FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00037876 3 COMMITTEE NAME **OFFICE USE ONLY** River Oaks Area Democratic Women Date Received **ELECTRONICALLY FILED** 06/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 13527 N. Tracewood Bend Change of Address Houston, TX 77077 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Leif C. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Hatlen CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 13527 N. Tracewood Bnd. STREET **ADDRESS** (Residence or Business) Houston, TX 77077 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 13527 N. Tracewood Bnd. MAILING **ADDRESS** Change of Address Houston, TX 77077 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (281) 493-3107 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 X June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 04/26/2024 05/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer		(Ethics Commission Filers)
River Oaks Area Demo	cratic Women			0003	7876	
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2 Manageman	A. Supported				
	Measures (Describe by date and location	A. Supported				
	of election and nature of issue.)					
		B. Opposed				
	3. Officeholders					
	Assisted (Identify by name or, if applicable, classify by party.)					
.5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES NADE ELECTRONIC	CALLY)	!	\$	181.00
	2. TOTAL POLITICA					
			GUARANTEES OF LOANS)	,	\$	531.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	ES	:	\$	430.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				\$	27,585.87
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		OUTSTANDING LOANS AS OF DD		\$	0.00
6 AFFIDAVIT	1			l		
		true a	ar, or affirm, under penalty of p and correct and includes all info r Title 15, Election Code.	perjury, tha ormation re	t the ac quired	companying report is to be reported by me
			Mr. Le	if C. Hatle	en	
			Signature of C	ampaign T	reasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE		Č	. 0		
Sworn to and subscribed	hefore me by the said			this the		day
	_, 20, to certify \					day
		,				
Signature of officer ad	ministering oath	Printed name of offi	icer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 7			
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commis	ssion Filers)			
River Oa	•	ŕ					
19 SCHEDULE SUBTOTALS							
NAME OF	SUBTOTA	AL AMOUNT					
		 					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	531.00			
			 				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
			ļ*				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
<u> </u>	CONLEGEL S. 1 LEDGES CONTRIBOTIONS		Ψ				
	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR					
4.	ORGANIZATION		\$				
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	1				
5.	LABOR ORGANIZATION	thort ort	\$				
			<u> </u>				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
			 				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	t	\$				
	ORGANIZATION		ļ ·				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	s				
°	SCHEDULE D. TELEBOLD CONTRIBUTIONS FROM CONTRIBUTION ON EXECUTION	51(6)(11/2)(116)(*				
, ,	00115011155 1 0 4 4 10		1.				
9.	SCHEDULE E: LOANS		\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	430.42			
			 				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
			 				
12.	\$						
			<u> </u>				
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
19. [CONLEGE TO THE PROPERTY OF THE		ا ا				
	COUEDINE I NON POLITICAL EVENIDITURES FROM POLITICAL CONTRIBUTI	ONG					
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	JNS	\$				
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	1				
15. X	TO FILER		\$	10.96			
I							

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	River Oaks A	Area Democratic Women				00037876	
4 Date 05/15/2024		5 Full name of contributorCantu, Linda6 Contributor address; City; State	7	Amount of Contribution (\$)	\$50.00		
_	Drive in all account	Houston, TX 77008		Faralassa (Osas lastas et			
8	none	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)		
	Date 05/07/2024)		Amount of Contribution (\$)	\$50.00
	5	Houston, TX 77098			<u></u>		
	not employe	pation / Job title (See Instructions) d		Employer (See Instructions none	5)		
	Date Full name of contributor out-of 05/07/2024 Kaufman, Janet Contributor address; City; State; Zip C		out-of-state PAC (ID#:			Amount of Contribution (\$)	\$150.00
		Houston, TX 77079					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	not employe	d		none			
	Date 05/11/2024	Full name of contributor Kim, Stephanie Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu College Adm	pation / Job title (See Instructions) ninistrator		Employer (See Instructions Lone Star College	5)		
	Date 05/01/2024)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	s)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Paint Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Transportation E Travel in District Travel Out of Dis	licitation/Fundraising Expense unsportation Equipment & Related Expense avel in District avel Out of District HER (enter a category not listed above)					
_		_			C CAPIGITIS II	1011 10 00	Пріс	te this form.	_		(=u: 0 : : =u)
1	Total pages Schedule F1: Sch: 1/2 Rpt: 5/7	2	FILER NAME River Oaks Area Democratic Women 3 Filer ID (Ethics of O0037876)						(Ethics Commission Filers)		
4	Date	5	Payee name								
•	05/25/2024		ACTBLUE 7	ΓEXAS							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de				
	\$13.85		PO Box 382	2110							
	Expenditure from corporate funds		Cambridge,	MA 02238-2110							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense transaction fee									
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ceholder name	O	ffice sou	ght			Office he	eld
	Date		Payee name								
	05/11/2024		Bown, Chris	stopher							
			Payee addres	<u>'</u>	State:	Zip Co	do				
Amount (\$)			3315 Merce		State,	Zip Co	ue				
	\$100.00		2212 Merce	:1 31							
	Expenditure from corporate funds		Houston, TX	X 77027							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed at the l ages/Contract Lab		edule)	(b)	=		de of Texas. Com officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	O	ffice sou	ght			Office he	eld
	Date		Payee name								
	05/20/2024		MailChimp								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de				
	\$41.57		•	de Leon Ave NE	•						
			Suite 5000								
	Expenditure from corporate funds		Atlanta, GA	30308							
	PURPOSE OF	(a)	Category (Se	ee Categories listed at the t	top of this sche	edule)	(b)	Description			
	EXPENDITURE		Fees					브		de of Texas. Com	·
								email service		officeholder living	cyheilog
								J. 11411 JOI VIOC			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	O	ffice sou	ght			Office he	eld

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Travel Out of District
Travel Out of District

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 6/7	River Oaks Area Democratic Women 00037876
4 Date	5 Payee name
05/11/2024	St. Stephens Episcopal Church
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$175.00	1805 W. Alamba
Expenditure from corporate funds	Houston, TX 77098
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	meeting room rental
	inisoting room roma.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
05/11/2024	Williams, Sharon
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	7447 Cambridge #55
\$100.00	7447 Cambridge #55
Expenditure from corporate funds	Houston, TX 77054
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Newsletter editor
	Newsietter euitor
Commission ONLY if direct	Constitute / Office helder name Office accords
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
·	

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/7 3 Filer ID (Ethics Commission Filers) 2 FILER NAME River Oaks Area Democratic Women 00037876 5 Name of person from whom amount is received 8 Amount (\$) Date 05/25/2024 \$10.96 Amegy Bank 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77210-4837 Purpose for which amount is received Check if political contribution returned to filer Interest