

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Brandon	MI
	NICKNAME	LAST Noto	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 11849 14th Street  Santa Fe, TX 77510		ZIP CODE
	Date Received 9 pages 4-26-2024  4:10 PM		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
Date Processed			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST RONALD	MI
	NICKNAME	LAST DAILEY	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4314 AVENUE Q 1/2		APT / SUITE #; CITY; STATE; ZIP CODE APT 203 SANTA FE TX 77510
	AREA CODE (409)	PHONE NUMBER 457	EXTENSION 0195
8 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month    Day    Year 03/26/2024		Month    Day    Year 04/24/2024
	THROUGH		
10 ELECTION	ELECTION DATE Month    Day    Year 05/04/2024		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Place Position 1 District Santa Fe Galveston		12 OFFICE SOUGHT (if known) Place Mayor District Santa Fe

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 9

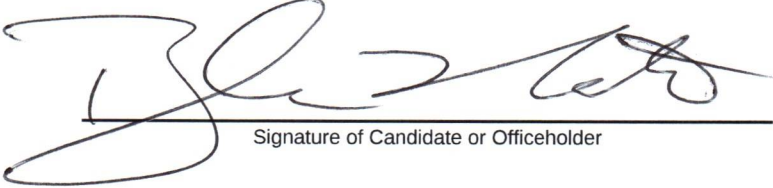
<b>13 C / OH NAME</b> Noto, Brandon	<b>14 Filer ID</b>
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b> <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16 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)	\$ 10,275.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 5.50
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 6,725.65
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,643.28
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100.00


**17 AFFIDAVIT**

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

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brandon Noto, this the 26<sup>th</sup> day of April, 2024, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering

Natalie Arnett  
 Printed name of officer administering

City Secretary  
 Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Noto, Brandon	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,375.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,900.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 6,720.15
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 5.50
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 1/4 Rpt: 4/9

**2** FILER NAME  
Noto, Brandon

**3** Filer ID

**4** Date  
04/08/2024

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Austin, Keith

**7** Amount of Contribution (\$)   
\$100.00

**6** Contributor address; City; State; Zip Code  
3738 Tower Rd  
  
Santa Fe, TX 77510

**8** Principal occupation / Job title (See Instructions)  
Self Employed

**9** Employer (See Instructions)

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Bradley, Edward

Amount of Contribution (\$)   
\$300.00

Contributor address; City; State; Zip Code  
13409 Mt. Vernon  
  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/01/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dailey, Ronald

Amount of Contribution (\$)   
\$500.00

Contributor address; City; State; Zip Code  
4314 Avenue Q 1/2  
Apt 203  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Edinburgh, Paul

Amount of Contribution (\$)   
\$250.00

Contributor address; City; State; Zip Code  
PO Box 484  
  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)  
Constable Pct. 4

Employer (See Instructions)  
Galveston County

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Gardner, Greg

Amount of Contribution (\$)   
\$200.00

Contributor address; City; State; Zip Code  
PO Box 586  
  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)  
Insurance Agent

Employer (See Instructions)  
State Farm

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/9
<b>2</b> FILER NAME Noto, Brandon		<b>3</b> Filer ID
<b>4</b> Date 04/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, John	<b>7</b> Amount of Contribution (\$) \$3,025.00
<b>6</b> Contributor address; City; State; Zip Code 617 Castle Cove  League City, TX 77573		
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions)
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Thomas	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2704 FM 517  Dickinson, TX 77539		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertenberger, Clay	Amount of Contribution (\$) \$1,825.00
Contributor address; City; State; Zip Code 12221 HWY 6 STE K  Santa Fe, TX 77510		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) IPC Industries
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Cheryl	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 810 Myrtlewood Drive  Friendswood, TX 77548		
Principal occupation / Job title (See Instructions) Tax Accessor-Collector		Employer (See Instructions) Galveston County
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden , Amber	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 107 SANTA FE CREEK CT  La Marque, TX 77568		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Santa Fe ISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 3/4 Rpt: 6/9

**2** FILER NAME

Noto, Brandon

**3** Filer ID

**4** Date  
04/04/2024

**5** Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Nelson, Robbie

**7** Amount of Contribution (\$) \$250.00

**6** Contributor address; City; State; Zip Code  
P.O. Box 1651  
  
Santa Fe, TX 77510

**8** Principal occupation / Job title (See Instructions)  
Broker/Owner

**9** Employer (See Instructions)  
Remax Crossroads Realty

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Schwertner, Pam

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
4322 Jensen  
  
Santa Fe, TX 77517

Principal occupation / Job title (See Instructions)  
Realtor

Employer (See Instructions)

Date  
04/03/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Seay, Greg

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code  
12407 Lamar Ln  
  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)  
Self Employed

Employer (See Instructions)

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Secured Donation Box

Amount of Contribution (\$) \$500.00

Contributor address; City; State; Zip Code  
  
TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/04/2024

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Sullivan, Kimberly

Amount of Contribution (\$) \$400.00

Contributor address; City; State; Zip Code  
2302 Donna Ln  
  
Santa Fe, TX 77510

Principal occupation / Job title (See Instructions)  
Probate Court Judge

Employer (See Instructions)  
Galveston County

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/9
<b>2</b> FILER NAME Noto, Brandon		<b>3</b> Filer ID
<b>4</b> Date 04/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyra, Richard	<b>7</b> Amount of Contribution (\$) \$300.00
	<b>6</b> Contributor address; City; State; Zip Code 10230 FM 2004  Santa Fe, TX 77510	
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/9	
2 FILER NAME Noto, Brandon		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/04/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Sandee	8 Amount of contribution (\$) \$1,000.00	9 In-kind contribution description Provided live entertainment for campaign event.
	7 Contributor address; City; State; Zip Code 13409 Mt Vernon  Santa Fe, TX 77510	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Artist		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentle Ben	Amount of contribution (\$) \$450.00	In-kind contribution description Venue for campaign event
	Contributor address; City; State; Zip Code 5318 FM 517 Building C  Dickinson, TX 77511	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vicknair, Gregg	Amount of contribution (\$) \$450.00	In-kind contribution description Food for campaign Event
	Contributor address; City; State; Zip Code 12210 6TH ST  Santa Fe, TX 77510	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self Employed		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 9/9	<b>2</b> FILER NAME Noto, Brandon	<b>3</b> Filer ID
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<b>4</b> Date 04/18/2024	<b>5</b> Payee name Parabellum Media, LLC
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<b>6</b> Amount (\$) \$1,760.00	<b>7</b> Payee address; City; State; Zip Code 1005 Congress Ave  Austin , TX 78701
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Communication
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/12/2024	Payee name Spectrum Marketing Companies
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Amount (\$) \$2,480.15	Payee address; City; State; Zip Code 95 Eddy Rd Ste 101  Manchester, NH 03102
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/24/2024	Payee name Spectrum Marketing Companies
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Amount (\$) \$2,480.00	Payee address; City; State; Zip Code 95 Eddy Rd Ste 101  Manchester, NH 03102
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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