CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to complet	e this form.	Filer ID (Ethics Commi 00088196		2 Total pages fil	ed: 5
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
NAME	Mr.	Stephen E.			Date Received ELECTRONICA	ALLY FILED
	NICKNAME I	 LAST		SUFFIX	_{01/16/2024}	
		Dodd				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
MAILING ADDRESS	P.O. Box 868				Receipt #	Amount
Change of Address	Big Lake, TX 76932					
	Sig Lake, 170 1002				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	IRST		MI		
TREASURER NAME	Mr. A	Amit				
	NICKNAME L	 .AST		SUFFIX		
		Patel				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OY DI EASE):	۸Δ-	Γ / SUITE #; CITY	·	ATE; ZIP CODE
TREASURER ADDRESS	110 Yucca Lane	OXT LEASE),	Al	17 JOHE #, GITT	, 317	ATE, ZII CODE
(Residence or Business)	Ozona, TX 76943					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER PHONE	(316) 258-7448					
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after car	
		Other by free			appointment (office	
	July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (Atta	ich C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	11/17/2023	TH	ROUGH	12/31/20	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Pr	rimary	Runoff	Other	
	03/05/2024	□G	eneral	Special		
				Ш		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH		
				District Attorney	(Multi-county) Dis	strict 112th
	•			1		
		GO T	O PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Dodd, Stephen E. (M	r.)	14 Filer ID ((Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS			
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00		
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.00			
	4. TOTAL POLITIC	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	AST DAY OF THE	\$ 100.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$ 100.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.				
		Mr. S	Stephen E. Dodd			
		Signature of	Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
of	, 20, to c	ertify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 5 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Dodd, Stephen E. (Mr.) 00088196 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. |X| SCHEDULE E: LOANS \$ 100.00 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 1,289.90 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to complet	te this f	orm.	I	ages Schedule E: /1 Rpt: 4/5
2	FILER NAME Dodd, Stephen I	E. (Mr.)				(Ethics Commission Filers)
4	TOTAL OF UN	IITEMIZED LOANS				\$
5	Date of loan 12/29/2023	7 Name of lender out-o	of-state PA	C (ID#:)	9 Loan Amount (\$) \$100.00
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate
	No	Big Lake, TX 76932				11 Maturity Date
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instru	ctions)	
14	Description of Coll	lateral		15 Check if personal fun	ds were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	X not applicable	18 Guarantor address; City;	State;	Zip Code		
20	Principal occupation	on		21 Employer (See Instru	ctions)	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 1/1 Rpt: 5/5 Dodd, Stephen E. (Mr.) 00088196 Date Payee name 11/30/2023 Cornerstone Garden State; Zip Code 6 Amount (\$) Payee address; City; \$39.90 809 N Georgia Ave Reimbursement from political contributions Х intended Big Lake, TX 76932 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Mailing fee for Application **EXPENDITURE** Mailing fee for Application Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/30/2023 Republican Party of Texas Amount (\$) Payee address; City; State; Zip Code \$1,250.00 807 Brazos Street Suite 701 Reimbursement from political contributions Χ Austin, TX 78701 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Fees **EXPENDITURE** Filing Fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

