CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		1		
The C/OH Instruction	Guide explains how to complete	e this form.		2 Total pages filed:
				11
3 CANDIDATE / OFFICEHOLDER	888	FIRST	MI	OFFICE USE ONLY
NAME	E	Ben		Date Received
				ALSIA.
	NICKNAME L	_AST	SUFFIX	1000
		Zeller		1762500
4 CANDIDATE /	ADDRESS / PO BOX; APT / S		ZID CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER	P.O. BOX 4871	SUITE #, CITY,	ZIP CODE	Date Hand-delivered of Date Positialized
MAILING ADDRESS	F.O. BOX 4071			Receipt # Amount
Change of Address	Vi-ti- TV 77000			
Charge of Address	Victoria, TX 77903			Date Processed
				1/14/24 1100/
				Dayle Imaged Me
5 CAMPAIGN	MS / MRS / MR F			1
TREASURER	MS/MKS/MK	FIRST	MI	
NAME			2	
		Daviel	لا	
	NICKNAME L	AST	SUFFIX	
		· · · · · · · · · · · · · · · · · · ·		
6 CAMPAIGN	STREET ADDRESS (NO PO BO	OX PLEASEN: APT /	CITY:	OTATE: 7ID CODE
TREASURER	STREET ADDICESS (NOT O BY	JX PLEASE), AFT.	SUITE #; CITY;	STATE; ZIP CODE
ADDRESS				
(Residence or Business)				
		Ule3 Paco Rd.		
		Ulez Paco Rd. Victoria TX 7- NUMBER EXTENSION	790(
7 CAMPAIGN	AREA CODE PHONE	NUMBER EXTENSION)1 - (
TREASURER PHONE				
		361-571-6302		
8 REPORT TYPE		·		00
TYPE	X January 15	30th day before election Ru	unoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before election Ex	xceeded modified	Final Report (Attach C/OH-FR)
			porting limit	Tilla Neport (Maeir 5, 51 ,
9 PERIOD	Month Day Year		Month Day	Year
COVERED	07/01/2024	THROUGH	12/31/2024	
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
		General	Special	_
		L	25. 1	
11 OFFICE	OFFICE HELD (if any)	1	L2 OFFICE SOUGHT (i	if known)
231,000 50004000. Myst regar control	County Judge		County Judge	ii kile,
	7525 JANEY		Street Astronomic Marginia 💆 - Interview Street Inches	
		GO TO PAGE 2		
		00 10 17.02 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

				2 of 11						
13 C / OH NAME	Zeller, Ben	14	1 Filer ID							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures These expenditures may have been made without the I officeholders are required to report this information of	candidate's or officehol	lder's knowledge or						
Additional Pages	COMMITTEE TYPE	CQMMITTEE NAME								
	GENERAL									
		COMMITTEE ADDRESS								
	SPECIFIC									
		COMMITTEE CAMPAIGN TREASURER NAME								
		COMMITTEE CAMPAIGN TREASURER ADDRESS								
20.000										
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMI OR GUARANTEI	ZED POLITICAL CONTRIBUTIONS (OTHER THAN F ES OF LOANS, OR CONTRIBUTIONS MADE ELECT		\$ 0.00						
	[[[[[[[[[[[[[[[[[[[AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 2,200.00						
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 2,013.99						
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 10,742.71						
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS	T DAY OF THE	\$ 142,271.81						
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS OF TING PERIOD	THE LAST DAY	\$ 0.00						
17 AFFIDAVIT										
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. MARILYN DAVIS NOTARY PUBLIC STATE OF TEXAS MY COMM. EXP. 06/28/26 NOTARY ID 745455-0 Sign attre of Candidate or Officeholder										
AFFIX NO	TARY STAMP / SEAL ABO	OVE	•	ILI the						
Sworn to and subso	Sworn to and subscribed before me, by the said									
Moule Signature of office	A Dains er administering	Printed name of officer administering	Deputy E	Lections Admon ministering oath						

Afel

CALL TO ACT

A You X as

SUBTOTALS - C/OH

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

			3 of 11
	19 Filer ID		
		SUBTOTAI	L AMOUNT
ONTRIBUTIONS		\$	2,200.00
)) POLITICAL CONTRIBUTIONS		\$	
s		\$	
		\$	0.00
S FROM POLITICAL CONTRIBUTION	s	\$	10,742.71
GATIONS		\$	
ENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
CREDIT CARD		\$	
S FROM PERSONAL FUNDS		\$	0.00
L CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
RES FROM POLITICAL CONTRIBUTION	ONS	\$	
5, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$	3,028.35
	GATIONS ENTS FROM POLITICAL CONTRIBUTION Y CREDIT CARD S FROM PERSONAL FUNDS AL CONTRIBUTIONS TO A BUSINESS URES FROM POLITICAL CONTRIBUTION	CONTRIBUTIONS D) POLITICAL CONTRIBUTIONS ES FROM POLITICAL CONTRIBUTIONS GATIONS ENTS FROM POLITICAL CONTRIBUTIONS Y CREDIT CARD S FROM PERSONAL FUNDS AL CONTRIBUTIONS TO A BUSINESS OF C/OH JRES FROM POLITICAL CONTRIBUTIONS S. REFUNDS, AND CONTRIBUTIONS RETURNED	SUBTOTAL CONTRIBUTIONS \$ D) POLITICAL CONTRIBUTIONS \$ \$ \$ \$ \$ SES FROM POLITICAL CONTRIBUTIONS \$ SATIONS \$ Y CREDIT CARD \$ S FROM PERSONAL FUNDS \$ AL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ URES FROM POLITICAL CONTRIBUTIONS \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.		Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
2	FILER NAME Zeller, Ben			_	Filer ID	
4	Date 07/25/2024	5 Full name of contributor out-of-state PAC (ID# McNeill, Dr. John & Mrs. 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,200.00
		Victoria, TX				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		

