CANDIDATE / CAMPAIGN F									C/OH EET PG 1	
The C/OH Instruction Guil	DE explains how to c	omplete thi	is form.	1 ACCOUR (Ethics Co	ommission file	ers)	2 PAGE 1 of		- 3	
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR Mr.		RST Iny Glen		М	is	Çof	FIGE US	ENLY	
NAME	NICKNAME Glen	LAS	 sт		· · · · · · · · · · · · · · · · · · ·	UFFIX	Date Receiv	red H	RANT C	=
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE	E#; CIT	Υ;	STATE; ZI	P CODE	Date Hand	delivered	or Date Postmarke	
Change of Address							\	23		
5 CAMPAIGN	MS/MRS/MR	FIE	RST	<del> </del>	Mi	1	Receipt #		Amount	
TREASURER NAME	MIS / MINS / MIN	Victo			·		Date Image			
NAME	NICKNAME	Van	st st dergriff			UFFIX	Date Wileye			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO I	PO BOX PLEAS	SE); APT / SUITE	#, (	CITY; ST	TATE;	ZIP CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUI	MBER		EXTENSION					
8 REPORT TYPE	January 15	30tl	th day before election	n 🗀	Runoff				mpaign treasurer ceholder only)	
	X July 15	8th	day before election		Exceeded \$	500 limit	Final n	eport (Attac	ch C/OH - FR)	
9 PERIOD COVERED	Month Day	Year			Month	Day	Year			
	01/01/201	16	THROUG	ЭН	(	06/30/201	16			
10 ELECTION	ELECTION DA' Month Day	Year Year	ELECTION TYPE		Runoff		General	[	Special	
11 OFFICE	OFFICE HELD (if any)  County Judge			12	OFFICE SOUG	GHT (if known)				
			GO TO P	AGE 2						

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

# FORM C/OH COVER SHEET PG 2

					······································
13 C/OH NAME White	ey, Benny Glen (Mr	.)	14 ACCO	•	lics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the count the candidate's or officeholder's knowledge or consent. Candidate or preceive notice of such expenditures	andidate / office	eholder. Thes	e expenditures may quired to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	8Y:	(n) (n) (-) (n) (-) (n)	TARR.
	GENERAL	COMMITTEE ADDRESS	di proprio di managari proprio di cida		5 AF
additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		IPS ISTANTS	UHTY 9: 21
		COMMITTEE CAMPAIGN TREASURER ADDRESS	and a	ಸ	
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$	2.87
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	22,557.87
EXPENDITURE TOTALS	3. TOTAL I	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$	0.00
4. TO		POLITICAL EXPENDITURES		\$	5,356.36
CONTRIBUTION BALANCE		TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$	74,204.30
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD		\$	0.00
17 AFFIDAVIT	RACHEL NICOLE D Notary Public STATE OF TEX My Comm. Exp. 12/30	AS 1/2017 Signature of 0	s all informati de.	ion required	to be reported by
Sworn to and subscrib	STAMP / SEAL ABOV	3111	. this	the	4TH day
1 1		rtify which, witness my hand and seal of office.			
RUUL NU Signature of officer adm	LL DUJH inistering oath	- Rache Nicole Daubus Print name of officer administering oath	NOTA Title of offi	AY F	PUBUC tering oath

## Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL CONTRIBUTIONS FILED

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	N GUIDE explains how to complete this form.	(PHILLIPS	1 PAGE # Schedule: 1/8	3 Report: 3/18		
2	FILER NAME	Whitley, Benny Glen (Mr.)	AD HINISTRATOR	3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID# Bailey, Mona	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/28/2016	6 Contributor address; City; State; Zip Code 6200 Lake Way North Richland Hills, TX 76180		\$500.00	1 1 1		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2016	Contributor address; City; State; Zip Code 3101 Avondale Ave. Fort Worth, TX 76109		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Betsy Price Campaign	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/27/2016	Contributor address; City; State; Zip Code PO Box 100066 Fort Worth, TX 76185		\$500.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Bowerman, Bill	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2016	Contributor address; City; State; Zip Code PO Box 171199 Arlington, TX 76003		\$200.00	i I I		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/28/2016	Contributor address; City; State; Zip Code 1201 Canterbury Ct. Arlington, TX 76013		\$100.00	l 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

