# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

|                               |  | I1 Éiler ID                           |   | (A. T                                  |
|-------------------------------|--|---------------------------------------|---|--|
| The C/OH Instruction          | Guide explains how to complete th          | his form. 1 Filer ID                  |   | 2 Total pages filed:                   |
|                               |  |                                       |   | 15                                     |
| 3 CANDIDATE /<br>OFFICEHOLDER | MS / MRS / MR FIR Ber                      |                                       | MI  | OFFICE USE ONLY                        |
| NAME                          | Doi  | n<br>-                                |   | Date Received                          |
|                               |  |                                       |   | DAZELABASE AND                         |
|                               | NICKNAME LAS                               |                                       | SUFFIX                                    | JAN 1 3 2023 💆                         |
|                               | Zell                                       |                                       |   | Confle                                 |
| 4 CANDIDATE / OFFICEHOLDER    | ADDRESS / PO BOX; APT / SUI                | ITE #; CITY;                          | ZIP CODE                                  | Date Hand-delivered or Date Postmarked |
| MAILING<br>ADDRESS            | P.O. BOX 4871                              |                                       |   | Receipt # Amount                       |
| Change of Address             | Vistoria TV 77000                          |                                       |   | Necope #                               |
| Change of Address             | Victoria, TX 77903                         |                                       |   | Date Processed                         |
|                               |  |                                       |   |  |
|                               |  |                                       |   | Date Imaged                            |
| 5 CAMPAIGN                    | MS / MRS / MR FIRS                         | <br>ST                                | MI  |  |
| TREASURER<br>NAME             |  |                                       |   |  |
| TW W.E                        | $\mathbf{p}_{\epsilon}$                    | aniel                                 |   |  |
|                               | NICKNAME LAS                               |                                       | SUFFIX                                    | ······                                 |
|                               |  |                                       |   |  |
|                               |  | byen                                  |   |  |
| 6 CAMPAIGN<br>TREASURER       | STREET ADDRESS (NO PO BOX                  | PLEASE); APT /                        | SUITE #; CITY;                            | STATE; ZIP CODE                        |
| ADDRESS                       |  | 4 2 20                                |   |  |
| (Residence or Business)       | 7  | lles Paco Rd.<br>Victoria, TX 779     |   |  |
|                               |  | sictoria, TX 779                      | 104                                       |  |
|                               |  |                                       |   |  |
| 7 CAMPAIGN<br>TREASURER       | AREA CODE PHONE NU                         | JMBER EXTENSION                       |   |  |
| PHONE                         | 3  | 61-571-6302                           |   |  |
| 8 REPORT                      |  |                                       |   |  |
| TYPE                          | X January 15 30                            | Oth day before election Ru            | unoff                                     | 15th day after campaign treasurer      |
|                               |  | · · · · · · · · · · · · · · · · · · · | · - ·                                     | appointment (officeholder only)        |
|                               | July 12                                    |                                       | ceeded modified porting limit             | Final Report (Attach C/OH-FR)          |
| 9 PERIOD                      | Month Day Year                             |                                       | Month Day                                 | Year                                   |
| COVERED                       | 07/01/2022                                 | THROUGH                               | 12/31/2022                                |  |
|                               |  |                                       |   |  |
| 10 ELECTION                   | ELECTION DATE                              | l                                     | ELECTION TYPE                             |  |
|                               | Month Day Year                             | Primary                               | Runoff                                    | Other                                  |
|                               |  | General                               | Special                                   |  |
| 11 OFFICE                     | 25505 UELD (4 am.)                         |                                       |   | <del></del>                            |
| 11 OFFICE                     | OFFICE HELD (if any) Victoria County Judge | 1                                     | L2 OFFICE SOUGHT (i<br>Victoria County Ju |  |
|                               | Violona odany dadgo                        |                                       | VICIONA COUNTY CO                         | luge                                   |
|                               |  |                                       |   |  |
|                               |  |                                       |   |  |
|                               |  | GO TO PAGE 2                          |   |  |
|                               |  |                                       |   |  |

