

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

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

2 of 18

13 C / OH NAME Hoffman, Peggy **14 Filer ID** (Ethics Commission Filers)
00090552

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	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)	\$	19,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	132.80
	4. TOTAL POLITICAL EXPENDITURES	\$	30,835.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,034.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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.

Peggy Hoffman

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 oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Hoffman, Peggy	19 Filer ID (Ethics Commission Filers) 00090552
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 17,800.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,450.00
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 30,835.72
6. <input 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 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 A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrams, Warren	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75231	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Warren N. Abrams, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnham, Jim	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Law Offices of Jim Burnham		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burrows, David	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaiken, Robert	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Plano, TX 75024	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Chaiken & Chaiken, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fifer, Timothy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallian Firm	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Michelle	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 76209	
8 Contributor's Principal Occupation Beauty founder/part time attorney		9 Contributor's Job Title makeup line developer
10 Contributor's employer/law firm Mich & Lu Beauty; self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillard, Chelsea	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Dorsey and Whitney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/07/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Carla Layne	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75228	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Andy	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Sawicki Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Krisi	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Kastl Law, PC		Law firm of contributor's spouse (if any) Kastl Law, PC
If contributor is a child, law firm of parent(s) (if any)		
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Anthony D. Lynons	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75203	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/04/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Todd Tracy, PC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75235	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons & Simmons LLP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCathern Shokouhi Evans	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/16/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad, Sean	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Richardson, TX 75081	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm MAS law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ola, Stephanie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Grapevine, TX 76051	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Sorrels Ola		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padian, Joseph	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75234	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Scott	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75248	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm Palmer Peristein		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/15/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rafi, Ayesha	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75251	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Rafi Debose PLLC		Law firm of contributor's spouse (if any) Rafi Debose PLLC
If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Schuyler	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 01/27/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romig, Todd	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Highland Village, TX 75077	
8 Contributor's Principal Occupation Insurance agent		9 Contributor's Job Title agent
10 Contributor's employer/law firm State Farm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/23/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenfield, Jeffrey (Judge)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Contributor's Principal Occupation Retired Judge		Contributor's Job Title Judge
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/18/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Mark	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Mark Scott Law Group		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seidel, Adam	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75214	
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheehan, Conner	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Dunn Sheehan LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robert (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Fitzpatrick Jacks Smith Uhl		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/18
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/05/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillotson Johnson Patton	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75202	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/27/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wynne, Scott	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Contributor's Principal Occupation CPA		Contributor's Job Title CPA
Contributor's employer/law firm Jackson Shaw Company		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/05/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith, robert (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm Law Offices of Robert R. Smith		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/18	
2 FILER NAME Hoffman, Peggy		3 Filer ID (Ethics Commission Filers) 00090552	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 02/05/2026	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurst, Michael	8 Amount of contribution (\$) \$1,450.00	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code Dallas, TX 75201	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) attorney		13 Contributor's job title (FOR JUDICIAL) (See instructions) attorney	
14 Contributor's employer/law firm (FOR JUDICIAL) Lynn Pinker Hurst & Schwegmann		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)			

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.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 15/18	2 FILER NAME Hoffman, Peggy	3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/11/2026	5 Payee name AMAC	
6 Amount (\$) \$3,000.00	7 Payee address; City; State; Zip Code Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 radio ad
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/09/2026	Payee name Dallas Bar Assoc.	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 2101 Ross Ave. Dallas, TX 75201	
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 Inauguration
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/11/2026	Payee name Democracy Toolbox Jeff Dalton	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 405 Rice St. McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting fee
	9 Complete <u>ONLY</u> 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
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 F1: Sch: 2/4 Rpt: 16/18	2 FILER NAME Hoffman, Peggy	3 Filer ID (Ethics Commission Filers) 00090552
4 Date 02/11/2026	5 Payee name Democracy Toolbox Jeff Dalton	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 405 Rice St. McKinney, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense poll greeters
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2026	Payee name Democracy Toolbox Jeff Dalton	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 405 Rice St. McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 text messaging
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2026	Payee name Democracy Toolbox	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 405 Rice St. McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 text messages
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
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 F1: Sch: 3/4 Rpt: 17/18	2	FILER NAME Hoffman, Peggy	3	Filer ID (Ethics Commission Filers) 00090552	
4	Date 02/13/2026	5	Payee name Edwards and Patterson signs			
6	Amount (\$) \$1,539.32	7	Payee address; City; State; Zip Code 203 S. Belt Line Rd. Irving, TX 75060			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 Yard signs			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 02/09/2026		Payee name Finishing and Mailing center			
	Amount (\$) \$10,412.67		Payee address; City; State; Zip Code 2151 W. Commerce St. Dallas, TX 75212			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 postage and mailing			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
	Date 01/30/2026		Payee name Londoner Pub			
	Amount (\$) \$708.58		Payee address; City; State; Zip Code 5321 Mockingbird Ln. Dallas, TX 75214			
	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 Meet and greet			
	Complete <u>ONLY</u> 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
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 F1: Sch: 4/4 Rpt: 18/18	2 FILER NAME Hoffman, Peggy	3 Filer ID (Ethics Commission Filers) 00090552
4 Date 01/30/2026	5 Payee name Reilly Echols	
6 Amount (\$) \$7,441.00	7 Payee address; City; State; Zip Code 1710 S. Harwood St. Dallas, TX 75215	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising 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 printing for mailers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/05/2026	Payee name Specks	
Amount (\$) \$323.30	Payee address; City; State; Zip Code 9500 N. Central Expwy Dallas, TX 75231	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Gift to host
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2026	Payee name Stripe	
Amount (\$) \$578.05	Payee address; City; State; Zip Code 354 Oyster Point Blvd. S. San Francisco, CA 94080	
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 Credit card swipe fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held