

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>8</b>										
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR FIRST MI Mr Lloyd B			<b>OFFICE USE ONLY</b>										
	NICKNAME LAST SUFFIX Brandon Dodd			Date Received <b>FILED FOR RECORD</b> UPSHUR COUNTY, TEXAS										
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>214 Private Road 3035, Big Sandy, TX 75755</b>			<b>JAN 16 2026</b>										
<b>5 CANDIDATE/ OFFICEHOLDER PHONE</b>	AREA CODE <b>( 903 )</b>	PHONE NUMBER <b>315-7120</b>	EXTENSION	LORY HARLE ELECTIONS ADMINISTRATOR BY <b>SJ</b> DEPUTY Date Hand-delivered or Date Postmarked										
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR FIRST MI self	NICKNAME LAST SUFFIX		Date Processed										
<b>7 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; <b>214 Private Rd 3035, Big Sandy, TX 75755</b>			STATE; ZIP CODE										
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE <b>( 903 )</b>	PHONE NUMBER <b>315-7120</b>	EXTENSION	Date Imaged										
<b>9 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)										
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)										
<b>10 PERIOD COVERED</b>	Month <b>7</b>	Day <b>/ 1</b>	Year <b>/ 25</b>	Month <b>12</b>	Day <b>/ 31</b>	Year <b>/ 25</b>								
<b>11 ELECTION</b>	ELECTION DATE  Month <b>3</b> Day <b>/ 3</b> Year <b>/ 26</b>	ELECTION TYPE  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special _____												
<b>12 OFFICE</b>	OFFICE HELD (if any)			<b>13 OFFICE SOUGHT (if known)</b> <b>Upshur County Judge</b>										
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>  Additional Pages	<p>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.</p> <table border="1"> <tr> <td>COMMITTEE TYPE  <input type="checkbox"/> GENERAL</td> <td>COMMITTEE NAME</td> </tr> <tr> <td colspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>						COMMITTEE TYPE  <input type="checkbox"/> GENERAL	COMMITTEE NAME	COMMITTEE ADDRESS		COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS	
COMMITTEE TYPE  <input type="checkbox"/> GENERAL	COMMITTEE NAME													
COMMITTEE ADDRESS														
COMMITTEE CAMPAIGN TREASURER NAME														
COMMITTEE CAMPAIGN TREASURER ADDRESS														

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

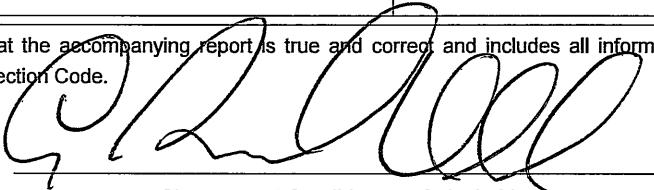
## FORM C/OH COVER SHEET PG 2

15 C/OH NAME  
L. Brandon Dodd

16 Filer ID (Ethics Commission Filers)

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 1,043.45
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 750.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 25.00
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

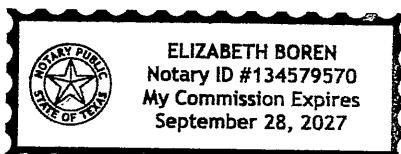
18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:

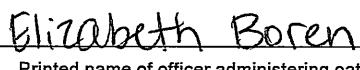
(1) Affidavit

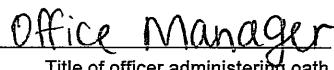


NOTARY STAMP/SEAL

Sworn to and subscribed before me by L. Brandon Dodd this the 15<sup>th</sup> day of January,  
20 26, to certify which, witness my hand and seal of office.

 Signature of officer administering oath

 Printed name of officer administering oath

 Office Manager  
Title of officer administering oath

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_  
(street) \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip code) \_\_\_\_\_ (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.  
(month) \_\_\_\_\_ (year) \_\_\_\_\_



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

<b>19 FILER NAME</b> L Brandon Dodd	<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS NAME OF SCHEDULE</b>	<b>SUBTOTAL AMOUNT</b>
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23.70
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 500.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 6,081.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1,793.45
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

If the requested information is not applicable, **DO NOT** include this page in the report.

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: <b>1</b>
<b>2</b> FILER NAME L Brandon Dodd		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 12/25/2025	<b>5</b> Full name of contributor Ben Taylor <b>6</b> Contributor address; - - - - -	<b>7</b> Amount of contribution (\$) <b>25.00</b>
<b>8</b> Principal occupation / Job title (See Instructions) stocker		<b>9</b> Employer (See Instructions) Walmart
Date	Full name of contributor - - - - - Contributor address; - - - - -	out-of-state PAC (ID#: - - - - -) City; State; Zip Code TX
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor - - - - - Contributor address; - - - - -	out-of-state PAC (ID#: - - - - -) City; State; Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor - - - - - Contributor address; - - - - -	out-of-state PAC (ID#: - - - - -) City; State; Zip Code
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>1</b>
<b>2 FILER NAME</b> <b>L Brandon Doddd</b>		<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</b>		<b>\$ 500.00</b>
<b>5 Date</b> 11/25/2025	<b>6 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: <b>Tiffany DeGala- The Dodd Estate</b> )  <b>7 Contributor address;</b> _____ <b>City;</b> _____ <b>State;</b> _____ <b>Zip Code</b> _____ TX	<b>8 Amount of Contribution \$</b> <b>500.00</b> <b>9 In-kind contribution description</b> use of venue for Political Campaign  Check if travel outside of Texas. Complete Schedule T.
<b>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</b>		<b>11 Employer (FOR NON-JUDICIAL) (See Instructions)</b>
<b>12 Contributor's principal occupation (FOR JUDICIAL)</b> <b>Attorney</b>		<b>13 Contributor's job title (FOR JUDICIAL) (See Instructions)</b>
<b>14 Contributor's employer/law firm (FOR JUDICIAL)</b> <b>PetVet365</b>		<b>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b> <b>widow</b>
<b>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>		
 <b>Date</b>  Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: .....  Contributor address; _____ City; _____ State; _____ Zip Code		<b>Amount of Contribution \$</b>  In-kind contribution description  Check if travel outside of Texas. Complete Schedule T.
<b>Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)</b>		<b>Employer (FOR NON-JUDICIAL) (See Instructions)</b>
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL) (See Instructions)</b>
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>		

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

## **LOANS**

**SCHEDULE E**

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.			1 Total pages Schedule E:
2 FILER NAME <b>L Brandon Dodd</b>			3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS			\$ 6,081.00
5 Date of loan <b>11/28/2025</b>	7 Name of lender <b>L Brandon Dodd</b>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$) <b>81.00</b>
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; <b>214 Private Rd 3035, Big Sandy, TX 75755</b>	City; State; Zip Code	10 Interest rate <b>0.00</b>
			11 Maturity date <b>11/28/2030</b>
12 Principal occupation / Job title (See Instructions) <b>Home Builder</b>		13 Employer (See Instructions) <b>Self- Beyond The Meadow Homes, LLC</b>	
14 Description of Collateral <input type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable		17 Name of guarantor  18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
Date of loan <b>12/01/2025</b>	Name of lender <b>L. Brandon Dodd</b>	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$) <b>6,000.00</b>
Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; <b>214 PR 3035, Big Sandy, TX 75755</b>	City; State; Zip Code	Interest rate <b>0.00</b>
			Maturity date <b>11/28/2030</b>
Principal occupation / Job title (See Instructions) <b>Home Builder</b>		Employer (See Instructions) <b>Beyond The Meadow Homes LLC</b>	
Description of Collateral <input type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)	
GUARANTOR INFORMATION <input type="checkbox"/> not applicable		Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED.

If lender is out-of-state PAC, please see [Instruction guide](#) for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME L Brandon Dodd	3 Filer ID (Ethics Commission Filers)	
4 Date 11/17/2025	5 Payee name Instaheadshots.com		
6 Amount (\$) 53.10	7 Payee address; Claymont, DE	City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Head shots for website	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/24/2025	Payee name Sam's Club		
Amount (\$) 90.57	Payee address; 3310 N 4th St, Longview, TX 75605	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description plates and plastic ware	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/24/2025	Payee name A-1 Party Rental		
Amount (\$) 145.33	Payee address; 4005 Judson Rd, Longview, TX 75605	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description extra tables for event	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

### 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	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME L Brandon Dodd	3 Filer ID (Ethics Commission Filers)	
4 Date 11/25/2025	5 Payee name Walmart Supercenter		
6 Amount (\$) 135.31	7 Payee address; 515 E Loop 281, Longvoew, TX 75605	City; State; Zip Code	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expenses	(b) Description  Food and Flowers for campaign event	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/25/2025	Payee name Chayo's		
Amount (\$) 619.14	Payee address; 1420 US Hwy 271 N, Ste F, Gilmer, TX 75644	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Event Expenses	Description  food for campaign event	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 12/01/2025	Payee name Republican Party of Upshur County		
Amount (\$) 750.00	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Filing Fee	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			