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

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

|   |   |  |  | 2 of 15                                 |
|---|---|--|--|---|
| 13 C / OH NAME  | Zeller, Ben   | 14   | <b>1</b> Filer ID                                  |   |
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S)                | candidate / officeholder.   | political contributions accepted or political expenditures These expenditures may have been made without the d officeholders are required to report this information o | candidate's or officeho                            | older's knowledge or                    |
| Additional Pages  | COMMITTEE TYPE  | COMMITTEE NAME   |  |   |
|   | GENERAL   |  |  |   |
|   |   | COMMITTEE ADDRESS  |  | 200                                     |
|   | SPECIFIC  |  |  |   |
|   |   | COMMITTEE CAMPAIGN TREASURER NAME  |  |   |
|   |   | COMMITTEE CAMPAIGN TREASURER ADDRESS   |  |   |
|   |   |  |  |   |
| 16 CONTRIBUTION<br>TOTALS                                     |   | ZED POLITICAL CONTRIBUTIONS (OTHER THAN F<br>ES OF LOANS, OR CONTRIBUTIONS MADE ELECT  |  | \$ 0.00                                 |
|   | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                  |  |  | \$ 5,660.00                             |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS |   |  | \$ 2,894.38  |   |
|   | 4. TOTAL POLITIC  | AL EXPENDITURES  |  | <b>\$</b> 11,543.91                     |
| CONTRIBUTION<br>BALANCE                                       | 5. TOTAL POLITIC REPORTING PE   | AL CONTRIBUTIONS MAINTAINED AS OF THE LAS<br>RIOD  | T DAY OF THE                                       | \$ 107,954.10                           |
| OUTSTANDING<br>LOAN TOTALS                                    | 6. TOTAL PRINCIP<br>OF THE REPOR  | AL AMOUNT OF ALL OUTSTANDING LOANS AS OF<br>TING PERIOD  | THE LAST DAY                                       | \$ 0.00                                 |
| 17 AFFIDAVIT  |   | I swear, or affirm, under penalty of<br>true and correct and includes all in<br>under Title 15, Election Code.   | perjury, that the accor<br>formation required to b | npanying report is<br>ne reported by me |
| <b>**</b>   | LISA ANN RAMIREZ Notary Public, State of Text My Commission Expires July 14, 2024 NOTARY ID 1052634-4 | - 13 Que   | andidate or Officeholde                            | r                                       |
| AFFIX NO  | TARY STAMP / SEAL ABO   | DVE  | J _ A  | h                                       |
| Sworn to and subs   | cribed before me, by the sa   | aidaid   | _, this the  | day                                     |
| mu.   | Inn Lanz  | Lisa Ann Ramis   | 6 Admini   | Anation                                 |
| Signature of office   | cer administering   | Printed name of officer administering  | Title of officer ac                                | dministering oath                       |

## SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

|                            |  |             |     | 3 of 15      |
|----------------------------|--|-------------|-----|--------------|
| 18 FILER NAM<br>Zeller, Be | ١  | 19 Filer ID |     |              |
| 20 SCHEDULI<br>NAME OF     | E SUBTOTALS<br>SCHEDULE  |             | SUB | TOTAL AMOUNT |
| 1. X                       | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                  |             | \$  | 5,660.00     |
| 2.                         | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |             | \$  |              |
| 3.                         | SCHEDULE B: PLEDGED CONTRIBUTIONS  |             | \$  |              |
| 4. X                       | SCHEDULE E: LOANS  |             | \$  | 0.00         |
| 5. X                       | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS               | 3           | \$  | 11,543.91    |
| 6.                         | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       |             | \$  |              |
| 7.                         | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION               | DNS         | \$  |              |
| 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/OH     | \$  |              |
| 11.                        | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION             | DNS         | \$  |              |
| 12. X                      | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F<br>TO FILER | RETURNED    | \$  | 483.18       |
|                            |  |             |     |              |