	Guide explains how to complete		1 Filer ID (Ethics Commi 00088196		2 Total pages file	
3 CANDIDATE / OFFICEHOLDER		FIRST		MI	OFFICE U	ISE ONLY
NAME	Mr. S	Stephen E.			Date Received ELECTRONICA	LLY FILED
	NICKNAME L	AST		SUFFIX	02/06/2024	
		Dodd				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE #; CITY	/ ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING ADDRESS	P.O. Box 868				Receipt #	Amount
Change of Address	Big Lake, TX 76932					
	Big Laite, TX 10002				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI	-	
TREASURER NAME	Mr. A	mit				
	NICKNAME L	 AST		SUFFIX		
		atel				
6 CAMPAIGN	STREET ADDRESS (NO PO BO	OA DI EVSE).	۸.D	Γ / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	110 Yucca Lane	OKT LLAGE),	A	17 JOHE #, OH1,	31A	TE, ZII CODE
(Residence or Business)	Ozona, TX 76943					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER PHONE	(316) 258-7448					
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after can	npaign treasurer
					appointment (offic	
	July 15	8th day before e	lection	Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2024	TH	ROUGH	01/25/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	X Pri	imary	Runoff	Other	
	03/05/2024	∏G€	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
					(Multi-county) Dis n, Sutton, and Up	
	I			1		
		GO T	O PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Dodd, Stephen E. (M	г.)		14 Filer ID 00088196	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accep These expenditures may h I officeholders are required	ave been made without th	he candidate's or offi	ceholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN	I TREASURER NAME			
		COMMITTEE CAMPAIGN	TREASURER ADDRES	S		
16 CONTRIBUTION	1 TOTAL LINUTEM	ZED DOLUTICAL CONTRU	DUTIONS (OTUED THAN	LDIEDCES LOANS	· I	
16 CONTRIBUTION TOTALS	OR GUARANTE	ZED POLITICAL CONTRI ES OF LOANS, OR CONT			\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GU	JARANTEES OF LOANS)	\$	1,050.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPEND	DITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES			\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAI RIOD	NTAINED AS OF THE LA	AST DAY OF THE	\$	1,150.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUT TING PERIOD	FSTANDING LOANS AS (OF THE LAST DAY	\$	100.00
17 AFFIDAVIT						
		true an	r, or affirm, under penalty nd correct and includes all Title 15, Election Code.			
				Stephen E. Dodd		
			Signature of (Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
		aid		, this the		_ day
of	, 20, to co	ertify which, witness my ha	nd and seal of office.			
Signature of offi	cer administering	Printed name of offic	er administering	Title of offic	er administeri	ng oath

SUBTOTALS - C/OH

				3 of 4
18 FILER NAM Dodd, Ste	phen E. (Mr.)	19 Filer ID 00088196	(Ethics Con	nmission Filers)
	E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,050.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CO	NTRIBUTIO	NS			SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages So Sch: 1/1 Rpt:		
2	FILER NAME Dodd, Steph	en E. (Mr.)			3	Filer ID (Ethic		n Filers)
4	Date 01/24/2024	Henderson Tractor	out-of-state PAC (ID#:		7	Amount of Con	tribution (\$)	\$500.00
Ω	Principal occu	Ozona, TX 76943 pation / Job title (See Instructions)		Employer (See Instructions	·,			
°	Principal occu	pation / Job title (See Instructions)		e Employer (See instructions)			
	Date 01/24/2024	Full name of contributor Sims, Marcus (Dr.) Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Con	tribution (\$)	\$500.00
		Ozona, TX 76943						
	Principal occu Doctor	pation / Job title (See Instructions)		Employer (See Instructions Shannon Medical Cente				
	Date 01/08/2024	Full name of contributor Smith, Tamara Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Con	tribution (\$)	\$50.00
	Detection	McCamey, TX 79752		Faralassa (Osas Instructions	<u></u>			
	Retired	pation / Job title (See Instructions)		Employer (See Instructions None	5)			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Comm 00088196		2 Total pages filed:	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE O	NI Y
OFFICEHOLDER NAME	Mr.	Stephen E.			Date Received ELECTRONICALLY F	
	AUGIZALA A A E	' A C T		CULTIV	02/26/2024	
	NICKNAME	LAST Dodd		SUFFIX	ULIZUIZUZ	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Pos	stmarked
MAILING ADDRESS	P.O. Box 868				Receipt # Amoun	int
Change of Address	Big Lake, TX 76932				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Amit				
	NICKNAME	LAST		SUFFIX		
		Patel				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	STATE;	ZIP CODE
TREASURER ADDRESS	110 Yucca Lane					
(Residence or Business)	Ozona, TX 76943					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (316) 258-7448	NE NUMBER I	EXTENSION			
8 REPORT TYPE	January 15	30th day before	e election	Runoff	15th day after campaign to appointment (officeholder	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OF	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/26/2024	TH	HROUGH	02/24/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XP	Primary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any)	<u> </u>		12 OFFICE SOUGHT	(if known)	
					(Multi-county) District 1 n, Sutton, and Upton	12 Pecos,
	_			•		
		GO 1	TO PAGE 2			