#### P.O.Box 12070 FILED POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. FRANK PHILLIPS Schedule: 2/8 Report: 4/18 (Ethics Commission filers) 2 FILER NAME Whitley, Benny Glen (Mr.) 3 ACCOUNT# 00000001 BY: 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Cravens, Tom 06/25/2016 Contributor address: City; State; Zip Code \$250.00 501 S Fielder Rd Arlington, TX 76013 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) David L Cook Campaign Acct Contributor address; \$500.00 06/29/2016 City; State; Zip Code 309 E Broad St Mansfield, TX 76063-1705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Deuell, Brian 06/29/2016 Contributor address; City; State; Zip Code \$250.00 1305 Blue Lake Blvd Arlington, TX 76005 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Date Full name of contributor ut-of-state PAC (ID#\_ Amount of contribution (\$) description (if applicable) Duke, Don (Mr.) 06/29/2016 Contributor address; City; State; Zip Code \$100.00 PO Box 13464 Arlington, TX 76094 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Gary Fickes Campaign 06/29/2016 Contributor address: City: State: Zip Code \$250.00 4021 Hilltop Dr. Southlake, TX 76092 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE#			
<u> </u>					8 Report: 5/18		
2	FILER NAME	Whitley, Benny Glen (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID#	·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
		Gerro, Michael		(4)	2 2 2		
	06/29/2016	6 Contributor address; City; State; Zip Code 3515 Lake Tahoe Dr Arlington, TX 76016		\$100.00	FILE		
				(If travel outside of	Texas, complete Schedule I)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	3 N Z		
					Υ 26 Σου		
	Date	Full name of contributor	1	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/28/2016	Contributor address; City; State; Zip Code		\$1,000.00	1		
	00/20/20 10	2500 NE Green Oaks Blvd., Ste. 200 Arlington, TX 76006		\$1,000.00	1 1		
				<u> L'</u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	·		
	Date	Full name of contributor	<u>!</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable) Food, drinks and		
	06/29/2016	Contributor address; City; State; Zip Code 2500 NE Green Oaks Blvd., Ste. 200		\$3,205.00	servers for fundraiser.		
		Arlington, TX 76006		(if travel outside of	Texas, complete Schedule T)		
┝	Principal occup	ation / Job title (See Instructions)	Employer (See in	<u> </u>			
	Date	Full name of contributor	<u> </u>	Amount of	In-kind contribution		
		Hall, John		contribution (\$)	description (if applicable)		
	06/29/2016	Contributor address; City; State; Zip Code 4000 Modlin Ave Fort Worth, TX 76107		\$100.00	] 		
				(If travel systems of	Texas, complete Schedule T)		
⊢	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1/		
		· · · · · · · · · · · · · · · · · · ·		•			
	Date	Full name of contributor  ut-of-state PAC (ID# Harris Cook, LLP	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2016	Contributor address; City; State; Zip Code		\$500.00			
		709 E Abram St Arlington, TX 76010			1		
				(If travel outside of	Texas, complete Schedule T)		
H	Principal occup	ation / Job title (See Instructions)	Employer (See In	1 -	, bal		

