

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <i>8</i>				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MRS NICKNAME MAGGIE			FIRST MARGARET LAST SAWYER MI SUFFIX				
				OFFICE USE ONLY				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 2396 FM 1121 BRADY TEXAS 76825			Date Received <i>FILED</i> <i>JAN 15 2026</i>				
				Christine A. Jones McCulloch County Clerk				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 456-0200			Date Hand-delivered or Date Postmarked				
				Receipt # Amount \$				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MRS NICKNAME MAGGIE			FIRST MARGARET LAST SAWYER MI SUFFIX				
				Date Processed				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY: 2396 FM 1121 BRADY TEXAS 76825			STATE: ZIP CODE				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 456-0200							
9 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)
10 PERIOD COVERED	Month 7	Day / 1 /	Year 25	THROUGH	Month 12	Day / 31 /	Year 25	
11 ELECTION	ELECTION DATE Month 3 / Day / 3 / Year 26			ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special				
12 OFFICE	OFFICE HELD (if any) JUSTICE OF THE PEACE			13 OFFICE SOUGHT (if known) JUSTICE OF THE PEACE				
14 NOTICE FROM POLITICAL COMMITTEE(S) <input checked="" 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. 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.							
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME						
		COMMITTEE ADDRESS						
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRESS						

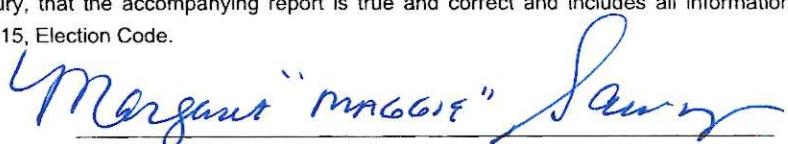
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME MARGARET "MAGGIE" SAWYER	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. \$ 0.00
	4. TOTAL POLITICAL EXPENDITURES \$ 464.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 629.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00

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



Signature of Candidate or Officeholder

FILED

JAN 15 2026

Christine A. Jones
McCulloch County Clerk

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is MARGARET "MAGGIE" SAWYER, and my date of birth is 10-02-1966
My address is 2396 FM 1121, Brady, TX 76825, McCulloch
(street) (city) (state) (zip code) (country)
Executed in McCulloch County, State of Texas, on the 15th day of January, 2024.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4. ■ SCHEDULE E: LOANS	\$ 850.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9. ■ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 464.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

FILED**JAN 15 2026**Christine A. Jones
McCulloch County Clerk

LOANS

SCHEDULE E

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.				1 Total pages Schedule E:
2 FILER NAME MARGARET "MAGGIE" SAWYER				3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS				\$
5 Date of loan 11/05/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: MAGGIE SAWYER)			9 Loan Amount (\$) 350.00
6 Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 2396 FM 1121 BRADY TEXAS 76825			10 Interest rate 0.00
				11 Maturity date 9999
12 Principal occupation / Job title (See Instructions) N/A		13 Employer (See Instructions) N/A		
14 Description of Collateral <input type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code			19 Amount Guaranteed (\$) FILED JAN 15 2026
20 Principal Occupation (See Instructions)		21 Employer (See Instructions) Christine A. Jones McCulloch County Clerk		
Date of loan 11/07/2025	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: MAGGIE SAWYER)			Loan Amount (\$) 500.00
Is lender a financial institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 2396 FM 11221 BRADY TEXAS 76825			Interest rate 0.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A		
Description of Collateral <input type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)		
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor Guarantor address; City; State; Zip Code			Amount Guaranteed (\$)
Principal Occupation (See Instructions)		Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

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: 3	2 FILER NAME MARGARET "MAGGIE" SAWYER	3 Filer ID (Ethics Commission Filers)	
4 Date 07/31/2025	5 Payee name COMMERCIAL NATIONAL BANK		
6 Amount (\$) 4.00 Reimbursement from political contributions intended	7 Payee address; P.O. BOX 591 BRADY TEXAS 76825 Check if individual's residence address.	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) BANKING	(b) Description SERVICE CHARGE	
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Christine A. Jones	Office sought FILED	Office held
Date 08/31/2025	Payee name COMMERCIAL NATIONAL BANK	JAN 15 2026	
Amount (\$) 4.00 Reimbursement from political contributions intended	Payee address; P.O. BOX 591 BRADY TEXAS 76825 Check if individual's residence address.	City McCulloch County	State; Zip Code TX
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) BANKING	Description SERVICE CHARGE	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 09/30/2025	Payee name COMMERCIAL NATIONAL BANK		
Amount (\$) 4.00 Reimbursement from political contributions intended	Payee address; P.O. BOX 591 BRADY TEXAS 76825 Check if individual's residence address.	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) BANKING	Description SERVICE CHARGE	
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