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Dodd, Stephen E. (M	r.)	14 Filer ID (00088196	(Ethics Commi	ssion Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without in I officeholders are required to report this information	the candidate's or office	eholder's know	rledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	69.52		
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$	9,509.52		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$	0.00			
	4. TOTAL POLITIC	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	REPORTING PE			\$	2,742.23		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	100.00		
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		Mr. 9	Stephen E. Dodd				
			Candidate or Officehol	der			
AFFIX NO	TARY STAMP / SEAL AB	DVE					
Sworn to and subs	cribed before me, by the s	aid	, this the		day		
		ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	r administering	g oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 01 9
18 FIL	ER NAN	<u></u>	19 Filer ID	(Ethics	s Commission Filers)
Do	dd, Ste	ephen E. (Mr.)	00088196		
		E SUBTOTALS		S	UBTOTAL AMOUNT
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	9,440.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	69.52
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				7,847.77
6.	6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				947.19
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/9	
2	FILER NAME Dodd, Steph	en E. (Mr.)			3	Filer ID (Ethics Commission 00088196	on Filers)
4	Date 01/31/2024	5 Full name of contributorDusek, Linda6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$250.00
		Midkiff, TX 79755					
8	Principal occu Office Mana	pation / Job title (See Instructions ger	(5)	9 Employer (See Instructions Texas Western Distribu		J Co.	
	Date 02/12/2024	Full name of contributor Gunnels, Aaron Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$600.00
	Dringinal occu	Big Lake, TX 76932		Employer (See Instructions	-/ 		
	Principal occu President	pation / Job title (See Instructions)	BL-JAG, Inc.	5)		
	Date 02/08/2024	Full name of contributor Johnson Law Offices Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,000.00
		San Angelo, TX 76903					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Date 02/15/2024	Full name of contributor Kemp, Philip Contributor address; City; St San Angelo, TX 76906	out-of-state PAC (ID#:		-	Amount of Contribution (\$)	\$200.00
	Principal occu Investigator	pation / Job title (See Instructions	s)	Employer (See Instructions Reagan County Sheriff's		ffice	
	Date 02/08/2024	Full name of contributor Lara, Minnie Contributor address; City; St Ozona, TX 76943	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
\vdash	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Guest Service	ce Agent		Hampton Inn			

	estion Cuido avaloino horreto apmalata thia for				
2 FILER NAME	ection Guide explains how to complete this for	m.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/9	
Dodd, Steph			3	Filer ID (Ethics Commission 00088196	on Filers)
4 Date 02/08/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$20.00
	Ozona, TX 76943				
8 Principal occu Guest Servi	upation / Job title (See Instructions) ce Agent	Employer (See Instructions Hampton Inn	5)		
Date 02/08/2024	Full name of contributor out-of-state PAC (ID#: Patel, Amit Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
Principal occi	Ozona, TX 76943 upation / Job title (See Instructions)	Employer (See Instructions	:, 		
General Ma		Hampton Inn	·)		
Date 02/22/2024	Full name of contributor out-of-state PAC (ID#: The Houston Powers Ranch Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Sonora, TX 76950				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date 01/26/2024	Full name of contributor out-of-state PAC (ID#: Weatherby, Cindy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00
Principal occu Rancher	Big Lake, TX 76932 upation / Job title (See Instructions)	Employer (See Instructions Weatherby Ranch	<u> </u> 5)		
Date 01/28/2024	Full name of contributor out-of-state PAC (ID#: Weatherby, Russell Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$750.00
Principal occi	Big Lake, TX 76932 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Law Enforce	ement / Sergeant	Texas Department of Pu	ıbli	c Safety	

