

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)

2 Total pages filed:

21

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Dr

Maria

B

NICKNAME

LAST

SUFFIX

Benzon

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5200 Palmetto St.

Bellaire, TX 77401

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 384-5119

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Ms

Kara

Z

NICKNAME

LAST

SUFFIX

DeRocha

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

9414 Albury Dr.

Houston, TX 77096

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 563-8049

9 REPORT TYPE

☐

January 15

☐

30th day before election

☐

Runoff

☐

15th day after campaign
treasurer appointment
(Officeholder Only)

☐

July 15

☒

8th day before election

☐

Exceeded Modified
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

10 / 5 / 21

THROUGH

10 / 24 / 21

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 2 / 21

ELECTION TYPE

☐

Primary

☐

Runoff

☐

Other
Description

☒

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Houston ISD Trustee, District V

14 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. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

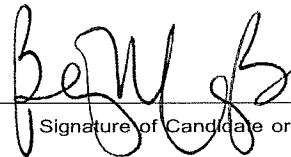
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME <u>Maria Benzon</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>3161.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>2587.87</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>5344.22</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

18 SIGNATURE 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.


Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Maria Benzon, and my date of birth is 03/07/74.

My address is 5200 Palmetto St. (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

Executed in Harris County, State of Texas, on the 25th day of Oct, 20 21 (month) (year)


Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Maria Benzon		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1955. ⁰⁰
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1206. ⁰⁰
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2587.87
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)
4 Date Oct 6 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deandria Miller	7 Amount of contribution (\$) \$ 40.00
6 Contributor address; City; State; Zip Code Houston TX 77053		
8 Principal occupation / Job title (See Instructions) Math Specialist		9 Employer (See Instructions) HISD
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Adams	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code Houston TX 77055		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) HFT
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gertrude Hilly	Amount of contribution (\$) \$ 25.00
Contributor address; City; State; Zip Code Houston TX 77087		
Principal occupation / Job title (See Instructions) School Nurse		Employer (See Instructions) HISD
Date Oct 13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emile Browne	Amount of contribution (\$) \$ 60.00
Contributor address; City; State; Zip Code Houston TX 77020		
Principal occupation / Job title (See Instructions) Media		Employer (See Instructions) Emile C Browne Photography
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)
4 Date Oct. 13 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hany Khalil	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code Houston Tx 77025		
8 Principal occupation / Job title (See Instructions) E.D. TGCALF		9 Employer (See Instructions) Houston Federation of Teachers
Date Oct. 13 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silky Patel	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code Bellaire Tx 77401		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Advanced Orthopaedics
Date Oct 15 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Luisa Vasquez	Amount of contribution (\$) \$ 40.00
Contributor address; City; State; Zip Code Houston Tx 77074		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD
Date Oct 17 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seth Dewart i Anita Wadhwa	Amount of contribution (\$) \$ 30.00
Contributor address; City; State; Zip Code Bellaire Tx 77081		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Promise Community Schools
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4
2 FILER NAME Maria Benzoni		3 Filer ID (Ethics Commission Filers)
4 Date Oct 19 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wil Judy 6 Contributor address; City; State; Zip Code Houston TX 77008	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Next Level Urgent Care
Date Oct. 20 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tisha Dorn Contributor address; City; State; Zip Code Pearland TX 77581	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Southwest Schools
Date Oct 23 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Whrig Contributor address; City; State; Zip Code Lake Mary, FL 32746	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date Oct. 23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mary Spranger Contributor address; City; State; Zip Code Madison, WI 53713	Amount of contribution (\$) \$ 60.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 4
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)
4 Date Oct 17 2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley Wolters <hr/> 6 Contributor address; City; State; Zip Code Dublin OH 43016	7 Amount of contribution (\$) \$ 50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Ohio State University
Date Oct 4 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Nance <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) San Antonio ISD
Date Oct 4 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Benzon <hr/> Contributor address; City; State; Zip Code Bellaire Tx 77401	Amount of contribution (\$) \$ 1050.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Southwest Schools
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzoni		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1200.00	
5 Date Oct. 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lashelle Scott	8 Amount of Contribution \$ \$80.00	9 In-kind contribution description stamps
7 Contributor address; City; State; Zip Code Houston TX 77042		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) n/a		11 Employer (FOR NON-JUDICIAL) (See Instructions) n/a	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct. 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelie Haydel	Amount of Contribution \$ \$20.00	In-kind contribution description stamps
Contributor address; City; State; Zip Code Houston TX 77022		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Customer Service Manager		Employer (FOR NON-JUDICIAL) (See Instructions) Host Gator (Newfold Digital)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Bennett	8 Amount of Contribution \$ \$ 20.00	9 In-kind contribution description Stamps
7 Contributor address; City; State; Zip Code Houston TX 77008		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah Dodds	Amount of Contribution \$ \$ 40.00	In-kind contribution description stamps
Contributor address; City; State; Zip Code Houston TX 77098		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		Employer (FOR NON-JUDICIAL) (See Instructions) Retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polly Johnson	8 Amount of Contribution \$ \$40.00	9 In-kind contribution description stamps
7 Contributor address; City; State; Zip Code Houston 77006		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		11 Employer (FOR NON-JUDICIAL)(See Instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela DeSilva	Amount of Contribution \$ \$ 20.00	In-kind contribution description stamps
Contributor address; City; State; Zip Code Houston TX 77057		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		Employer (FOR NON-JUDICIAL)(See Instructions) Retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct. 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Noelle McSherry	8 Amount of Contribution \$ 220.00	9 In-kind contribution description Stamps
7 Contributor address; City; State; Zip Code Houston TX 77007		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) grad student		11 Employer (FOR NON-JUDICIAL)(See Instructions) unemployed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date Oct. 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Martha Heubel	Amount of Contribution \$ 20.00	In-kind contribution description Stamps
Contributor address; City; State; Zip Code Houston TX 77030		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		Employer (FOR NON-JUDICIAL)(See Instructions) Retired	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	
--	--

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ginny Allen 7 Contributor address; City; State; Zip Code Houston TX 77007	8 Amount of Contribution \$ 20.00	9 In-kind contribution description stamps
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Psychiatrist		11 Employer (FOR NON-JUDICIAL)(See Instructions) Legacy Community Health	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carly Milner Contributor address; City; State; Zip Code Houston TX 77008	Amount of Contribution \$ 50.00	In-kind contribution description stamps
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Lawyer		Employer (FOR NON-JUDICIAL)(See Instructions) Fogler, Brar, O'Neil & Gray LP	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

Revised 8/17/2020

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Darla Jones	8 Amount of Contribution \$ \$40.00	9 In-kind contribution description Stamps
7 Contributor address; City; State; Zip Code Houston TX 77005		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Diana Alexander	Amount of Contribution \$ \$256.00	In-kind contribution description
Contributor address; City; State; Zip Code Houston TX 77043		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Diagnostician		Employer (FOR NON-JUDICIAL) (See Instructions) Cy Fair ISD	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca Shields	8 Amount of Contribution \$ \$20.00	9 In-kind contribution description stamps
7 Contributor address; City; State; Zip Code Houston TX 77005		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Retired		11 Employer (FOR NON-JUDICIAL)(See Instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemans Ashford	Amount of Contribution \$ \$20.00	In-kind contribution description stamps
Contributor address; City; State; Zip Code Katy TX 77449		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Teacher		Employer (FOR NON-JUDICIAL)(See Instructions) Spring Branch ISD	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

SCHEDULE A2

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$ 1206.⁰⁰

6 Full name of contributor ☐ out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9	In-kind contribution
	description

7 Contributor address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL)(See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Full name of contributor ☐ out-of-state PAC (ID#: _____)Amount of
Contribution \$

In-kind contribution description

Contributor address; City; State; Zip Code

stamps

☐ Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL)(See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margarita Arevalo	8 Amount of Contribution \$ \$60.00	9 In-kind contribution description stamps
7 Contributor address; City; State; Zip Code Houston Tx 77085		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Project Manager		11 Employer (FOR NON-JUDICIAL) (See Instructions) Unemployed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mindy Wilson	Amount of Contribution \$ \$40.00	In-kind contribution description
Contributor address; City; State; Zip Code Houston TX 77018		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) stay at Home Mom		Employer (FOR NON-JUDICIAL) (See Instructions) Unemployed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 11	
2 FILER NAME Maria Benzon		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 1206.00	
5 Date Oct 12 2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darlene McKeever	8 Amount of Contribution \$ \$20.00	9 In-kind contribution description stamps
7 Contributor address; City; State; Zip Code Houston TX 77042		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions) Retired	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date Oct 12 2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monica Galaz-Montoya	Amount of Contribution \$ \$20.00	In-kind contribution description stamps
Contributor address; City; State; Zip Code Houston TX 77035		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Stay at Home Mom		Employer (FOR NON-JUDICIAL) (See Instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Maria Benzon	3 Filer ID (Ethics Commission Filers)
4 Date Oct. 6, 2021	5 Payee name Malcolm Martin Strategies (Tarah Taylor)	
6 Amount (\$) \$ 250.00	7 Payee address; City; State; Zip Code 2302 Shadow Canyon Ct Pearland TX 77584	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description VAN
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date Oct. 18, 2021	Payee name Malcolm Martin Strategies (Tarah Taylor)		
Amount (\$) \$ 100.00	Payee address; City; State; Zip Code 2302 Shadow Canyon Ct Pearland TX 77584		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description VAN	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date Oct. 4, 2021	Payee name David Galvin		
Amount (\$) \$ 1600.00	Payee address; City; State; Zip Code 13814 Pebblebrook Dr. Houston TX 77079		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Field	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME Maria Benzon	3 Filer ID (Ethics Commission Filers)
4 Date Oct 24, 2021	5 Payee name Pay Pal	
6 Amount (\$) 182.37	7 Payee address; City; State; Zip Code 2211 North First St. San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Transaction
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date Oct. 8, 2021	Payee name Facebook	
Amount (\$) 0.89	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Facebook Ad
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date Oct 4, 2021	Payee name USPS	
Amount (\$) 4.61	Payee address; City; State; Zip Code 5350 Bellaire Blvd Bellaire TX 77401	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other - Postage	Description Postage
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date Oct 18 2021	5 Payee name Hustle	
6 Amount (\$) \$450.00	7 Payee address; City; State; Zip Code 548 Market St. San Francisco CA 94104-5401 PMB 19841	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description Text Message
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED