
	Reimbursement from political contributions intended	Fort Worth, TX 76102			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.		
1	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense		
			Exchange Club lunch February 18th		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
Г	Date	Payee name			
	05/31/2015	The Fort Worth Club			
Г	Amount (\$)	Payee address; City; State; Zip C	ode		
	\$16.00	306 West Seventh St			
	Reimbursement from political contributions intended	Fort Worth, TX 76102			
Г	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense		
			Exchange Club lunch May 27th		
L					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held		
F	Date	Payee name			
	06/30/2015	The Fort Worth Club			
Г	Amount (\$)	Payee address; City; State; Zip C	ode		
	\$16.00	306 West Seventh St			
	Reimbursement from political contributions intended	Fort Worth, TX 76102			
Γ	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
l	OF EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense		
			Exchange Club lunch June 3rd		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	 Candidate/Officeholder name	Office sought Office held		

## POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Travel Out of District Polling Expense Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule G: 2 FILER NAME Sch: 6/6 Rpt: 13/14 Whitley, Benny Glen Date Payee name 04/06/2015 Walmart State; Zip Code 6 Amount (\$) Payee address; City; 3851 Airport Fwy \$73.03 Reimbursement from political contributions intended [x] Fort Worth, TX 76111 PURPOSE Check if travel outside of Texas. Complete Schedule T. 8 (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense **EXPENDITURE** Candy for the office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

TOR TRAVEL GOTSIBL OF TEXAS							
The Inst	ruction Guide explains how to complete this form.	1 Total pages Schedule T: Sch: 1/1 Rpt: 14/14					
2 FILER NAME		3 Filer ID					
Whitley, Benny		L					
i e	Name of Contributor / Corporation or Labor Organization / Pledgor /Payee						
American Airline							
5 Contribution / Exp Schedule A2							
Schedule F2	Schedule B Schedule B(J) Schedule C2  X Schedule G Schedule H Schedule COH-	Schedule D Schedule F1					
		UC Schedule B - SS					
6 Dates of Travel	7 Name of person(s) traveling						
	Whitley, Benny Glen (Judge)						
05/15/2015	8 Departure city or name of departure location DFW						
05/15/2015	9 Destination city or name of destination location						
05/22/2015	LHI						
10 Means of transpor	tation 11 Purpose of travel (including name of conference, seminar,	or other event)					
Commercial Airp							
Name of Contribut	tor / Corporation or Labor Organization / Pledgor /Payee						
Grand Hyatt							
Contribution / Exp	enditure reported on:						
Schedule A2	Schedule B Schedule B(J) Schedule C2	Schedule D Schedule F1					
Schedule F2	X Schedule G Schedule H Schedule COH	UC Schedule B - SS					
Dates of Travel	Name of person(s) traveling						
	Whitley, Benny Glen (Judge)						
	Departure city or name of departure location						
05/15/2015	DFW, Texas						
	Destination city or name of destination location						
05/22/2015	Koloa, Hawaii						
Means of transpor							
	Attended National Association of Counties Finance	and Board of Directors meetings					
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		701 2011					
		AAF					
		I RA					
		FILED TARRANT COUNTY 2015 JUL 15 PM 1: 49 FRANK PHILLIPS ELECTIONS ADMINISTRATOR BY:					
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