

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:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <i>Brandon</i>	MI	OFFICE USE ONLY Date Received SUSAN STRICKLAND COUNTY CLERK, VAN ZANDT 2026 FEB -3 AM 850 FILED FOR RECORD		
	NICKNAME	LAST <i>Barton</i>	SUFFIX			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE; ZIP CODE		
P.O. Box 141 Ben Wheeler, TX 75754						
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE ([REDACTED])	PHONE NUMBER [REDACTED]	EXTENSION	Date Hand-Delivered or Mailed Postmarked		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <i>Brandon</i>	MI	Receipt # Amount \$		
	NICKNAME	LAST <i>Barton</i>	SUFFIX	Date Processed		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;			CITY; STATE; ZIP CODE		
	<i>P.O. Box 141 Ben Wheeler, TX 75754</i>					
8 CAMPAIGN TREASURER PHONE	AREA CODE [REDACTED]	PHONE NUMBER [REDACTED]	EXTENSION			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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)		
10 PERIOD COVERED	Month <i>1</i>	Day <i>11</i>	Year <i>26</i>	Month <i>1</i>	Day <i>22</i>	Year <i>26</i>
11 ELECTION	Month <i>3</i>	Day <i>13</i>	Year <i>26</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any) <i>VIC Commission PCT 4</i>			13 OFFICE SOUGHT (if known)		
14 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.					
Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	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**

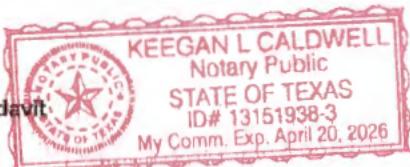
15 C/OH NAME	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 525 EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ 4. TOTAL POLITICAL EXPENDITURES \$ 0 CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 525 OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0

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:



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Brandon Burton this the 3 day of February, 20 26, to certify which, witness my hand and seal of office.

Keegan L. Caldwell
Signature of officer administering oath

Keegan L. Caldwell
Printed name of officer administering oath

Notary Public
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)

Signature of Candidate/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME <i>Brandon Barker</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1-22-26</i>	5 Full name of contributor <i>Jill Dutton</i>	out-of-state PAC (ID#: [REDACTED])	7 Amount of contribution (\$) <i>100</i>
	6 Contributor address; [REDACTED]	City; [REDACTED] State; [REDACTED] Zip Code [REDACTED]	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1-22-26</i>	Full name of contributor <i>Pat Jordan</i>	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$) <i>100</i>
	Contributor address; [REDACTED]	City; [REDACTED] State; [REDACTED] Zip Code [REDACTED]	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-22-26</i>	Full name of contributor <i>Marvin Shaw</i>	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$) <i>100</i>
	Contributor address; [REDACTED]	City; [REDACTED] State; [REDACTED] Zip Code [REDACTED]	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1-22-26</i>	Full name of contributor <i>Charles Partney</i>	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$) <i>100</i>
	Contributor address; [REDACTED]	City; [REDACTED] State; [REDACTED] Zip Code [REDACTED]	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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 A1:
2 FILER NAME <i>Brayan Barlow</i>			3 Filer ID (Ethics Commission Filers)
4 Date <i>1-22-26</i>	5 Full name of contributor <i>Brandon Rust</i>	out-of-state PAC (ID#: [REDACTED])	7 Amount of contribution (\$) <i>100</i>
6 Contributor address; [REDACTED]	City; [REDACTED]	State; [REDACTED]	Zip Code [REDACTED]
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date <i>1-22-26</i>	Full name of contributor <i>Judie Riser</i>	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$) <i>25</i>
Contributor address; [REDACTED]		City; [REDACTED]	State; [REDACTED]
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$)
Contributor address; [REDACTED]		City; [REDACTED]	State; [REDACTED]
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor	out-of-state PAC (ID#: [REDACTED])	Amount of contribution (\$)
Contributor address; [REDACTED]		City; [REDACTED]	State; [REDACTED]
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

SUBTOTALS - C/OH**FORM C/OH
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19 FILER NAME	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
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	\$