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 4/8	Report 6/18
2	FILER NAME	Whitley, Benny Glen (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jacobson, Michael	<u> </u>	7 Amount of contribution (\$)	8 In kind contribution description (if applicable)
	06/28/2016	6 Contributor address; City; State; Zip Code 703 Findlay Dr Arlington, TX 76012		\$250.00	
				[ · · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/28/2016	Contributor address; City; State; Zip Code 4414 Willow Bend Dr Arlington, TX 76017		\$250.00	.   
			:	(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2016	Contributor address; City; State; Zip Code 1301 Blue Lane Blvd Arlington, TX 76005		\$1,000.00	 
			-	(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2016	Contributor address; City; State; Zip Code 1611 Bent Creek Dr Cleburne, TX 76033		\$200.00	i ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2016	Contributor address; City; State; Zip Code PO Box 17428		\$5,000.00	1 I
		Austin, TX 78760		/lftrmmol outside of	Texas, complete Schedule T)
$\mid$	Principal occup	ation / Job title (See Instructions)	Employer (See In	L	. comprete achiedule ()
l					

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

L					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	8 Report: 7/18
2	FILER NAME	Whitley, Benny Glen (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor  ut-of-state PAC (ID: Martindale, Steve	<b>#</b>	7 Amount of contribution (\$)	8 In kind contribution description (if applicable)
	06/29/2016	6 Contributor address; City; State; Zip Code 9 Rogers Ct Pantego, TX 76013		\$500.00	T COUNT
_	Dringing! accur	otion / Joh title /Con Instructions)	40 Employer/Coo lo		Texas, complete Schedule T
9	Pilitapai occup	eation / Job title (See Instructions)	10 Employer (See In	sudduons)	OR
	Date	Full name of contributor  ut-of-state PAC (ID: McCollum, Steve	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2016	Contributor address; City; State; Zip Code PO Box 172202 Arlington, TX 76003-2202		\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u>#</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2016	Contributor address; City; State; Zip Code 2114 Franklin Dr Arlington, TX 76011		\$150.00	 
				(lifetymus) systelides of	Texas, complete Schedule T)
┝	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete Schedule 1)
	. т	and the feet meadants	Employer (GGG III		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2016	Contributor address; City; State; Zip Code 1800 Valley View Ln, Ste 300 Farmers Branch, TX 75234		\$2,500.00	1   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Mohorc, Daniel	<b>f</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/28/2016	Contributor address; City; State; Zip Code 2702 Mark Twain Ct Arlington, TX 76006		\$250.00	] 
		•		(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		