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

se Travel in Disti nse Travel Out of es/Contract Labor OTHER (ente

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 6/9	Dodd, Stephen E. (Mr.)		00088196
4	Date	5 Payee name		·
	02/11/2024	Fort Stockton Pioneer		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$1,100.00	210 N. Nelson Street		
		Fort Stockton, TX 79735		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Newspaper Advertising
				Newspaper Advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O		J -	
_	Date	Payee name		
	02/10/2024	LaQuinta Motor Inns		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$300.15	836 W I-10		
		Fort Stockton, TX 79735		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Hotel Expense
				11001 23,00100
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	02/13/2024	LaQuinta Motor Inns		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$92.00	836 W I-10		
		Fort Stockton, TX 79735		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Hotel Expense
				Hotel Expense
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ight	Office held
	expenditure to benefit C/O		-	

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	ll Committee 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 3 Filer ID (Ethics Commission Filers)			
	Sch: 2/3 Rpt: 7/9	Dodd, Stephen E. (Mr.) 00088196			
4	Date	5 Payee name			
	02/04/2024	Sam's Club			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$39.96	5749 Sherwood Way			
		San Angelo, TX 76901			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Cookies			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	02/01/2024	The Big Lake Wildcat			
	Amount (\$)	Payee address; City; State; Zip Code			
\$5,220.86 303 E 1st Street					
		Big Lake, TX 76932			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Signs, Flyers, and Newspaper Advertising			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
	Date	Payee name			
	02/11/2024	The Big Lake Wildcat			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$651.67	303 E 1st Street			
		Big Lake, TX 76932			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Signs			
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services	xpense	Office Overhead Polling Expense Printing Expens Salaries/Wages	e	Travel in Distri Travel Out of D	
	Credit Card Payment		The Instruction Guid	de explains h	ow to comple	te this form.		
1	Total pages Schedule F1:	2 F	ILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 3/3 Rpt: 8/9	[odd, Stephen E. (Mr.)				00088196	
4	Date	5 F	Payee name					
	02/01/2024		ractor Supply Co					
6	Amount (\$)	7 F	Payee address; City;	State;	Zip Code			
	\$443.13	1	2701 Southwest Blvd.					
		ج	San Angelo, TX 76904					
8	PURPOSE				(b)	Description		
ľ	OF		Category (See Categories listed at the Advertising Expense	top of this sched	dule)	Description Check if travel	outside of Texas. Co	mplete Schedule T.
	EXPENDITURE	′	Auvertising Expense			므	, TX, officeholder livi	
						T-Posts and	Cable Ties	
9	Complete ONLY if direct		andidate/Officeholder name	Of	ffice sought		Office h	neld
	expenditure to benefit C/OI	Н						

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) 00088196 Sch: 1/1 Rpt: 9/9 Dodd, Stephen E. (Mr.) \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 02/15/2024 The Big Lake Wildcat **7** Amount (\$) Payee address; State; Zip Code \$947.19 303 E 1st Street Big Lake, TX 76932 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Signs 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088196 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Stephen E. NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Dodd CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 868 MAILING Receipt # **ADDRESS** Change of Address Big Lake, TX 76932 Date Processed

Date Imaged FIRST MI Amit LAST **SUFFIX** Patel STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; PHONE NUMBER **EXTENSION** 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) 8th day before election Exceeded modified reporting limit Month Day Year **THROUGH** 06/30/2024 **ELECTION TYPE** Primary Runoff Other χ General Special 12 OFFICE SOUGHT (if known) District Attorney (Multi-county) District 112th **GO TO PAGE 2** www.ethics.state.tx.us Version V4.1.0.d378aba0

FORM C/OH

Amount

CAMPAIGN

CAMPAIGN

ADDRESS

CAMPAIGN

PHONE

REPORT **TYPE**

PERIOD

10 ELECTION

11 OFFICE

COVERED

TREASURER

TREASURER

(Residence or Business)

NAME

TREASURER

MS / MRS / MR

NICKNAME

110 Yucca Lane

Ozona, TX 76943

AREA CODE

(316) 258-7448

January 15

Day

Day

11/05/2024

OFFICE HELD (if any)

ELECTION DATE

02/25/2024

Year

Year

July 15

Х

Month

Month

Mr.

