

**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) 00090325	2 Total pages filed: 26		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Taren	MI	OFFICE USE ONLY		
	NICKNAME Gigs	LAST Hodges	SUFFIX	Date Received ELECTRONICALLY FILED 01/15/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 3507 N. Lamar Blvd. #300037 Austin, TX 78703			Date Hand-delivered or Date Postmarked		
				Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Cody	MI			
	NICKNAME	LAST Meador	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3507 N. Lamar Blvd. #300037 Austin, TX 78703		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 713-6744					
8 REPORT TYPE	<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)					
9 PERIOD COVERED	Month 11/13/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) None Travis			12 OFFICE SOUGHT (if known) State Representative District 49		

GO TO PAGE 2

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

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

2 of 26

13 C / OH NAME	Hodges, Taren (Mrs.)		14 Filer ID (Ethics Commission Filers) 00090325
15 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. <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"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	
		COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 4,415.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 2,720.78
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 1,444.69
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 95.62

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.

Mrs. Taren Hodges

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

3 of 26

18 FILER NAME Hodges, Taren (Mrs.)	19 Filer ID (Ethics Commission Filers) 00090325
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	
9. <input checked="" 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	
SUBTOTAL AMOUNT	
\$ 4,115.00	
\$ 300.00	
\$	
\$ 95.62	
\$ 361.09	
\$ 1,430.00	
\$	
\$	
\$ 929.69	
\$	
\$	
\$	
\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/12 Rpt: 4/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Anthony	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self-Employed
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunch, Lauren	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Louisville, KY 40205	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapa, Janet	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78744	
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) Progressive Insurance
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Susan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Portola Valley, CA 94028	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compiant, Breanna	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78747	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St. David's Medical Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Joanna 6 Contributor address; City; State; Zip Code Fort Worth, TX 76053	7 Amount of Contribution (\$) \$30.00
	8 Principal occupation / Job title (See Instructions) LD	9 Employer (See Instructions) Texas House of Representatives
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, David Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Planner	Employer (See Instructions) City of Austin
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currens, Leslie Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Software	Employer (See Instructions) BMC
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayhoff, Shari Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Angulo, Alejandra Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Writer	Employer (See Instructions) Self-employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fierro Guzman, Ana Laura	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Austin, TX 78757	
8 Principal occupation / Job title (See Instructions) Labor organizer		9 Employer (See Instructions) Workers Defense
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Jasmine	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Toledo, OH 43615	
Principal occupation / Job title (See Instructions) Policy Analyst		Employer (See Instructions) Texas House of Representatives
Date 12/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garemko III, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78749	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas HHSC-OIG
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Steve	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78711	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Todd	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Austin, TX 78744	
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) The Happy Cactus

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Los Altos, CA 94024	
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Stanford
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holst, Mackenzie	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Deyerle Silva Smith
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huckabee, Heidi	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Roswell, NM 88201	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, John	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Austin, TX 78759	
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Apple
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ilcus, Chloe	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Tallahassee, FL 32313	
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Caritas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Jeremy 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) Software	9 Employer (See Instructions) Accenture
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killian, Alison Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Software Implementation	Employer (See Instructions) Healthcare Control Systems
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kim, Peter Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) Software Engineer	Employer (See Instructions) chess.com
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korgel, Skyler Contributor address; City; State; Zip Code Austin, TX 78653	Amount of Contribution (\$) \$7.00
	Principal occupation / Job title (See Instructions) Legislative Director	Employer (See Instructions) Texas House of Representatives
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lake, Gary Contributor address; City; State; Zip Code ARLINGTON, TX 22201	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Cyber Analyst	Employer (See Instructions) BEA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Markov-Lindsey, Leah 6 Contributor address; City; State; Zip Code Austin, TX 78724	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVeety, Elizabeth Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVeety-Mill, Holly Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Photographer		Employer (See Instructions) Self Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVeety-Mill, Patrick Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Software Consultant		Employer (See Instructions) Self-Employed
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Cody Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Policy Analyst		Employer (See Instructions) Texas House of Representatives