### **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

O6/29/2016 6 Contributor address; City; State; Zip Code  Principal occupation / Job title (See instructions)  Date  Full name of contributor Niedermayer, Eric  O6/29/2016 Contributor address; City; State; Zip Code 3501 Gloucester Ct Arrington, TX 76018  Date  Full name of contributor Niedermayer, Eric  City; State; Zip Code 3501 Gloucester Ct Arrington, TX 76018  Date  Full name of contributor Nitzinger, Judy (Mrs.)  Date  Full name of contributor Nitzinger, Judy (Mrs.)  Date  Full name of contributor Nitzinger, Judy (Mrs.)  Date  Full name of contributor Contributor address; City; State; Zip Code (If travel outside of Texas, complete Schedule T)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor Contributor address; City; State; Zip Code S50.00  Principal occupation / Job title (See instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor Contributor of Contributor Contributor Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code (If travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See instructions)  Employer (See Instructions)					
4 Date   5 Full name of contributor	The Instruction	אס Guide explains how to complete this form.			8 Report: 8/18
Moloney, Tim & Mary Jean  O6/29/2016 8 Contributor address; City: State; Zip Code 2008 Rumanor Dr Arington, TX 79006  9 Principal occupation / Job title (See instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8100.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8160.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8160.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 850.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 850.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 850.00   Off travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8100.00   Amount of ontribution (S)   Off texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8100.00   Amount of ontribution (S)   Off texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Date Full name of contributor  oddress; City: State; Zip Code 8100.00   Off texas, complete Schedule T)  Principal occupation / Job title (See Instructions)	2 FILER NAME	Whitley, Benny Glen (Mr.)			(Ethics Commission filers)
O6/29/2016  O6/29/	4 Date	·	)		8 In-kind contribution description (if applicable)
Date   Full name of contributor   Out-of-state PAC (ID#   Amount of Niedermayer, Eric   Contribution (S)   Contribution (S)   Contribution (S)   (If spelicable, S801 Cloucester Cl Afrington, TX 76018   S150.00   (If travel outside of Texas, complete Schedule T)    Principal occupation / Job title (See Instructions)   Employer (See Instructions)    Date   Full name of contributor   Out-of-state PAC (ID#   Amount of Contribution (S)   In-kind contribution (R)   In-kind contribu	06/29/2016	2008 Rumson Dr		·	L 15
Niedermayer, Eric  Contributor address; City; State; Zip Code \$150.00    Principal occupation / Job title (See Instructions)  Date  Full name of contributor (Nitzinger, Judy (Mrs.)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)    Amount of contribution (# applicable)	9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	1 5° 5
S801 Gloucester Ct Artington, TX 76018    Contributor address; 106/29/2016   Full name of contributor   out-of-state PAC (ID#	Date	•	!)		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)    Date	06/29/2016	5801 Gloucester Ct		\$150.00	 
Principal occupation / Job title (See Instructions)    Date		Tallington, 1X Toolo		(if travel outside of	Texas, complete Schedule T)
Date   Full name of contributor   Out-of-state PAC (ID#	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u>L.` </u>	,
Nitzinger, Judy (Mrs.)  Contributor address; 2405 Stratford Ct Fort Worth, TX 76103  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)    Date   Full name of contributor   out-of-state PAC (ID#   ) Amount of contribution (\$frapplicable)   O6/29/2016   Contributor address; 7106 Lighthouse Rd Artington, TX 76002    Principal occupation / Job title (See Instructions)    Date   Full name of contributor   out-of-state PAC (ID#   ) Amount of contribution (\$frapplicable)   O6/29/2016   Contributor address; 7106 Lighthouse Rd Artington, TX 76002    Principal occupation / Job title (See Instructions)    Date   Full name of contributor   out-of-state PAC (ID#   ) Amount of contribution (\$frapplicable)   O6/29/2016   Contributor address; 5201 Hidden Oaks Ln Artington, TX 76017    O6/29/2016   Contributor address; 5201 Hidden Oaks Ln Artington, TX 76017    Office Instructions   In-kind contribution (\$frapplicable)   In-kind contrib		,		,	
2405 Stratford Ct   Fort Worth, TX 76103   (if travel outside of Texas, complete Schedule T)	Date	•	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date  Full name of contributor contributor Cownby Consulting  Contributor address; City; State; Zip Code Artington, TX 76002  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor contributor contributor contribution (%)  Date  Full name of contributor contributor contributor contribution (%)  Contributor address; City; State; Zip Code  S100.00  Contributor address; City; State; Zip Code  S100.00  Contributor address; City; State; Zip Code  S100.00  (If travel outside of Texas, complete Schedule T)  (If travel outside of Texas, complete Schedule T)	06/29/2016	2405 Stratford Ct		\$50.00	 
Date Full name of contributor Ownby Consulting Out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution (if applicable)  Contributor address; 7106 Lighthouse Rd Artington, TX 76002 (If travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions) Employer (See Instructions)  Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution description (if applicable)  O6/29/2016 Contributor address; 5201 Hidden Oaks Ln Artington, TX 76017 (If travel outside of Texas, complete Schedule T)				(If travel outside of	Texas, complete Schedule T)
Ownby Consulting  Contribution (\$)   description (if applicable)  Contributor address; City; State; Zip Code   \$100.00    Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Pate   Full name of contributor   out-of-state PAC (ID#   )   Amount of contribution (\$)   description (if applicable)  O6/29/2016   Contributor address; City; State; Zip Code   \$100.00    Contributor address; City; State; Zip Code   \$100.00    (If travel outside of Texas, complete Schedule T)  (If travel outside of Texas, complete Schedule T)	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
7106 Lighthouse Rd Artington, TX 76002  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor out-of-state PAC (ID# ) Amount of contribution description (if applicable)  O6/29/2016  Contributor address; City; State; Zip Code 5201 Hidden Oaks Ln Artington, TX 76017  (If travel outside of Texas, complete Schedule T)	Date		ŧ)		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date  Full name of contributor Plump, Nanci (Ms.)  Contributor address; 5201 Hidden Oaks Ln Artington, TX 76017  Employer (See Instructions)  Amount of contribution (\$) description (if applicable)  \$100.00  (If travel outside of Texas, complete Schedule T)	06/29/2016	7106 Lighthouse Rd		\$100.00	! ! !
Date Full name of contributor Out-of-state PAC (ID# Out-of-state P				<u> Li</u>	Texas, complete Schedule T)
Plump, Nanci (Ms.)  Contribution (\$) description (if applicable)  Contributor address; City; State; Zip Code  S100.00  S100.00  (If travel outside of Texas, complete Schedule T)	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
5201 Hidden Oaks Ln Arlington, TX 76017  (If travel outside of Texas, complete Schedule T)	Date	·	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2016	5201 Hidden Oaks Ln		\$100.00	 
Principal occupation / Job title (See Instructions)  Employer (See Instructions)				(if travel outside of	Texas, complete Schedule T)
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)	

