CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 11 CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** Ben NAME Date Received **NICKNAME** LAST **SUFFIX** Zeller CANDIDATE / ADDRESS / PO BOX; APT / SUITE #: ZIP CODE OFFICEHOLDER P.O. BOX 4871 MAILING ADDRESS Amount Change of Address Victoria, TX 77903 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST МІ **TREASURER** NAME NICKNAME LAST **SUFFIX** Goven CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE: ZIP CODE **TREASURER ADDRESS** 443 Paco P.S. (Residence or Business) Victoria, TX 77904 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER PHONE 361-571-6302 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 Final Report (Attach C/OH-FR) reporting limit PERIOD Month Day Year Day Month Year COVERED 07/01/2023 **THROUGH** 12/31/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) County Judge Victoria **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

					2 of 11
13 C / OH NAME	Zeller, Ben		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expe These expenditures may have been made with d officeholders are required to report this inform	nout the candidate's or office	eholder's kr	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAM	ΛE		
		COMMITTEE CAMPAIGN TO FACURED ADD	20500		
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*					
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CONTRIBUTIONS (OTHER	THAN PLEDGES, LOANS.		
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE		\$	0.00
	2. TOTAL POLITIC	CAL CONTRIBUTIONS			
		PLEDGES, LOANS, OR GUARANTEES OF LC	DANS)	\$	4,400.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				2,993.53
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	7,604.51
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PR	HE LAST DAY OF THE	\$	126,527.26	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS TING PERIOD	S AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT	LISA ANN RAMIREZ Notary Public, State of Texas My Commission Expires July 14, 2024 NOTARY ID 1052634-4	true and correct and includ under Title 15, Election Co	enalty of perjury, that the accles all information required to de.	to be report	
^	OTARY STAMP / SEAL AB	h. 7.11.	this the	, d	day
Signature of off	icer administering	Printed name of officer administering	Title of office	stratu r administe	ring oath

SUBTOTALS - C/OH

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

	3 07 11
18 FILER NAME Zeller, Ben	·ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,400.00
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	\$ 7,604.51
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OF	s s
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURN TO FILER	\$ 2,414.52

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/11	
2	FILER NAME Zeller, Ben		3	Filer ID		
4	Date 11/08/2023	 5 Full name of contributor out-of-state PAC (ID#:_Fordiani, Dr. & Mrs. Tom (Dr.) 6 Contributor address; City; State; Zip Code 102 Professional Park Dr. Victoria, TX 77904 		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/15/2023	Full name of contributor out-of-state PAC (ID#:_ Jones, Rick & Lisa Contributor address; City; State; Zip Code 106 Arbor Lake St. Victoria, TX 77904		The second secon	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date O7/13/2023 Full name of contributorout-of-state PAC (ID#:) Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code 500 N Shoreline Blvd, Ste 1111 Corpus Christi, TX 78401				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/13/2023	Full name of contributor out-of-state PAC (ID#:_ Malik, Noble & Martha Contributor address; City; State; Zip Code 103 Chimney Rock Dr. Victoria, TX 77904)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/24/2023	Full name of contributor out-of-state PAC (ID#:_McNeill, Dr. John & Mrs. Contributor address; City; State; Zip Code PO BOX 4348 Victoria, TX 77903			Amount of Contribution (\$)	\$1,600.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONE	TARY POLITICAL CONTRIBUTION		SCHEDULE A1		
The Instru	action Guide explains how to complete this	form.	1 Total pages Sch: 2/2 R		
2 FILER NAME Zeller, Ben			3 Filer ID		
4 Date 07/18/2023)	7 Amount of C	Contribution (\$)	\$150.00
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions)	5)		