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Dodd, Stephen E. (M	r.)	14 Filer ID (00088196	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	the candidate's or office	ommittees to support the sholder's knowledge or tice of such expenditures.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
	SS			
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
	\$ 1,000.00			
EXPENDITURE TOTALS	\$ 0.00			
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 3,654.31
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 87.92
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 100.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a		
		under Title 15, Election Code.		
		Mr s	Stephen E. Dodd	
			Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

				JVLK 31	3 of 8	
l	ER NAN	nen E. (Mr.)	19 Filer ID 00088196	(Ethics Commission Filers)		
l	HEDULI ME OF	SUBTO	OTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,000.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE E: LOANS		\$		
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	3,654.31	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$		
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$		
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$		

ETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
truction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/8
	3 Filer ID (Ethics Commission Filers) 00088196
5 Full name of contributor out-of-state PAC (ID#:) Morris, Kenneth 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,000.00
Lubbock, TX 79423	
s A St	Morris, Kenneth Contributor address; City; State; Zip Code Lubbock, TX 79423 Occupation / Job title (See Instructions) 9 Employer (See Instruction

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 1/4 Rpt: 5/8	Dodd, Stephen E. (Mr.)	00088196
4	Date	5 Payee name	
	03/11/2024	Allsups	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$67.22	163 N Hwy 329	
		Rankin, TX 79778	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel	l outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense el regarding campaign signs
		Gas for trave	a regarding campaign signs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Sinds No.a
_	Date	Payee name	
	03/18/2024	Alpine Avalanche	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$630.00	118 N 5th Street	
	φ030.00	110 N Sui Sueet	
		Alpina TV 70020	
		Alpine, TX 79830	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel	l outside of Texas. Complete Schedule T.
	EXPENDITURE	/ tavertising Expense	n, TX, officeholder living expense
		Newspaper A	Advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	03/19/2024	Dodd, Stephen	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,250.00	PO Box 868	
		Big Lake, TX 76932	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		l outside of Texas. Complete Schedule T.
	EXPENDITORE		n, TX, officeholder living expense
			nent for Political Expenditure from nds for Filing Fees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 6/8	Dodd, Stephen E. (Mr.) 00088196
4	Date	5 Payee name
	03/19/2024	Dodd, Stephen
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.90	PO Box 868
		Big Lake, TX 76932
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Personal Funds for mailing fee for application
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/28/2024	Dollar General
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.50	100 E 2nd Street
		Big Lake, TX 76932
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Napkins for Meet and Greet Event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	03/01/2024	LaQuinta Motor Inns
	Amount (\$)	Payee address; City; State; Zip Code
	\$92.00	836 W I-10
		Fort Stockton, TX 79735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Hotel Expense
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

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

ent Solicitation/Fundraising Expense
se Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card r dyment	The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/4 Rpt: 7/8	Dodd, Stephen E. (Mr.)			00088196		
4	Date	5 Payee name		· ·			
	03/02/2024	LaQuinta Motor Inns					
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode				
	\$92.00	836 W I-10					
		Fort Stockton, TX 79735					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	Travel In District	``	Check if travel outsic	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			Check if Austin, TX,	officeholder living	expense	
				Hotel Expense			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight		Office he	eld	
	experialitate to beliefit eroi	<u> </u>					
	Date	Payee name					
	03/05/2024	Los Cazadores					
	Amount (\$)	Payee address; City; State; Zip Co	ode				
	\$241.81	106 N Plaza Ave					
		Big Lake, TX 76932					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expense		Check if travel outsic			
	EXI ENDITORE			Check if Austin, TX,			
				vegetable mays	anu Pizzas	for campaign event	
	Complete ONLY if direct	Candidate/Officeholder name Office sou	l abt		Office he	ald.	
	expenditure to benefit C/OI		igni		Office fie	eiu	
	Date	Payee name					
	02/28/2024	Lowe's Market					
	Amount (\$)	Payee address; City; State; Zip Co	ode				
	\$77.69	505 E 2nd Street					
		Big Lake, TX 76932					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Event Expense		Check if travel outsid			
				Check if Austin, TX, Cookies for Meet			
				Good of Moo	t and Groot	27011	
	Complete ONLY if direct	Candidate/Officeholder name Office sou	L ight		Office he	eld	
	expenditure to benefit C/OI		9,11		Cilioc IIC		