## **POLITICAL CONTRIBUTIONS** OTHER THAN PLEDGES OR LOANS

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8	8 Report: 9/18		
2 FILER NAME	Whitley, Benny Glen (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Porteus, Howard Jr.	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if amplicable)		
06/28/2016	6 Contributor address; City; State; Zip Code 1245 Blue Lake Blvd Arlington, TX 76005		\$500.00	6 JUL 15		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	19:3 19:3 19:4 19:4 19:4 19:4 19:4 19:4 19:4 19:4		
Date	Full name of contributor  ut-of-state PAC (ID# Ross, Martin	#)	Amount of contribution (\$)	In-kir@contribution description (if applicable)		
06/29/2016	Contributor address; City; State; Zip Code 2 Gregory Ct Pantego, TX 76013-3159	•••••	\$100.00	 		
·			(If travel outside of	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor  ut-of-state PAC (ID#Russell, David	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/30/2016	Contributor address; City; State; Zip Code 1106 San Juan Ct.		\$100.00	<u> </u>		
	Arlington, TX 76012-2750		<u> </u>	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor Out-of-state PAC (ID# Sargent Investments LLC	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/27/2016	Contributor address; City; State; Zip Code 2714 Sherman St Grand Prairie, TX 75051-1026		\$2,000.00	 		
			<u> </u>	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/29/2016	Contributor address; City; State; Zip Code 612 E Lamar Blvd, Ste 300 Arlington, TX 76011-4124		\$250.00	] [		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			

	CAL CONTRIBUTIONS THAN PLEDGES OR LOA	NS		SCHEDULE A
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	Danast 40/40
FILER NAME	Whitley, Benny Glen (Mr.)	· · · · · · · · · · · · · · · · · · ·	3 ACCOUNT# 00000001	Report: 10/18 (Ethics Commission filers)
Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/29/2016	6 Contributor address; City; State; Zip Code 6948 W Poly Webb Rd Arlington, TX 76016-3617		\$1,000.00	
Principal occup	pation / Job title (See Instructions)	10 Employer (See In	<u> </u>	Texas, complete Schedule T)
		<u></u>		
				20 ELD 8 Yr.
				2016 JUL 15 ELECTRONS ASS
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				35 on

#### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Politing Expense Printing Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

rees	The Instruction Guide explains hov		a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/5 Re	port: 11/18 Whitley, Benny Glen (Mr.)		1 000000
4 Date	5 Payee name	1	
06/20/2016	912 Project		EP F DT
6 Amount (\$)	7 Payee address City; State; Zip Code		2章 二 当F
\$25.00	3233 White Settlement Rd		<b>疆</b> 5 元
	Fort Worth, TX 76107		重 글 일이
	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Texas, complete Seffedule. Ti
8 PURPOSE	Office Overhead/Rental Expense	Dues (in travel octisité	
OF EXPENDITURE	Office Official North Experies	2000	1 0 0
EXPENDITURE			70
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
06/22/2016	Arlington Republican Club		
Amount (\$)	Payee address City; State; Zip Code		
\$25.00	PO Box 14095		
,	Arlington, TX 76094-1095		
PURPOSE	Category (See Categories listed at the top of this schedule)	' '	of Texas, complete Schedule T)
OF	Office Overhead/Rental Expense	Dues	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payro name		
05/23/2016	Payee name Awesome Blossums		
Amount (\$)	Payee address City; State; Zip Code		
\$85.28	8100 Camp Bowie Blvd.		
Ψ00.20	Fort Worth, TX 76116		
PURPOSE	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
OF	Office Overhead/Rental Expense	Flowers	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure	Canadate / Cincarolog Hame		
to benefit C/OH			
Date	Payee name		
01/26/2016	Dee Anderson Campaign		
Amount (\$)	Payee address City; State; Zip Code		
\$100.00	908 Shady Creek Dr Kennedale, TX 76060		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE OF	Contributions/Donations Made By	Political Contributions	
EXPENDITURE	Candidate/Officeholder/Political Committee	1	
			Office held
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			

#### **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundraisi se Food/Beverage Expense Travel In District Polling Expense Travel Out of District Printing Expense Office Overhead/Rer The Instruction Guide explains how to	tract Labor Loan Repayme ing Expense Transportation Contributions/D t Candidate/O ntal Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Ionations Made By fficeholder/Political Committee a category not listed above)
1 PAGE# Schedule: 2/5 Re	port: 12/18		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name		
02/19/2016	Dee Anderson Campaign		
6 Amount (\$)	7 Payee address City; State; Zip Code		-
\$1,000.00	908 Shady Creek Dr Kennedale, TX 76060		7/A/7 2016 ELEC
8	(a) Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule 1)
PURPOSE OF	Contributions/Donations Made By	Political Contribution	TE ET
EXPENDITURE	Candidate/Officeholder/Political Committee		5 T
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held
	Deve		1 20 0
Date	Payee name Erma Johnson Schorlarship Fund		26 ATO
05/23/2016			1 3 0
Amount (\$)	Payee address City; State; Zip Code		!
\$20.00	1500 Houston St. Fort Worth, TX 76102		
<del></del>	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	Contributions/Donations Made By	Memorial for Erma Johnson	on
OF EXPENDITURE	Candidate/Officeholder/Political Committee		
EXPERIMITORE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
06/09/2016	HEB Chamber		
Amount (\$)	Payee address City; State; Zip Code		
\$175.00	PO Box 969 Bedford, TX 76095		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Dues	
OF EXPENDITURE	•		
EXI ENDITORE		1	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
03/22/2016	Hispanic Chamber		
Amount (\$)	Payee address City; State; Zip Code		
\$275.00	1327 N Main St Fort Worth, TX 76164		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside Dues	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Gifts/Awards/Memonal Expense Legal Services Consulting Expense Food/Beverage Expense Polling Expense Printing Expense **Event Expense** Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Whitley, Benny Glen (Mr.) 0000001 Schedule: 3/5 Report: 13/18 4 Date 5 Payee name Hurst Masonic Lodge 01/16/2016 6 Amount (\$) Payee address City; State; Zip Code 725 Mary Dr. Hurst, TX 76053 \$100.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Office Overhead/Rental Expense **Dues** OF EXPENDITURE 9 Complete ONLY if Office held: Candidate / Officeholder name Office sought: വ direct expenditure to benefit C/OH Date Payee name တ္ Mid-Cities Pacesetters Rotary Club 05/13/2016 Pavee address City: State: Amount (\$) Zip Code PO Box 210421 \$500.00 Bedford, TX 76095 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Office Overhead/Rental Expense Dues OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name **NCRCO** 02/22/2016 Amount (\$) Payee address City: State: Zip Code 5900 Western Dr \$30.00 Great Falls, MT 59404 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense **Dues EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Northeast Tarrant County Republican Club 05/16/2016 Amount (\$) Payee address City; State; Zip Code 1005 Fayette Dr. \$20.00 Euless, TX 76039 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense **Dues** OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

Austin, Texas 78711-2070

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Consulting Expense Legal Services Travel In District Travel Out Of District Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense **Event Expense** OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # 3 ACCOUNT # (TEC filers) FILER NAME 2 Whitley, Benny Glen (Mr.) 0000001 Schedule: 4/5 Report: 14/18 5 Payee name 4 Date Tarrant County Jr. Livestock Exchange 02/09/2016 Payee address City; State; Zip Code 6 Amount (\$) 6713 Telephone Road Fort Worth, TX 76135 \$500.00 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Contributions/Donations Made By Contributions C OF Candidate/Officeholder/Political Committee $\Box$ **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held direct expenditure to benefit C/OH U: Date Payee name **TCGOP** 03/19/2016 Payee address City: State: Zip Code Amount (\$) 7524 Mosier View Ct. \$100.00 Fort Worth, TX 76118 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Advertising Expense SD 9 Convention Sponsor OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name The Exchange Club 01/28/2016 Amount (\$) Payee address City; State; Zip Code 4540 Overton Terrace Ct \$540.00 Fort Worth, TX 76109 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Dues OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date 05/23/2016 The Exchange Club Amount (\$) Payee address City; State; Zip Code 4540 Overton Terrace Ct \$527.00 Fort Worth, TX 76109 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Office Overhead/Rental Expense Dues **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

#### **POLITICAL EXPENDITURES** MADE FROM PERSONAL FUNDS

SCHEDULE G

TDD 1-800-735-2989

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ng Legal Services Solicitation/Fundrais	ntract Labor Loan Repayr sing Expense Transportation Contributions ct Candidate ental Expense OTHER (ente	nent/Reimbursement in Equipment & Related Expense i/Donations Made By i/Officeholder/Political Committee er a category not listed above)
1 PAGE#	2 FILER NAME Whitley, Benny Glen (Mr.)		3 ACCOUNT # (TEC filers)
Schedule: 1/3 Re	Port. 10/10		00000001
01/29/2016	5 Payee name The Fort Worth Club		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$16.00 Reimbursement from political contributions intended	306 West Seventh St. Fort Worth, TX 76102		
8	(a) Category (See Categories listed at the top of this schedule)	1, , , , , , , , , , , , , , , , , , ,	e of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	Jan Exchange Lunch	
EXPENDITURE			
		1	m
,			701 201 EY:
Date	Payee name		
01/29/2016	The Fort Worth Club		RAR A
Amount (\$)	Payee address City; State; Zip Code	<del></del>	50 J AF
\$205.68	306 West Seventh St.		
Reimbursement from political	Fort Worth, TX 76102		
contributions intended		Deportation (If travel extend	e of Texas, complete 3chedule 1)
PURPOSE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside Dues Jan	e d Texas, complete scriedule 17
OF EXPENDITURE	Office Overhous Torial Experies	200000	7
			1
Date	Payee name		
02/29/2016	The Fort Worth Club		
Amount (\$)	Payee address City; State; Zip Code 306 West Seventh St.		
\$48.00	Fort Worth, TX 76102		
Reimbursement from political contributions intended			
DUDDOGE	Category (See Categories listed at the top of this schedule)		le of Texas, complete Schedule T)
PURPOSE OF	Food/Beverage Expense	Feb Exchange Lunches	
EXPENDITURE			
Date	Payee name	<u> </u>	
02/29/2016	The Fort Worth Club		
Amount (\$)	Payee address City; State; Zip Code		
\$205.68	306 West Seventh St.		
Reimbursement from political contributions intended	Fort Worth, TX 76102		
Controllions Intended	Category (See Categories listed at the top of this schedule)	Description (If travel outside	le of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Dues Feb	, ,
OF EXPENDITURE			
	·		
		'	
1		1	