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Fees Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Credit Card Payment Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/5 Rpt: 6/11 Zeller, Ben 4 Date Payee name 09/06/2023 Catholic War Veterans, Post 1269 6 Amount (\$) Payee address; State; Zip Code City; \$100.00 Victoria, TX **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation for annual event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/06/2023 Cobra Athletics Amount (\$) Payee address: City; State; Zip Code \$50.00 Victoria, TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Cobra Athletics Homeschool fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/07/2023 GoDaddy.com Amount (\$) Payee address; City; State; Zip Code \$199.98 TX **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Annual expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Fees Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 2/5 Rpt: 7/11 Zeller, Ben 4 Date Payee name 09/24/2023 Hostgator.com Amount (\$) Payee address; City; State; Zip Code \$484.82 TX **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Multi year web hosting expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/10/2023 Mint & Vine, LLC Amount (\$) Payee address; City; State; Zip Code \$225.00 P.O. BOX 4784 Victoria, TX 77903 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Professional Services **EXPENDITURE** Check if Austin, TX, officeholder living expense **Professional Services** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/29/2023 Nicholson, Chris Amount (\$) Payee address; City; State; Zip Code \$978.75 P.O. BOX 1057 Galveston, TX 77553 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Professional Services Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Professional Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Fees Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 3/5 Rpt: 8/11 Zeller, Ben 4 Date Payee name 07/29/2023 Nicholson, Chris Payee address; State; Zip Code 6 Amount (\$) City; \$676.77 P.O. BOX 1057 Galveston, TX 77553 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Reimbursement of expenses for fundraiser **EXPENDITURE** Check if Austin, TX, officeholder living expense event Reimbursement of expenses for fundraiser event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/11/2023 Resolute Media Solutions, LLC Amount (\$) Payee address; City; State; Zip Code \$175.58 321 Schubert Rd. Victoria, TX 77905 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Professional Services **EXPENDITURE** Check if Austin, TX, officeholder living expense

Professional Services Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/21/2023 Resolute Media Solutions, LLC City; Amount (\$) Payee address; State; Zip Code 321 Schubert Rd. \$212.37 Victoria, TX 77905 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Professional Services **EXPENDITURE** Check if Austin, TX, officeholder living expense Professional Services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH www.ethics.state.tx.us Version V3.5.1.f1b8c3f1 Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Cift/Awards/Memorials Exp Legal Services	Sala		ages/	/Contract Labor		Travel Out of District OTHER (enter a category not	t listed above)
				The Instruction Guide	e explains how	to con	nple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>				;	3	Filer ID	
	Sch: 4/5 Rpt: 9/11		Zeller, Ben								
4	Date	5	Payee name					***************************************			
	08/11/2023		Restoration	House Minstries							
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			Victoria, TX								
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			Victoria, TX					-	_		
	PURPOSE OF			ee Categories listed at the to) ((b)	Description			
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	OF EXPENDITURE		Printing Exp				ļ			le of Texas. Complete Schedu	le T.
										officeholder living expense	
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	Complete ONLY if direct	<u>_</u>	Candidato/Offic	ceholder name	Office		la 4			000 bald	
	expenditure to benefit C/OF		,anuluate/Onic	centitier name	Office	e soug	ht			Office held	

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Solicitation/Fundraising Expense Event Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 5/5 Rpt: 10/11 Zeller, Ben 4 Date Payee name University of Houston - Victoria 10/30/2023 6 Amount (\$) Payee address; City; State; Zip Code \$100.00 Victoria, TX **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/10/2023 Warriors Weekend Payee address; State; Zip Code Amount (\$) City; \$200.00 3603 Miori Lane Victoria, TX 77901 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Donation **EXPENDITURE** Check if Austin, TX, officeholder living expense Donation Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/11 2 FILER NAME 3 Filer ID Zeller, Ben 8 Amount (\$) 4 Date 5 Name of person from whom amount is received 12/31/2023 Rally Credit Union \$2,414.52 6 Address of person from whom amount is received; City; State; Zip Code 2207 N. HWY 35, Ste. E Rockport, TX 78382 7 Purpose for which amount is received ☐ Check if political contribution returned to filer Dividends & Interest during reporting period