

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

5206

FORM C/OH  
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)  
*N/A*

2 Total pages filed:  
*5*

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Mr. NICKNAME: "Wes"  
FIRST: Robert LAST: Benedict  
MI: C SUFFIX: Jr.

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX: P.O. Box 41059 APT / SUITE #: CITY: Austin, TX STATE: ZIP CODE: 78704

Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: Mr. NICKNAME: "Wes"  
FIRST: Robert LAST: Benedict  
MI: C SUFFIX: Jr.

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE:

*1403-B Kenwood Ave, Austin, TX 78704*

7 CAMPAIGN TREASURER PHONE

AREA CODE: PHONE NUMBER: EXTENSION:

*(512) 442-4910*

8 REPORT TYPE

January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)  
 July 15  8th day before election  Exceeded \$500 limit  Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 1 / 1 / 02 THROUGH Month Day Year: 6 / 30 / 02

10 ELECTION

ELECTION DATE: Month Day Year: 11 / 5 / 2002  
ELECTION TYPE:  Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

*Travis County Commissioner, Pct. 4*

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

*N/A*

Address / PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Robert C. "Wes" Benedict, Jr.

15 ACCOUNT # (Ethics Commission filers)

N/A

16 NOTICE FROM POLITICAL COMMITTEE(S)

\*\* This box is for notice of political expenditures 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

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

N/A

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 NO REPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ N/A

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 150.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ N/A

4. TOTAL POLITICAL EXPENDITURES

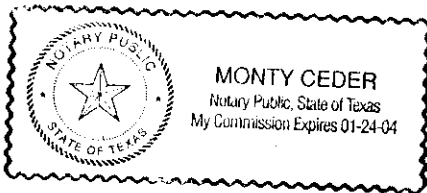
\$ 796.28

OUTSTANDING LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ N/A

19 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.

Robert C. W. Benedict, Jr.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Robert Benedict, this the 22<sup>nd</sup> day of July, 2002, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering oath

Monty Ceder

Printed name of officer administering oath

Notary

Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A1**  
(FOR FORMS C/OH, C/OH-SS, SC-C/OH,  
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages (this Schedule A1): **1**

2 FILER NAME: **Robert C. "Wes" Benedict, Jr.** 3 ACCOUNT # (Ethics Commission filers): **N/A**

4 Date: <b>6/10/02</b>	5 Full name of contributor: <b>Bruce White</b> <input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$): <b>\$100.00</b>	8 In-kind contribution description (if applicable):
6 Contributor address; City; State; Zip Code: <b>12932 SE Kent-Kungley Rd Kent, WA 98030</b>			

9 Principal occupation (Optional): **Councilmember** 10 Employer (Optional): **City Council, Kent, Washington**

Date: <b>5/6/02</b>	Full name of contributor: <b>Dennis M. Lucey</b> <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$): <b>\$25.00</b>	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: <b>4210 Red River St., Apt. 309 Austin, TX 78751-4344</b>			

Principal occupation (Optional): \_\_\_\_\_ Employer (Optional): \_\_\_\_\_

Date:	Full name of contributor: <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$):	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code:			

Principal occupation (Optional): \_\_\_\_\_ Employer (Optional): \_\_\_\_\_

Date:	Full name of contributor: <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$):	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code:			

Principal occupation (Optional): \_\_\_\_\_ Employer (Optional): \_\_\_\_\_

Date:	Full name of contributor: <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$):	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code:			

Principal occupation (Optional): \_\_\_\_\_ Employer (Optional): \_\_\_\_\_

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



**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: <b>3</b> <b>163</b>
2 FILER NAME <b>Robert C. "Wes" Benedict, Jr.</b>		3 ACCOUNT # (Ethics Commission filers)
4 Date <b>1/15/02</b>	5 Payee name <b>South Austin Copier</b> 6 Payee address; City; State; Zip Code <b>10030 Manchaca Rd, Austin, TX 78745</b>	8 Amount (\$) <b>\$ 3.00</b> <input type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) <b>Notary Campaign Treasurer Aft. Form</b>	
Date <b>2/11/02</b>	Payee name <b>South Austin Copier</b> Payee address; City; State; Zip Code <b>10030 Manchaca Rd, Austin TX 78745</b>	Amount (\$) <b>\$ 3.00</b> <input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) <b>Notary PFS form</b>	
Date <b>1/15/02</b>	Payee name <b>U.S. Postal Service</b> Payee address; City; State; Zip Code <b>3903 S Congress Ave. Austin TX 78704</b>	Amount (\$) <b>\$102.00</b> <input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) <b>Campaign Post Office Box</b>	
Date <b>2/11/02</b>	Payee name <b>U.S. Postal Service</b> Payee address; City; State; Zip Code <b>FM 1626, Manchaca, TX 78652</b>	Amount (\$) <b>\$ 1.26</b> <input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) <b>Personal Financial Statement Postage</b>	
Date <b>1/26/02</b>	Payee name <b>People Have the Power</b> Payee address; City; State; Zip Code <b>The Tony Burger Center, 3200 Jones Road, Austin TX</b>	Amount (\$) <b>\$15.00</b> <input type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) <b>Admission Ticket for Ralph Nader Event &amp; my booth</b>	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 3 2013

2 FILER NAME  
Robert C. "Wes" Benedict, Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date <u>2/10/02</u>	5 Payee name <u>Target</u> 6 Payee address; City; State; Zip Code <u>6405 S. IH 35, Austin, TX 78744</u> 7 Purpose of expenditure (See instructions regarding type of information required.) <u>Frame for campaign booth, disposable cameras</u>	8 Amount (\$) <u>\$31.34</u> <input type="checkbox"/> Reimbursement from political contributions intended
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Date <u>3/23/02</u>	Payee name <u>Rolling Thunder Down Home Democracy Tour</u> Payee address; City; State; Zip Code <u>Travis County Expo Center 7311 Decker Lane, Austin, TX 78724</u> Purpose of expenditure (See instructions regarding type of information required.) <u>Admission Ticket for Campaign Booth</u>	Amount (\$) <u>\$5.00</u> <input type="checkbox"/> Reimbursement from political contributions intended
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Date <u>3/3/02</u>	Payee name <u>Office Depot</u> Payee address; City; State; Zip Code <u>2101 South Lamar, Austin, TX 78704</u> Purpose of expenditure (See instructions regarding type of information required.) <u>Label Dots for World's Smallest Political Quiz Survey</u>	Amount (\$) <u>\$25.28</u> <input type="checkbox"/> Reimbursement from political contributions intended
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Date <u>2/9/02</u>	Payee name <u>Advocates for Self-Government</u> Payee address; City; State; Zip Code <u>1202 N. Tennessee St. Suite 202 Cartersville, GA 30120</u> Purpose of expenditure (See instructions regarding type of information required.) <u>Libertarian literature</u>	Amount (\$) <u>\$78.95</u> <input type="checkbox"/> Reimbursement from political contributions intended
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Date <u>1/31/02</u>	Payee name <u>Accent Annex Enterprises</u> Payee address; City; State; Zip Code <u>1420 Sams Ave., Suite F New Orleans, LA 70123</u> Purpose of expenditure (See instructions regarding type of information required.) <u>Baby trinket souvenirs</u>	Amount (\$) <u>\$35.00</u> <input type="checkbox"/> Reimbursement from political contributions intended
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**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form. 1 Total pages Schedule G: 3 *3 of 3*

2 FILER NAME: *Robert C. "Wes" Benedict, Jr.* 3 ACCOUNT # (Ethics Commission filers): *167*

4 Date	5 Payee name <i>Office Depot</i>	8 Amount (\$)
	6 Payee address; City; State; Zip Code <i>2101 South Lamar Austin, TX 78704</i>	<i>\$108.47</i>
<i>4/30/02</i>	7 Purpose of expenditure (See instructions regarding type of information required.) <i>Campaign booth display stands &amp; materials</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name <i>Wal-Mart</i>	Amount (\$)
	Payee address; City; State; Zip Code <i>5015 S IH 35 Austin, TX 78744</i>	<i>\$21.56</i>
<i>4/15/02</i>	Purpose of expenditure (See instructions regarding type of information required.) <i>Air horns for Tax Day Protest</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name <i>International Society for Individual Liberty</i>	Amount (\$)
	Payee address; City; State; Zip Code <i>836-B Southampton Rd, #289 Benicia, CA 94510-1960</i>	<i>\$107.04</i>
<i>4/30/02</i>	Purpose of expenditure (See instructions regarding type of information required.) <i>Libertarian Literature to handout</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name <i>Custom Quality, Alamo</i>	Amount (\$)
	Payee address; City; State; Zip Code <i>303 FM 1626 Austin TX 78748</i>	<i>\$159.35</i>
<i>4/29/02</i>	Purpose of expenditure (See instructions regarding type of information required.) <i>Campaign handout printing, 1000 copies</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name <i>Republic of Texas Biker Rally</i>	Amount (\$)
	Payee address; City; State; Zip Code <i>6218 Liberty Hill Dallas, TX 75248</i>	<i>\$100.00</i>
<i>5/15/02</i>	Purpose of expenditure (See instructions regarding type of information required.) <i>Campaign Booth fee</i>	<input type="checkbox"/> Reimbursement from political contributions intended

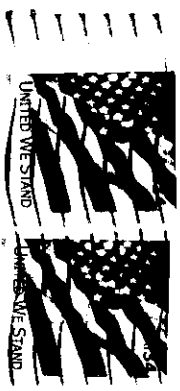
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

*7-6-25*

Robert Benedict  
PO Box 41059  
Austin, TX 78704

Travis County Courthouse  
PO Box 1748  
Austin, TX 78767

Blacks  
222



78767/1748