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/5 Rpt: 4/15 2 FILER NAME 3 Filer ID Zeller, Ben Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/14/2022 Arquisola, Arnel (Dr.) \$100.00 6 Contributor address; City; State; Zip Code 2705 Hospital Dr. Ste. 204 Victoria, TX 77901 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/15/2022 Bauer, Jeanie \$100.00 Contributor address; City; State; Zip Code 101 Tampa Dr. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/28/2022 Boozalis, George & Debbie \$250.00 Contributor address; City; State; Zip Code 810 Champions Row Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/01/2022 Cain, Russell & Cherre \$100.00 Contributor address; City; State; Zip Code P.O. Box 565 Port Lavaca, TX 77980 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/30/2022 Constant, Ruth \$100.00 Contributor address; City; State; Zip Code 3202 Sam Houston Dr. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/5 Rpt: 5/15 2 FILER NAME 3 Filer ID Zeller, Ben Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/14/2022 Donoghue, Christa \$150.00 6 Contributor address; City; State; Zip Code P.O. BOX 3790 Victoria, TX 77903 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/13/2022 Fontenot, Karl & Barbara \$1,000.00 Contributor address; City; State; Zip Code P.O. Box 3570 Victoria, TX 77903 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/15/2022 Fordiani, Dr. & Mrs. Tom (Dr.) \$400.00 Contributor address; City; State; Zip Code 102 Professional Park Dr. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/30/2022 Heilker, Warren \$500.00 Contributor address; City; State; Zip Code P.O. Box 3882 Victoria, TX 77903 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/16/2022 Henry, James \$75.00 Contributor address; City; State; Zip Code 2608 College Dr. Victoria, TX 77901 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/5 Rpt: 6/15 2 FILER NAME 3 Filer ID Zeller, Ben Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/14/2022 Jansen, Billy \$100.00 6 Contributor address; City; State; Zip Code 6121 Country Club Dr. Victoria, TX 77904 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/16/2022 Jones, Rick & Lisa \$50.00 Contributor address; City; State; Zip Code 106 Arbor Lake St. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/13/2022 Lueders, HJ & Patsy \$35.00 Contributor address; City; State; Zip Code 604 Berwick Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/13/2022 Malik, Noble & Martha \$50.00 Contributor address; City; State; Zip Code 103 Chimney Rock Dr. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/16/2022 McNeill, Dr. John & Mrs. \$1,500.00 Contributor address; City; State; Zip Code PO BOX 4348 Victoria, TX 77903 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/5 Rpt: 7/15 2 FILER NAME 3 Filer ID Zeller, Ben Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/12/2022 O'Connor, Morgan Dunn \$100.00 6 Contributor address; City; State; Zip Code PO BOX 290 Victoria, TX 77902 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/16/2022 Samford, Mike \$50.00 Contributor address; City; State; Zip Code 407 Bridle Lane Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/12/2022 Schaefer, Kenneth & Kathleen \$100.00 Contributor address; City; State; Zip Code 5506 N. Navarro St. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/28/2022 Seale, Robert & Bernie \$100.00 Contributor address; City; State; Zip Code 1598 Kolodzey Rd. Victoria, TX 77905 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/28/2022 Smajstrla, John \$50.00 Contributor address; City; State; Zip Code P.O. Box 3907 Victoria, TX 77903 Principal occupation / Job title (See Instructions) Employer (See Instructions)

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/5 Rpt: 8/15 2 FILER NAME 3 Filer ID Zeller, Ben Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/14/2022 Stoilis, Constantine & Terri \$500.00 6 Contributor address; City; State; Zip Code 1431 Beck Rd. W Victoria, TX 77905 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/13/2022 Stone, June \$100.00 Contributor address; City; State; Zip Code 107 Ridge View Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/29/2022 Zafereo, Mark \$150.00 Contributor address; City; State; Zip Code 125 Kreekview Dr. Victoria, TX 77904 Principal occupation / Job title (See Instructions) Employer (See Instructions)

| LOANS  |                                   |                 |                         |                                  | SCHED                                       | OULE <b>E</b> |
|--|-----------------------------------|-----------------|-------------------------|----------------------------------|---|---------------|
| The instruction Guide explains now to complete this form |                                   |                 |                         | ages Schedule E:<br>/1 Rpt: 9/15 |   |               |
| 2 FILER NAME<br>Zeller, Ben                              |                                   | -               |                         | 3 Filer ID                       | )   |               |
|  | NITEMIZED LOANS                   |                 |                         | •                                | \$  | 0.00          |
| 5 Date of loan   | 7 Name of lender                  | out-of-state PA | .C (ID#:                |                                  | 9 Loan Amount (                             | \$)           |
| 6 Is lender a financial institution?                     | 8 Lender address; City;           | State;          | Zip Code                |                                  | 10 Interest Rate  11 Maturity Date          |               |
| 12 Principal acquasti                                    | 27 / Joh tiele (Coa Instructions) |                 | T-2 - 1 (0 l            |                                  | The many 2 and                              |               |
|  | on / Job title (See Instructions) |                 | 13 Employer (See Inst   |                                  |   |               |
| 14 Description of Coll None                              | lateral                           |                 | 15 Check if personal fu | unds were deposite               | ed into political accou<br>(See Instruction |               |
| 16 GUARANTOR<br>INFORMATION                              | 17 Name of guarantor              |                 |                         |                                  | 19 Amount Guarar                            | nteed (\$)    |
| not applicable   | 18 Guarantor address; City;       |                 | Zip Code                |                                  |   |               |
|  |                                   |                 |                         |                                  |   |               |
| 20 Principal occupation                                  | on                                |                 | 21 Employer (See Inst   | ructions)                        |   |               |
|  |                                   |                 |                         |                                  |   |               |