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Wilson 6 Contributor address; City; State; Zip Code Dallas, TX 75208	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) trader	9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meador, Wilson Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) trader	Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mechling, Leea Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mill, Michael Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirto, Sophia Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Self Employed	Employer (See Instructions) Sophia Mirto

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Peggy 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mudumala, Anna Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) KFF
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarro, Alice Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social worker		Employer (See Instructions) Travis County
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Brian Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) Local 520
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peragine, Linda Contributor address; City; State; Zip Code New Haven, CT 06511	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesi, Sarah 6 Contributor address; City; State; Zip Code Bethel Park, PA 15102	7 Amount of Contribution (\$) \$150.00
	8 Principal occupation / Job title (See Instructions) Policy Specalist	9 Employer (See Instructions) Jewish Healthcare Foundation
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey Bissex, Henry Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Software Engineer	Employer (See Instructions) Austin Fire Department
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandstrom, Terina Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) Software Trainer	Employer (See Instructions) Prefer Not to Answer
Date 12/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schurer, Heather Contributor address; City; State; Zip Code Pittsburgh, PA 15201	Amount of Contribution (\$) \$5.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sipe, Sarah Contributor address; City; State; Zip Code Belmont, MA 02478	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Scientist	Employer (See Instructions) Parallel Squared Technology Institute

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Rebecca	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Bowling Green, KY 42101	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sykes, Erika	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Washington, DC 20003	
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Havas
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaughn, Paige	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78744	
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Paige Vaughn Photo
Date 12/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Eleanor	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Washington, DC 20003	
Principal occupation / Job title (See Instructions) Political Director		Employer (See Instructions) The First Ask
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen	Amount of Contribution (\$) \$101.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 11/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Austin, TX 78703	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilmot, Alys	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Albuquerque, NM 87120	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Roy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Austin, TX 78744	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) AmD
Date 12/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$27.00
	Contributor address; City; State; Zip Code Austin, TX 78765	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Plum Creek Records & Tapes

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zakoor, Kristin 6 Contributor address; City; State; Zip Code Austin, TX 78744	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) COO		9 Employer (See Instructions) Texas Homeless Network

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: Sch: 1/1 Rpt: 16/26</p>
<p>2 FILER NAME Hodges, Taren (Mrs.)</p>		<p>3 Filer ID (Ethics Commission Filers) 00090325</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 12/22/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRB Coffee 7 Contributor address; City; State; Zip Code Austin, TX 78705</p>	<p>8 Amount of contribution (\$) \$300.00</p> <p>9 In-kind contribution description 3 hours of space for campaign event</p> <p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/2 Rpt: 17/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 12/02/2025	7 Name of lender Galvan, Lyssette	9 out-of-state PAC (ID#: \$10.75
6 Is lender a financial institution? No	8 Lender address; Austin, TX 78729	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; Austin, TX 78729	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 12/15/2025	Name of lender Galvan, Lyssette	Loan Amount (\$) \$9.00
Is lender a financial institution? No	Lender address; Austin, TX 78729	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; Austin, TX 78729	
Principal occupation		Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/2 Rpt: 18/26
2 FILER NAME Hodges, Taren (Mrs.)		3 Filer ID (Ethics Commission Filers) 00090325
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 12/22/2025	7 Name of lender Galvan, Lyssette	9 out-of-state PAC (ID#: _____) \$17.41
6 Is lender a financial institution? No	8 Lender address; Austin, TX 78729	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; Austin, TX 78757	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 12/31/2025	Name of lender Pelton, Madeleine	Loan Amount (\$) \$58.46
Is lender a financial institution? No	Lender address; Austin, TX 78757	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; Austin, TX 78757	
Principal occupation		Employer (See Instructions)