JAN 15 2026

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

Christine A. Jones
Jefferson County Clerk

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: 3	2 FILER NAME MARGARET "MAGGIE" SAWYER	3 Filer ID (Ethics Commission Filers)	
4 Date 10/31/2025	5 Payee name COMMERCIAL NATIONAL BANK		
6 Amount (\$) 4.00 Reimbursement from political contributions intended	7 Payee address; P.O. BOX 591 BRADY TEXAS 76825 Check if individual's residence address.	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) BANKING	(b) Description SERVICE CHARGE	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name MARGARET "MAGGIE" SAWYER	Office sought JUSTICE OF THE PEACE	Office held JUSTICE OF THE PEACE
Date 11/10/2025	Payee name MCCULLOCH COUNTY REPUBLICAN PARTY		
Amount (\$) 375.00 Reimbursement from political contributions intended	Payee address; 724 Co. Rd. 410 Check if individual's residence address.	City; State; Zip Code Brady TX 76825	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CANDIDATE FILING FEE	Description FILING FEE	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name MARGARET "MAGGIE" SAWYER	Office sought JUSTICE OF THE PEACE	Office held JUSTICE OF THE PEACE
Date 11/18/2025	Payee name BRADY STANDARD HERALD		
Amount (\$) 40.00 Reimbursement from political contributions intended	Payee address; P.O. BOX 1151 BRADY TEXAS 76825 Check if individual's residence address.	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description ADVERTISING	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name MARGARET "MAGGIE" SAWYER	Office sought JUSTICE OF THE PEACE	Office held JUSTICE OF THE PEACE
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

JAN 15 2026

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

Christine A. Jones
McCulloch County Clerk

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	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 3	2 FILER NAME MARGARET "MAGGIE" SAWYER	3 Filer ID (Ethics Commission Filers)
4 Date 11/30/2025	5 Payee name COMMERCIAL NATIONAL BANK	
6 Amount (\$) 4.00 Reimbursement from political contributions intended	7 Payee address; P.O. BOX 591 BRADY TEXAS 76825 Check if individual's residence address.	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) BANKING	(b) Description SERVICE CHARGE
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held
Date 12/18/2025	Payee name MCCULLOCH COUNTY TAX ASSESSOR-COLLECTOR	
Amount (\$) 25.00 Reimbursement from political contributions intended	Payee address; 302 W. COMMERCE BRADY TEXAS 76825 Check if individual's residence address.	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) PRINTING EXPENSES VOTERS	Description PRINTING EXPENSE
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held
Date 12/31/2025	Payee name Commercial National Bank	
Amount (\$) 4.00 Reimbursement from political contributions intended	Payee address; P.O. Box 591 Brady Texas 76825 Check if individual's residence address.	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) BANKING	Description SERVICE CHARGE
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



AFFIDAVIT FOR CANDIDATE OR OFFICEHOLDER: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2026, a candidate or officeholder who has accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in any calendar year must file all subsequent reports electronically.

Filer name	Filer ID #
MARGARET "MAGGIE" SAWYER	

OFFICE USE ONLY	
Date Received	
FILED	
JAN 15 2026	
Date Hand-delivered or Date Postmarked McCulloch County Clerk	
Receipt #	Amount \$
Date Processed	
Date Imaged	

1. I swear or affirm that I have not accepted more than \$34,890 in political contributions or made more than \$34,890 in political expenditures in a calendar year.
2. I further swear or affirm that I do not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
3. I further swear or affirm that no person acting as my agent or consultant, and no person with whom I contract, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
4. I further swear or affirm that I understand that I am required to file my campaign finance reports electronically if I, my agent or consultant, or a person with whom I contract exceeds \$34,890 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to me.
5. I am filing this affidavit with the Semi-annual report due on 1.15.2026. I understand that this affidavit is required to be filed with each campaign finance report for which I am claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

Signature of Filer

NOTARY STAMP/SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is MARGARET "MAGGIE" SAWYER, and my date of birth is 10-02-1964
My address is 2394 FM 1121, (street) Brady, (city) TX, (state) 76825, (zip code) McCulloch, (country)
Executed in McCulloch County, State of Texas, on the 15th day of January, 20 26.

I, Margaret "Maggie" Sawyer

Signature of Filer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**