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| Candidate/Officeholder/Politica<br>Credit Card Payment        |   |
|---|---|
| 1 Total pages Schedule F1:                                    | 2 FILER NAME 3 Filer ID   |
| Sch: 1/5 Rpt: 10/15   | Zeller, Ben   |
| 4 Date  | 5 Payee name  |
| 12/05/2022  | Bluebonnet Youth Ranch  |
| 6 Amount (\$)<br>\$100.00                                     | 7 Payee address; City; State; Zip Code  Victoria, TX  |
| 8 PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
| OF<br>EXPENDITURE   | Raffle  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Raffle  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held   |
| Date  | Payee name  |
| 09/26/2022  | Catholic War Veterans, Post 1269  |
| Amount (\$) \$100.00  | Payee address; City; State; Zip Code  |
|   | TX  |
| PURPOSE<br>OF<br>EXPENDITURE                                  | (a) Category (See Categories listed at the top of this schedule)  Donation  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation                       |
| Complete ONLY if direct expenditure to benefit C/O            | Candidate/Officeholder name Office sought Office held   |
| Date  | Payee name  |
| 07/07/2022  | Mint & Vine, LLC  |
| Amount (\$) \$215.50  | Payee address; City; State; Zip Code P.O. BOX 4784  |
|   | Victoria, TX 77903  |
| PURPOSE<br>OF<br>EXPENDITURE                                  | (a) Category (See Categories listed at the top of this schedule) Professional Services  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Professional Services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OF    | Candidate/Officeholder name Office sought Office held   |
| Forms provided by Toyas F                                     | hics Commission   |

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -Candidate/Officeholder/Political Committee **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement

Event Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Office Overhead/Rental Expense Polling Expense Food/Beverage Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 2/5 Rpt: 11/15 Zeller, Ben 4 Date Payee name 08/25/2022 Mint & Vine, LLC 6 Amount (\$) City; Payee address; State; Zip Code \$212.50 P.O. BOX 4784 Victoria, TX 77903 **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. Professional Servies 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 07/15/2022 Nicholson, Chris Amount (\$) Payee address; City; State; Zip Code \$231.42 P.O. BOX 1057 Galveston, TX 77553 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Reimbursement Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimbursement of personal expenses related to Ben Zeller Campaign activities Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/15/2022 Nicholson, Chris Amount (\$) Payee address: City; State; Zip Code \$1,383.75 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. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) 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: 12/15 Zeller, Ben 4 Date Payee name 12/15/2022 Nicholson, Chris 6 Amount (\$) Payee address; State; Zip Code City; \$888.75 P.O. BOX 1057 Galveston, TX 77553 **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. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/06/2022 Resolute Media Solutions, LLC Amount (\$) Payee address; City; State; Zip Code \$252.20 321 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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/01/2022 Resolute Media Solutions, LLC Amount (\$) Payee address; City; State; Zip Code \$156.12 321 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** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement

Food/Beverage Expense Legal Services

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

Gift/Awards/Memorials Expense OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 2 3 Filer ID Sch: 4/5 Rpt: 13/15 Zeller, Ben Date Payee name 07/15/2022 UPS Store - Victoria 6 Amount (\$) Payee address; State; Zip Code \$872.83 8806 N. Navarro St. Victoria, TX 77904 **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. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Printing expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/15/2022 UPS Store - Victoria Payee address; Amount (\$) City; State; Zip Code \$894.86 8806 N. Navarro St. Victoria, TX 77904 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Printing Expense EXPENDITURE Check if Austin, TX, officeholder living expense **Printing Expense** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/29/2022 **US** Postmaster Amount (\$) Payee address; City; State; Zip Code \$300.00 TΧ **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Postage Expense Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense
Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/5 Rpt: 14/15 Zeller, Ben 4 Date Payee name 07/25/2022 Victoria County Volunteer Fire Department 6 Amount (\$) Payee address; City; State; Zip Code \$100.00 25 Hanger Dr. N Victoria, TX 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Donation Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/11/2022 Zeller, Ben Amount (\$) Payee address; City; State; Zip Code \$2,941.60 P.O. BOX 4871 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. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimbursement of c/oh expenses made from personal funds during prior reporting period. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

### SCHEDULE K

|                           |      |  |            | - CONTRIBOTIONS REPORTED TO FILER |                                     |  |  |  |  |  |
|---------------------------|------|--|------------|-----------------------------------|-------------------------------------|--|--|--|--|--|
| The Instru                | ıcti | on Guide explains how to complete this form.   |            | 1                                 | pages Schedule K:<br>1/1 Rpt: 15/15 |  |  |  |  |  |
| FILER NAME<br>Zeller, Ben |      |  |            | 3 Filer II                        | O                                   |  |  |  |  |  |
| Date<br>12/31/2022        |      | Name of person from whom amount is received<br>Navy Army, CCU                                |            |                                   | 8 Amount (\$)<br>\$483.18           |  |  |  |  |  |
|                           | 6    | Address of person from whom amount is received; City; State; Zip C<br>2207 N. HWY 35, Ste. E | Code       | •••••                             | •                                   |  |  |  |  |  |
|                           |      | Rockport, TX 78382   |            |                                   |                                     |  |  |  |  |  |
|                           | 7    | Purpose for which amount is received Dividends & Interest during reporting period            | Check if p | olitical cont                     | ribution returned to filer          |  |  |  |  |  |
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