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)
<p>The Instruction Guide explains how to complete this form.</p>			
1 Total pages Schedule F1: Sch: 1/4 Rpt: 19/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325	
4 Date 11/30/2025	5 Payee name ActBlue		
6 Amount (\$) \$126.59	7 Payee address; City; PO Box 441146 Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment processing services from Nov. 30 through Dec. 31	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/31/2025	Payee name Dollar Tree		
Amount (\$) \$26.25	Payee address; City; 5310 Burnet Rd #120 Austin, TX 78756		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for fundraiser event	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/22/2025	Payee name FedEx Printing		
Amount (\$) \$7.68	Payee address; City; 5770 N Mopac Expy Suite 400 Austin, TX 78731		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed materials for campaign event	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<p> </p>			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 2/4 Rpt: 20/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/31/2025	5 Payee name HEB	
6 Amount (\$) \$69.22	7 Payee address; City; 5808 Burnet Rd Austin, TX 78756	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for campaign event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Medici Coffee	
Amount (\$) \$6.50	Payee address; City; 2222 Guadalupe St B Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverage during campaign meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/15/2025	Payee name Medici Coffee	
Amount (\$) \$6.25	Payee address; City; 2222 Guadalupe St B Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverage during campaign team meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 3/4 Rpt: 21/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/31/2025	5 Payee name Michaels	
6 Amount (\$) \$43.41	7 Payee address; City; State; Zip Code 10225 Research Blvd Ste 2000 Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for fundraising event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Office Depot	
Amount (\$) \$9.73	Payee address; City; State; Zip Code 2620 W Anderson Ln Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name tags for campaign event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Park ATX	
Amount (\$) \$4.25	Payee address; City; State; Zip Code 1111 Rio Grande St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking fee during campaign meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 4/4 Rpt: 22/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/15/2025	5 Payee name Park ATX	
6 Amount (\$) \$2.75	7 Payee address; City; 1111 Rio Grande St Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking fee during campaign team meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name UPS	
Amount (\$) \$58.46	Payee address; City; 7421 Burnet Rd Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printed materials for fundraising event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Sch: 1/1 Rpt: 23/26 Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325	
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$	
5 Date 12/17/2025	6 Payee name Texas Democratic Party		
7 Amount (\$) \$1,430.00	8 Payee address; City; 314 Highland Blvd Austin, TX 78752	State; Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Activation Network access	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee to access the Texas Voter Activation Network	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/3 Rpt: 24/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325
4 Date 12/30/2025	5 Payee name Canva	
6 Amount (\$) \$10.66	7 Payee address; City; State; Zip Code 110 Kippax St Surry Hills New South Wales 2010 Australia	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		8 PURPOSE OF EXPENDITURE <div style="display: flex; justify-content: space-between;"> (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business account to create graphics </div>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/06/2025	Payee name Carrd	
Amount (\$) \$29.00	Payee address; City; State; Zip Code 231 Public Square Suite 300 Franklin, TN 37064	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		PURPOSE OF EXPENDITURE <div style="display: flex; justify-content: space-between;"> Category (See Categories listed at the top of this schedule) Advertising Expense Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website </div>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/29/2025	Payee name Google LLC	
Amount (\$) \$2.65	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
<input checked="" type="checkbox"/> Reimbursement from political contributions intended		PURPOSE OF EXPENDITURE <div style="display: flex; justify-content: space-between;"> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace Plan </div>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 2/3 Rpt: 25/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325		
4 Date 12/22/2025	5 Payee name HEB			
6 Amount (\$) \$87.52	7 Payee address; City; State; Zip Code 5808 Burnet Rd Austin, TX 78756			
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Reimbursement from political contributions intended		(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and materials for campaign event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
Date 12/06/2025	Payee name Namecheap			
Amount (\$) \$11.48	Payee address; City; State; Zip Code 4600 East Washington Street, Suite 300 Phoenix, AZ 85034			
PURPOSE OF EXPENDITURE <input type="checkbox"/> Reimbursement from political contributions intended		Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website domain name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
Date 12/08/2025	Payee name Texas Democratic Party			
Amount (\$) \$750.00	Payee address; City; State; Zip Code 314 Highland Blvd Austin, TX 78752			
PURPOSE OF EXPENDITURE <input type="checkbox"/> Reimbursement from political contributions intended		Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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.

1 Total pages Schedule G: Sch: 3/3 Rpt: 26/26	2 FILER NAME Hodges, Taren (Mrs.)	3 Filer ID (Ethics Commission Filers) 00090325	
4 Date 12/29/2025	5 Payee name Zoho Corporation		
6 Amount (\$) \$38.38	7 Payee address; City; 4141 Hacienda Dr Pleasanton, TX 94588		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online workplace space	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held