

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

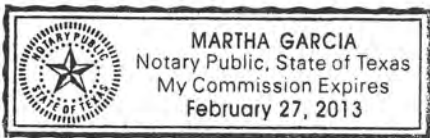
14 C/OH NAME Jimmy Bennett 15 ACCOUNT # (Ethics Commission Filers)

16 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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,150.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ -
	4	TOTAL POLITICAL EXPENDITURES	\$ -
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 13,731.00
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,000.00

18 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.

Jimmy Bennett
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jimmy Bennett, this the 4th day of May, 20 12, to certify which, witness my hand and seal of office.

Martha Garcia
Signature of officer administering oath

MARTHA GARCIA
Printed name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Jimmy Bennett

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/12

5 Full name of contributor out-of-state PAC (ID# _____)

Mike Moore

7 Amount of contribution (\$)

1500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

*1110 N. WATSON ROAD
ARLINGTON TX 76011*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/19/12

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

TERESA MOORE

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*3616 WATONGA ST.
FORT WORTH, TX 76017*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

JAMES LIGHTNER

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*5070 PINYON ST.
LITTLETON, CO 80123*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

JEFF & KAREN WILLIAMS

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*6948 POLY WESS RD,
ARLINGTON, TX 76016*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

SCOTT HOWELL

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*3900 WILLOW ST, STE 200
DALLAS, TX 75226*

(If travel outside of Texas, complete Schedule T)

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

Jimmy Bennett

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/12

5 Full name of contributor out-of-state PAC (ID# _____)

BRAD & JOY RYAN

6 Contributor address; City; State; Zip Code

*2210 RIVER RIDGE RD.
ARLINGTON, TX 76017*

7 Amount of contribution (\$)

1250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/19/12

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

TREPAC

Contributor address; City; State; Zip Code

*P.O. Box 2246
AUSTIN, TX 78768*

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

CLIFFORD MYLOSTKIE

Contributor address; City; State; Zip Code

*1409 WOODBINE CT.
ARLINGTON, TX 76012*

Amount of contribution (\$)

1200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

ROGER & CATHERINE MCGINNIS

Contributor address; City; State; Zip Code

*7407 MIDWAY DR.
DALLAS, TX 75230*

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

GEORGE & CYNTHIA STRAUGHN

Contributor address; City; State; Zip Code

*4201 SOUTH BELLAIRE CIRCLE
CHERRY HILLS VILLAGE, CO 80113*

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

Jimmy Bennett

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/12

5 Full name of contributor out-of-state PAC (ID# _____)

MAURICE BARKSDALE

6 Contributor address, City, State, Zip Code

2400 TABLE ROCK CT.
ARLINGTON, TX 76006

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/19/12

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

NICHOLAS & BISH STEFANOVICH

Contributor address, City, State, Zip Code

6310 EDINBURGH DR.
COLLEVILLE, TX 76034

Amount of contribution (\$)

\$400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

LONNIE & TERESA WARREN

Contributor address, City, State, Zip Code

2725 COUNTRY CLUB RD.
ARLINGTON, TX 76013

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

EDWARD & GRACE McDERMOTT

Contributor address, City, State, Zip Code

2114 FRANKLIN DR.
ARLINGTON, TX 76011

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

MPAC ARLINGTON

Contributor address, City, State, Zip Code

P.O. Box 174474
ARLINGTON, TX 76003

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME

Jimmy Bennett

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/12

5 Full name of contributor out-of-state PAC (ID# _____)

STEVEN JONES

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3900 MIRAMAR AVE.
DALLAS, TX 75205

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/19/12

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

RAYMOND & SHARON GOMEZ

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

213 STOCKTON DR.
SOUTHLAKE, TX 76092

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

CHARLES & MARY BEADY

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1919 ALAN A DALE RD.
ARLINGTON TX 76013

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

PHILLIS R. PETERS

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5104 TIMBER COVE CT.
ARLINGTON TX 76017

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/19/12

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

JAMES & KAREN BASS

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2209 MONARCH DRIVE
ARLINGTON, TX 76006

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A

2 FILER NAME

JIMMY BENNETT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/19/12

5 Full name of contributor out-of-state PAC (ID# _____)

BRANDON & GARA HILL

6 Contributor address; City; State; Zip Code

*4170 LA VAUSE ST.
GRAND PRAIRIE, TX 75052*

7 Amount of contribution (\$)

\$150.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/27/12

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

BARNA RICHARDS

Contributor address; City; State; Zip Code

*P.O. Box 279
ARLINGTON TX 76004*

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/12

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

GARY WALTER

Contributor address; City; State; Zip Code

*255 N. CENTER ST., SUITE 200
ARLINGTON, TX 76011*

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/12

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

DAVID DANG & DAO TRUY

Contributor address; City; State; Zip Code

*8441 EMERALD CIRCLE
NORTH RICHLAND HILLS, TX 76180*

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/12

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

WILBER RODRIGUEZ

Contributor address; City; State; Zip Code

*1813 ELMHURST DR.
ARLINGTON, TX 76012*

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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SCHEDULE A

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1 Total pages Schedule A:

2 FILER NAME

JIMMY BENNETT

3 ACCOUNT # (Ethics Commission Filers)

4 Date

4/30/12

5 Full name of contributor out-of-state PAC (ID# _____)

Wau-z-Wau Home Inspections

6 Contributor address; City; State; Zip Code

*709 Gunnison Ct.
ARLINGTON TX 76002*

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/12

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

MR. & MRS. WAYNE JAMES

Contributor address; City; State; Zip Code

*P.O. Box 121367
ARLINGTON TX 76012*

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/12

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

ROBERT MAHONEY

Contributor address; City; State; Zip Code

*4113 SHADY VALLEY DR.
ARLINGTON TX 76013*

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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