#### **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

SCHEDULE G

	Annual Control of the										
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ting Legal Services Solicitation/Fund	Contract Labor traising Expense strict /Rental Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)								
1 PAGE#   2 FILER NAME   3 ACCOUNT # (TEC filers)											
Schedule: 2/3 Re	Mariana Danna Olan (Man)		0000001								
4 Date	5 Payee name										
03/31/2016	The Fort Worth Club										
6 Amount (\$)	7 Payee address City; State; Zip Code										
\$205.68 Reimbursement	306 West Seventh St. Fort Worth, TX 76102										
from political contributions intended											
8	(a) Category (See Categories listed at the top of this schedule)	(If travel outside of Texas, complete Schedule T)									
PURPOSE OF	Office Overhead/Rental Expense	Dues									
EXPENDITURE			F0								
			201 201 11.E								
			AR SAR								
5-4-											
Date 04/30/2016	Payee name The Fort Worth Club										
Amount (\$)	Payee address City; State; Zip Code										
\$205.68	306 West Seventh St.		#E ≥ 88								
Reimbursement from political	Fort Worth, TX 76102										
contributions intended			<u> </u>								
PURPOSE	Category (See Categories listed at the top of this schedule)	Description	(If travel outside of Texas complete schedule T)								
OF	Office Overhead/Rental Expense	Dues	!								
EXPENDITURE											
		·									
Date	Payee name										
05/31/2016	The Fort Worth Club	•									
Amount (\$)	Payee address City; State; Zip Code										
\$205.68	306 West Seventh St.		•								
Reimbursement from political	Fort Worth, TX 76102										
contributions intended	Colores (Con Coloresia listed at the tree of this sehedule)	T Description	"The state of the								
PURPOSE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Dues May	(If travel outside of Texas, complete Schedule T)								
OF EXPENDITURE	omes of stributed to the imported	,									
LON 211011 - 112											
Date	Payee name										
06/30/2016	The Fort Worth Club										
Amount (\$)	Payee address City; State; Zip Code										
\$16.00	306 West Seventh St.										
Reimbursement from political contributions intended	Fort Worth, TX 76102										
contributions intended	Category (See Categories listed at the top of this schedule)	Description	(If travel outside of Texas, complete Schedule T)								
PURPOSE	Food/Beverage Expense		ange Lunches								
OF EXPENDITURE	, <b>33</b> , <b>2</b>		go								

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

TDD 1-800-735-2989

MADE F								
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees  Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense			Expense e	DITURE CATEGO Salaries/Wages/Con Solicitation/Fundrais Travel In District Travel Out of Distric Office Overhead/Rei JIDE explains how to	tract Labor ing Expense t ntal Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) rm.		
1 PAGE# Schedule: 3/3 Re	port: 18/18	2 FILER N/ Whitley,	AME Benny Glen	(Mr.)			3 ACCOUNT# 00000001	(TEC filers)
4 Date 06/30/2016	5 Payee na The For	ame rt Worth Club						
6 Amount (\$) \$205.68  X Reimbursement from political contributions intended	Fort Wo	ddress C est Seventh St. orth, TX 76102	City; State;	Zip Code				
8 PURPOSE OF EXPENDITURE		y (See Categories list Overhead/Rental		this schedule)	(b) Description Dues	(If travel outside o	of Texas, complete Sci	nedule T)

TARRANT COUNTY

2016 JUL 15 AM 9: 27

ELECTIONS ACCEPTATION