

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

6936

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

12

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI
Mr Robert C
NICKNAME LAST SUFFIX
Wes Benedict Jr

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO BOX 41446 Austin TX 78704

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 442-4910

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
Mr Robert C
NICKNAME LAST SUFFIX
Wes Benedict Jr

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
3816 S Lamar Blvd #3822 Austin TX 78704

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 442-4910

9 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)

10 PERIOD COVERED

Month Day Year Month Day Year
1 / 23 / 08 THROUGH 6 / 30 / 08

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year
Nov / 4 / 2008 Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Travis County Commissioner, Pet 3

14 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

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**

15 C/OH NAME Robert C Wes Benedict Jr 16 ACCOUNT # (Ethics Commission Filers)

17 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 NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 55.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,606.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,600.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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 Benedict Jr
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said ROBERT CHARLES BENEDICT this the 15th day of JULY, 2008, to certify which, witness my hand and seal of office.

Leah Baize LEAH BAIZE NOTARY PUBLIC
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form.		1 Total pages Schedule G: 2
2 FILER NAME Robert C. Benedict		3 ACCOUNT # (Ethics Commission filers)
4 Date 2/24/08	5 Payee name Office Depot 6 Payee address; City; State; Zip Code 2101 S Lamar Blvd Austin TX 78704	8 Amount (\$) 12.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	7 Purpose of expenditure (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T)	
Date 2/25/08	Payee name XPEDX Payee address; City; State; Zip Code 6100 Airport Blvd, Austin TX 78752	Amount (\$) 36.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T)	
Date 3/23/08	Payee name Dreamhost Payee address; City; State; Zip Code PMB#257, 417 Associate Rd Brea CA 92821	Amount (\$) 119.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) website (If travel outside of Texas, complete Schedule T)	
Date 4/22/08	Payee name Office Depot Payee address; City; State; Zip Code 2101 S Lamar Blvd Austin TX 78704	Amount (\$) 47.60 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) office supplies (If travel outside of Texas, complete Schedule T)	
Date 4/24/08	Payee name U.S. Postal Service Payee address; City; State; Zip Code South Congress Station Austin TX 78704	Amount (\$) 492.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
	Purpose of expenditure (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T)	

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:

2 FILER NAME

Robert C. Benedict

3 ACCOUNT # (Ethics Commission filers)

4 Date

*5/3/08
2/24/08*

5 Payee name

County Line On the Hill

6 Payee address; City; State; Zip Code

5600 W Bee Cave Rd Austin TX 78746

8 Amount (\$)

898.13

7 Purpose of expenditure (See instructions regarding type of information required.)

*Campaign kick-off party with 45 attendees
(If travel outside of Texas, complete Schedule T)*

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Purpose of expenditure (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

Amount (\$)

Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **8**

2 FILER NAME
Robert C. Wes Benedict, Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date
4/28/08

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

7 Amount of contribution (\$) **50.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
**1036 Hemlock Dr
Blue Bell PA 19422**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date
5/13/08

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

Amount of contribution (\$) **25.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**116 N Tumbleweed Trl
Austin TX 78733**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
5/13/08

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

Amount of contribution (\$) **25.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**1205 Wilson Hts
Austin TX 78746**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
5/13/08

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

Amount of contribution (\$) **25.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**1311 July Dr
Austin TX 78753**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
5/13/08

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

Amount of contribution (\$) **50.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
**1404 W 30th St
Austin TX 78703**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM 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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Robert C. Wes Benedict, Jr.		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/3/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Hacker	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1427 St. Croix Ln Pflugerville TX 78660		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Curtis	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1500 S Shore Rd Dustrop TX 78602		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'anne Welch	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1685 Peyton Colony Rd Blanco TX 78606		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Ford Jr	Amount of contribution (\$) 15.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1750 Timber Ridge Apt 116 Austin TX 78741		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel Osemene	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1811 Gracy Farms Austin TX 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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**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 Robert C. Wes Benedict, Jr.		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/3/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Barris	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1923 Ravenscroft Dr Austin TX 78748		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Johnson	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2001 Parker Ln #134 Austin TX 78741		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chuck Young	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2201 A Chasewych Pt Austin TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert Howard	Amount of contribution (\$) 40.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2707 Pinewood Ter Austin TX 78757		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Russell Doyle	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3431 N Hills Dr #218 Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
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**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 Robert C. Wes Benedict, Jr.		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/3/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Burwell	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3616 Far West Blvd # 117-338 Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeff Liygel	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3700 Elder Rd Driftwood TX 78619		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim Kilpatrick	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3801 Manchaca Rd # 56 Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yvonne Schizik	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4105 Crawford Rd Spicewood TX 78669		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laura Coss	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4616 Yellow Rose Trl Austin TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM 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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Robert C. Wes Benedict, Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date
5/3/08

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

Patrick Dixon

6 Contributor address; City; State; Zip Code

5002 Sundown St
Lago Vista TX 78645

7 Amount of contribution (\$)

50.00

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

5/1/08

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

Frederick Drew

Contributor address; City; State; Zip Code

53 West Maple Circle
Brownsville TX 78521

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

5/3/08

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

Jason Colquitt

Contributor address; City; State; Zip Code

5417 S MoPac Expy Apt 302
Austin TX 78749

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/27/08

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

Jeannon Kralj

Contributor address; City; State; Zip Code

5644 Wagon Train
Austin TX 78749

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/08

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

Stephen Alexander

Contributor address; City; State; Zip Code

5912 Cannon Mountain Dr
Austin TX 78749

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)

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**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

Robert C. Wes Benedict, Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date
5/3/08

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

6 Contributor address; City; State; Zip Code
5912 Cannon Mountain Dr
Austin TX 78749

7 Amount of contribution (\$)
50.00

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
5/3/08

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

Contributor address; City; State; Zip Code
6106 Yellow Rose Cv
Austin TX 78749

Amount of contribution (\$)
30.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
5/3/08

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

Contributor address; City; State; Zip Code
619 Finar Truck Ln
Austin TX 78704

Amount of contribution (\$)
25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
5/3/08

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

Contributor address; City; State; Zip Code
7000 Robert Dixon Dr
Austin TX 78749

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
5/3/08

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

Contributor address; City; State; Zip Code
7000 Robert Dixon Dr
Austin TX 78749

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)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**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

Robert C. Wes Benedict, Jr.

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/26/08

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

Givish Altker

6 Contributor address; City; State; Zip Code

7301 Burrell Rd. #102-180
Austin TX 78757

7 Amount of contribution (\$)

50.00

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

5/13/08

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

Patrick Barton

Contributor address; City; State; Zip Code

7655 N FM 620 #232
Austin TX 78726

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/08

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

James Strohan

Contributor address; City; State; Zip Code

7655 N FM 620 Apt #336
Austin TX 78726

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/08

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

Roxanna Menger

Contributor address; City; State; Zip Code

7655 RR 620 N #336
Austin TX 78726

Amount of contribution (\$)

35.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/13/08

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

Chalon Dilber

Contributor address; City; State; Zip Code

808 Milam Pl
Austin TX 78704

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**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 <i>Robert C. Wes Benedict, Jr.</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>5/3/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark Phillips</i>	7 Amount of contribution (\$) <i>25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>8500 Cockney Dr Austin TX 78748</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>5/3/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David De Groot</i>	Amount of contribution (\$) <i>100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>9300 Elm Grove Cir Austin TX 78736</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/3/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Eugene Stevens</i>	Amount of contribution (\$) <i>25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>PO Box 33086 Austin TX 78764</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

Robert C. Wes Benedict
PO Box 41446
Austin TX 78704

FOR FILING
16 P 11 39
COUNTY CLERK
TRAVIS COUNTY TEXAS

Travis County Elections
PO Box 149325
Austin TX 78714-9325