LOANS					SCHE	DULE	E
The Instruction Guide explains how to complete this form.	1			es Sche Rpt: 5			
2 FILER NAME Zeller, Ben	3	File	r ID	34			
TOTAL OF UNITEMIZED LOANS			,	\$			0.00
5 Date of loan 7 Name of lander out-of-state PAC (ID#:				9 Loan	Amount	(\$)	
6 Is lender a financial institution? 8 Lender address, City; State; Zip Code					est Rate		
				11 Matu	ırity Date		
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instruction	ns)						
14 Description of Collateral None 15 Check if personal funds w	vere o	depo	sited i		ical accou		
16 GUARANTOR INFORMATION 17 Name of guarantor	<u> </u>			19 Amo	unt Guara	anteed	(\$)
not applicable 18 Guarantor address; City; State; Zip Code							
20 Principal occupation 21 Employer (See Instruction	ns)		•				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 1/5 Rpt: 6/11	Zeller, Ben				
4	Date	5 Payee name				
	08/01/2024	Brittany's Belivers				
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code				
L		Victoria, TX				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) non-profit donation (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense non-profit donation				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
Γ	Date	Payee name				
	10/11/2024	CHEC Cobra Athletics				
	Amount (\$) \$100.00	Payee address; City; State; Zip Code				
		Victoria, TX				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Homeschool athletics fundraiser (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Homeschool athletics fundraiser				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
8	Date 09/23/2024	Payee name Catholic War Veterans, Post 1269				
	Amount (\$) \$100.00	Payee address; City; State; Zip Code				
L		TX				
	PURPOSE OF 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 <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID		
	Sch: 2/5 Rpt: 7/11	Zeller, Ben				
4	Date	5 Payee name		·		
	10/15/2024	God's Church				
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Co	ode			
8	PURPOSE					
8	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Church Fundraiser	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church Fundraiser		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ight	Office held		
	Date	Payee name				
	08/20/2024	Mint & Vine, LLC				
	Amount (\$) \$324.84	Payee address; City; State; Zip Co P.O. BOX 4784	ode			
		Victoria, TX 77903				
	PURPOSE OF 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/Oh	Candidate/Officeholder name Office sou	ght	Office held		
	Date	Payee name				
	08/19/2024	Nicholson, Chris				
	Amount (\$) \$1,694.05	Payee address; City; State; Zip Co P.O. BOX 1057 Galveston, TX 77553	de			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Reimbursement		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou	ght	Office held		
For	ms provided by Texas Et	hirs Commission www.athics.ctata.tv.u				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to co	es/Contract La plete this for	,	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID	
L	Sch: 3/5 Rpt: 8/11	Zeller, Ben			
4		5 Payee name		•	
	12/10/2024	Nicholson, Chris			
6	Amount (\$)	7 Payee address; City; State; Zip Co			
	\$427.50	P.O. BOX 1057			
		Galveston, TX 77553			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)) Descripti	on	
	OF EXPENDITURE	Contract Labor		f travel outside of Texas. Complete Schedule T.	
			1	f Austin, TX, officeholder living expense	
			Contrac	Labor	
9	Complete ONLY if direct	Candidate/Officeholder name Office sou		Office hald	
Ĭ	expenditure to benefit C/O		t	Office held	
-	5.42				
	Date 07/09/2024	Payee name			
	07/08/2024	Resolute Media Solutions, LLC			
	Amount (\$)	Payee address; City; State; Zip Co			
	\$141.83	321 Schubert Rd.			
		Victoria , TX 77905			
_	DUDDOCE				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Descripti	on	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Professional Services	Check i	travel outside of Texas. Complete Schedule T.	
	OF		Check i	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
	OF		Check i	travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Professional Services	Check i Check i	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF	Professional Services Candidate/Officeholder name Office sour	Check i Check i	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Professional Services Candidate/Officeholder name Office sought	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Professional Services Candidate/Officeholder name Office sough	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024	Payee name Resolute Media Solutions, LLC	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 12/17/2024 Amount (\$)	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024	Payee name Resolute Media Solutions, LLC	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 12/17/2024 Amount (\$)	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd.	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 12/17/2024 Amount (\$)	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod	Check i Check i Professi	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule)	Check in Check in Check in Profession	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense onal Services Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 12/17/2024 Amount (\$) \$200.16	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd.	Check i Check i Professi	itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense onal Services Office held on travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule)	Check if Che	on Itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Office held Office held Itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16	Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule)	Check if Che	itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense onal Services Office held on travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cod 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule) Professoinal Services	Check in profession	on travel outside of Texas. Complete Schedule T. Office held Office held Office held On travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16	Candidate/Officeholder name Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cor 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule) Professoinal Services Candidate/Officeholder name Office source	Check in profession	on Itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Office held Office held Itravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cor 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule) Professoinal Services Candidate/Officeholder name Office source	Check in profession	on travel outside of Texas. Complete Schedule T. Office held Office held Office held On travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 12/17/2024 Amount (\$) \$200.16 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name Resolute Media Solutions, LLC Payee address; City; State; Zip Cor 321 Schubert Rd. Victoria , TX 77905 (a) Category (See Categories listed at the top of this schedule) Professoinal Services Candidate/Officeholder name Office source	Check in profession	on travel outside of Texas. Complete Schedule T. Office held Office held Office held On travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Onal Services	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 4/5 Rpt: 9/11	Zeller, Ben
4	Date	5 Payee name
	09/28/2024	St. Patrick's Catholic Church
6	Amount (\$) \$515.00	7 Payee address; City; State; Zip Code Bloomington , TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Auction Item / church fundraiser (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Auction item / church fundraiser
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/19/2024	UPS Store - Victoria
	Amount (\$) \$2,925.34	Payee address; City; State; Zip Code 8806 N. Navarro St.
		Victoria, TX 77904
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense invoice from June 2024 event & activities
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/02/2024	Victoria Bach Festival
	Amount (\$) \$500.00	Payee address; City; State; Zip Code
		Victoria, TX
	PURPOSE OF 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 <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made B: Candidate/Officeholder/Politica Credit Card Payment	y - al Co	SOUTH STATE OF THE	nse Po ls Expense Pr	ffice Overhea olling Expensi inting Expensi alaries/Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME		- 10 00		2	Filer ID
	Sch: 5/5 Rpt: 10/11	-	Zeller, Ben				3	Filer ID
4	Date	5	Payee name					
L	12/09/2024		Victoria County Republicar	n Party				
6	Amount (\$) \$1,200.00	7	Payee address; City;	State; Z	ip Code			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at Table Sponsorship for Gala		(b)		TX,	de of Texas. Complete Schedule T. officeholder living expense hip for Gala
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Η (Candidate/Officeholder name	Offic	e sought			Office held

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

SCHEDULE K

	The Instru	cti	ages Schedule K: ./1 Rpt: 11/11			
2	FILER NAME Zeller, Ben			3 Filer ID)	
4	Date 12/31/2024	ļ	Name of person from whom amount is received Cal-Com FCU Address of person from whom amount is received; City; State; Zip Code		8 Amount (\$)	\$557.84
		7	Victoria, TX 77904 Purpose for which amount is received	olitical cont	ribution returned to f	iler
	Date 12/31/2024		Name of person from whom amount is received Rally Credit Union Address of person from whom amount is received; City; State; Zip Code 2207 N. HWY 35, Ste. E Rockport, TX 78382		Amount (\$)	\$2,470.51
			Purpose for which amount is received	olitical cont	ribution returned to f	ïler