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 Solarios (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	<u> </u>	3 Filer ID (Ethics Commission Filers)			
	Sch: 4/4 Rpt: 8/8	Dodd, Stephen E. (Mr.)	00088196			
4	Date	5 Payee name	•			
	03/18/2024	Masked Rider Publishing				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$210.00	204 SW Main Street				
		Eldorado, TX 76936				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
	LAFENDITORE		Check if Austin, TX, officeholder living expense			
			Newspaper Advertising			
L						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
	experiulture to beliefit C/Oi	1				
	Date	Payee name				
	02/26/2024	The Big Lake Wildcat				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$947.19	303 E 1st Street				
		Big Lake, TX 76932				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.			
			Check if Austin, TX, officeholder living expense			
			Signs			
_	Opening the ONLY if allowed	Overallidada (Officialization and an analysis)	Office health			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
	•					
l						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

The C/OH Instruction (Guide explains how to compl	lete this form.	1 Filer ID (Ethics Commit 00088196		2 Total pages filed:			
3 CANDIDATE /	MS / MRS / MR	FIRST	.1	MI	OFFICE US	SF ONLY		
OFFICEHOLDER NAME	Mr.	Stephen E.			Date Received ELECTRONICAL			
	AUGIZALA A A E				01/15/2025			
	NICKNAME	LAST Dodd		SUFFIX	01/13/2023			
4 CANDIDATE /	ADDRESS / PO BOX; APT	SUITE#; CIT	' Y;	ZIP CODE	Date Hand-delivered or D	Date Postmarked		
OFFICEHOLDER MAILING ADDRESS	P.O. Box 868				Receipt#	Amount		
Change of Address	Big Lake, TX 76932				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI				
TREASURER NAME	Mr.	Amit						
	NICKNAME	LAST		SUFFIX	•••••	•••••		
		Patel						
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY;	STAT	E; ZIP CODE		
TREASURER ADDRESS	110 Yucca Lane							
(Residence or Business)	Ozona, TX 76943							
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (316) 258-7448	NE NUMBER E	EXTENSION					
8 REPORT TYPE	X January 15	30th day before	e election	Runoff	15th day after camp appointment (office			
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach			
9 PERIOD COVERED	Month Day Year 07/01/2024	TH	HROUGH	Month Day 12/31/202	Year 4			
10 ELECTION	ELECTION DATE			ELECTION TYPE				
	Month Day Year		Primary	Runoff	Other			
	11/05/2024	XG	General	Special				
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)			
	District Attorney (Multi-cou	unty) District 112	2th Reagan	District Attorney	(Multi-county) Dist	rict 112th		
				-1				
	GO TO PAGE 2							

FORM C/OH COVER SHEET PG 2

13 C / OH NAME	Dodd, Stephen E. (M	r.)	14 Filer ID 00088196	(Ethics Comm	ission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditual These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	ceholder's know	ledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS						
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ \$	0.00				
	\$	0.00							
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00				
	4. TOTAL POLITIC		\$	0.00					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	87.92				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	100.00				
17 AFFIDAVIT									
		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.							
		Mr. s	Stephen E. Dodd						
		Signature of	Candidate or Officeho	older					
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE							
Sworn to and subsc	cribed before me, by the s	aid	, this the		day				
of	of, 20, to certify which, witness my hand and seal of office.								
Cignoture of effic	or administering	Drinted name of officer administering	Title of effic	or administaria	v ooth				
Signature of office	er auministering	Printed name of officer administering	TITLE OF OFFICE	er administerinç	j vain				

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 3 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Dodd, Stephen E. (Mr.) 00088196 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER