

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

|  |   |  |   |
|--|---|--|---|
| <b>1</b> Filer ID (Ethics Commission Filers)<br>00085388 | <b>2</b> Total pages filed:<br>29                 | <b>OFFICE USE ONLY</b>   |   |
| <b>3</b> COMMITTEE NAME<br>Rosedale Huddle               |   |  | Date Received<br>ELECTRONICALLY FILED<br>07/28/2025 |
| <b>4</b> TREASURER NAME<br>Loomis, Mina K. (Ms.)         |   |  | Date Hand-delivered or Date Postmarked              |
| <b>5</b> ORIGINAL REPORT TYPE                            | <input type="checkbox"/> January 15               | <input type="checkbox"/> Runoff  | Receipt #   |
|  | <input checked="" type="checkbox"/> July 15       | <input type="checkbox"/> 10th day after campaign treasurer resignation |   |
|  | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution report                            | Amount  |
|  | <input type="checkbox"/> 8th day before election  | <input type="checkbox"/> Other (specify) _____                         | Date Processed                                      |
| <b>6</b> ORIGINAL PERIOD COVERED                         | Month Day Year<br>01/01/2025                      | THROUGH  | Month Day Year<br>06/30/2025                        |
| Date Imaged  |   |  |   |

**7 EXPLANATION OF CORRECTION**  
 One individual monetary political contribution was accidentally left off the report, Lorri Haden, 6/26/2025, \$10.00. This report correction is being filed the same day the error was discovered.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Ms. Mina K. Loomis  
 \_\_\_\_\_  
 Signature of Campaign Treasurer

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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

|   |   |  |   |
|---|---|--|---|
| <b>The GPAC Instruction Guide explains how to complete this form.</b>                         |   | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00085388          | <b>2</b> Total pages filed:<br>29   |
| <b>3</b> COMMITTEE NAME<br>Rosedale Huddle  |   | <b>OFFICE USE ONLY</b>   |   |
|   |   | Date Received<br>ELECTRONICALLY FILED<br>07/28/2025                  |   |
| <b>4</b> COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE                  |  |   |
|   | 5501A Balcones Dr. #157   |  |   |
|   | Austin, TX 78731  |  |   |
|   | Date Hand-delivered or Date Postmarked                                  |  |   |
|   |   | Receipt #  | Amount  |
| Date Processed  |   |  |   |
| Date Imaged   |   |  |   |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR   | FIRST  | MI  |
|   | Ms.   | Mina K.  |   |
| NICKNAME  |   | LAST   | SUFFIX  |
|   |   | Loomis   |   |
| <b>6</b> CAMPAIGN TREASURER STREET ADDRESS<br><br><small>(Residence or Business)</small>      | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE |  |   |
|   | 4412 Sinclair Ave<br><br>Austin, TX 78756                               |  |   |
| <b>7</b> CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE                  |  |   |
|   | 4412 Sinclair Ave.<br><br>Austin, TX 78756                              |  |   |
| <b>8</b> CAMPAIGN TREASURER PHONE   | AREA CODE   | PHONE NUMBER   | EXTENSION   |
|   | (512)   | 797-3525   |   |
| <b>9</b> REPORT TYPE  | <input type="checkbox"/> January 15                                     | <input type="checkbox"/> 30th day before election                    | <input type="checkbox"/> Dissolution (Attach PAC-DR)  |
|   | <input checked="" type="checkbox"/> July 15                             | <input type="checkbox"/> 8th day before election                     | <input type="checkbox"/> 10th day after campaign treasurer termination                                |
|   | <input type="checkbox"/> Runoff   |  |   |
| <b>10</b> PERIOD COVERED  | Month Day Year  | THROUGH  | Month Day Year  |
|   | 01/01/2025  |  | 06/30/2025  |
| <b>11</b> ELECTION  | ELECTION DATE   |  | ELECTION TYPE   |
|   | Month Day Year  | <input type="checkbox"/> Primary<br><input type="checkbox"/> General | <input type="checkbox"/> Runoff<br><input type="checkbox"/> Special<br><input type="checkbox"/> Other |

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Rosedale Huddle | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00085388 |
|---|---|

|   |  |                       |
|---|--|-----------------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Democrat |
|   |  | B. Opposed            |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported          |
|   |  | B. Opposed            |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |                       |

|                               |  |             |
|-------------------------------|--|-------------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> | \$ 65.00    |
|                               | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold                                 |             |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>  | \$ 5,791.00 |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 90.93    |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 5,675.31 |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 8,045.63 |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 0.00     |

**16 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.

Ms. Mina K. Loomis  
\_\_\_\_\_  
Signature of Campaign Treasurer

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 - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
4 of 29

|  |   |                                |                            |
|--|---|--------------------------------|----------------------------|
| <b>17 COMMITTEE NAME</b><br>Rosedale Huddle      |   | <b>18 Filer ID</b><br>00085388 | (Ethics Commission Filers) |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |   | SUBTOTAL AMOUNT                |                            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$                             | 5,791.00                   |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$                             |                            |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$                             |                            |
| 4.   | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$                             |                            |
| 5.   | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$                             |                            |
| 6.   | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$                             |                            |
| 7.   | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$                             |                            |
| 8.   | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$                             |                            |
| 9.   | <input type="checkbox"/> SCHEDULE E: LOANS  | \$                             |                            |
| 10.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$                             | 5,675.31                   |
| 11.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$                             |                            |
| 12.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                        | \$                             |                            |
| 13.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  | \$                             |                            |
| 14.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                      | \$                             |                            |
| 15.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$                             |                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/18 Rpt: 5/29     |
| <b>2</b> FILER NAME<br>Rosedale Huddle   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388     |
| <b>4</b> Date<br>03/02/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Anderson, Susan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Anthropologist, photographer |   | <b>9</b> Employer (See Instructions)<br>Self                 |
| Date<br>01/22/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ausley, Robbie<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                    | Amount of Contribution (\$)<br><br>\$150.00                  |
| Principal occupation / Job title (See Instructions)<br>Retired                               |   | Employer (See Instructions)<br>N/A                           |
| Date<br>01/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                     | Amount of Contribution (\$)<br><br>\$10.00                   |
| Principal occupation / Job title (See Instructions)<br>Teacher                               |   | Employer (See Instructions)<br>University of Texas at Austin |
| Date<br>02/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                     | Amount of Contribution (\$)<br><br>\$10.00                   |
| Principal occupation / Job title (See Instructions)<br>Teacher                               |   | Employer (See Instructions)<br>University of Texas at Austin |
| Date<br>03/01/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                     | Amount of Contribution (\$)<br><br>\$10.00                   |
| Principal occupation / Job title (See Instructions)<br>Teacher                               |   | Employer (See Instructions)<br>University of Texas at Austin |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/18 Rpt: 6/29              |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388              |
| <b>4</b> Date<br>04/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00                   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Teacher |   | <b>9</b> Employer (See Instructions)<br>University of Texas at Austin |
| Date<br>05/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$10.00                            |
| Principal occupation / Job title (See Instructions)<br>Teacher          |   | Employer (See Instructions)<br>University of Texas at Austin          |
| Date<br>06/01/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Beck, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$10.00                            |
| Principal occupation / Job title (See Instructions)<br>Teacher          |   | Employer (See Instructions)<br>University of Texas at Austin          |
| Date<br>06/08/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Black, Hannah<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$50.00                            |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |   | Employer (See Instructions)<br>Not Employed                           |
| Date<br>03/02/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bouchard, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731             | Amount of Contribution (\$)<br><br>\$100.00                           |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>none                                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/18 Rpt: 7/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388 |
| <b>4</b> Date<br>05/12/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bradley, Pegg<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Therapist |   | <b>9</b> Employer (See Instructions)<br>Self             |
| Date<br>06/10/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brodsky, Nina (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731             | Amount of Contribution (\$)<br><br>\$10.00               |
| Principal occupation / Job title (See Instructions)<br>artist             |   | Employer (See Instructions)<br>self                      |
| Date<br>01/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Collins, Nancy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                  | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>none               |   | Employer (See Instructions)<br>none                      |
| Date<br>05/20/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Compton, Dorothy Ann (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757      | Amount of Contribution (\$)<br><br>\$40.00               |
| Principal occupation / Job title (See Instructions)<br>Artist             |   | Employer (See Instructions)<br>Self                      |
| Date<br>05/20/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Compton, Dorothy Ann (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757      | Amount of Contribution (\$)<br><br>\$150.00              |
| Principal occupation / Job title (See Instructions)<br>Artist             |   | Employer (See Instructions)<br>Self                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 4/18 Rpt: 8/29        |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388        |
| <b>4</b> Date<br>06/08/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Corkill, Caitlin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00             |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Consultant |  | <b>9</b> Employer (See Instructions)<br>Secret Weapon Solutions |
| Date<br>06/17/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Corwin, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                       | Amount of Contribution (\$)<br><br>\$10.00                      |
| Principal occupation / Job title (See Instructions)<br>Ret                 |  | Employer (See Instructions)<br>None                             |
| Date<br>02/10/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Corwin, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                       | Amount of Contribution (\$)<br><br>\$10.00                      |
| Principal occupation / Job title (See Instructions)<br>Ret                 |  | Employer (See Instructions)<br>None                             |
| Date<br>06/24/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cox, Ardis<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                         | Amount of Contribution (\$)<br><br>\$50.00                      |
| Principal occupation / Job title (See Instructions)<br>Not employed        |  | Employer (See Instructions)<br>Not employed                     |
| Date<br>03/03/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Crow, Lindsey<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78705                      | Amount of Contribution (\$)<br><br>\$10.00                      |
| Principal occupation / Job title (See Instructions)<br>RN                  |  | Employer (See Instructions)<br>Seton                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/18 Rpt: 9/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388 |
| <b>4</b> Date<br>04/06/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Crow, Lindsey<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78705 | <b>7</b> Amount of Contribution (\$)<br><br>\$40.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>RN  |   | <b>9</b> Employer (See Instructions)<br>Seton            |
| Date<br>06/17/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Daniel, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Encino, CA 91436                    | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>musician     |   | Employer (See Instructions)<br>self                      |
| Date<br>04/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Field, Megan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                    | Amount of Contribution (\$)<br><br>\$50.00               |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>Retired                   |
| Date<br>05/07/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Field, Megan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                    | Amount of Contribution (\$)<br><br>\$300.00              |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>Retired                   |
| Date<br>01/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                  | Amount of Contribution (\$)<br><br>\$1.00                |
| Principal occupation / Job title (See Instructions)<br>Theater Tech |   | Employer (See Instructions)<br>Bullock Museum            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 6/18 Rpt: 10/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>02/15/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Theater Tech |  | <b>9</b> Employer (See Instructions)<br>Bullock Museum    |
| Date<br>03/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                   | Amount of Contribution (\$)<br><br>\$1.00                 |
| Principal occupation / Job title (See Instructions)<br>Theater Tech          |  | Employer (See Instructions)<br>Bullock Museum             |
| Date<br>04/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                   | Amount of Contribution (\$)<br><br>\$1.00                 |
| Principal occupation / Job title (See Instructions)<br>Theater Tech          |  | Employer (See Instructions)<br>Bullock Museum             |
| Date<br>05/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                   | Amount of Contribution (\$)<br><br>\$1.00                 |
| Principal occupation / Job title (See Instructions)<br>Theater Tech          |  | Employer (See Instructions)<br>Bullock Museum             |
| Date<br>06/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flowers, Harry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701                   | Amount of Contribution (\$)<br><br>\$1.00                 |
| Principal occupation / Job title (See Instructions)<br>Theater Tech          |  | Employer (See Instructions)<br>Bullock Museum             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 7/18 Rpt: 11/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>06/15/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fredricks, Virginia<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| Date<br>06/08/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gardner, Jamie<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                        | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>01/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gilliam, Sue<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                          | Amount of Contribution (\$)<br><br>\$80.00                |
| Principal occupation / Job title (See Instructions)<br>artist                |   | Employer (See Instructions)<br>none                       |
| Date<br>06/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gilliam, Susan J<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                      | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>01/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                          | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 8/18 Rpt: 12/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>02/26/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00       |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757  |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not employed |   | <b>9</b> Employer (See Instructions)<br>Not employed      |
| Date<br>03/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri          | Amount of Contribution (\$)<br><br>\$10.00                |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78757           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed               |
| Date<br>04/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri          | Amount of Contribution (\$)<br><br>\$10.00                |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78757           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed               |
| Date<br>05/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri          | Amount of Contribution (\$)<br><br>\$10.00                |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78757           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed               |
| Date<br>06/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Haden, Lorri          | Amount of Contribution (\$)<br><br>\$10.00                |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78757           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not employed          |   | Employer (See Instructions)<br>Not employed               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                |   | <b>1</b> Total pages Schedule A1:<br>Sch: 9/18 Rpt: 13/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>01/14/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726 | <b>7</b> Amount of Contribution (\$) \$25.00              |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Yoga Instructor |   | <b>9</b> Employer (See Instructions)<br>LASR              |
| Date<br>02/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                   | Amount of Contribution (\$) \$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Slp                      |   | Employer (See Instructions)<br>TSBVI                      |
| Date<br>03/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                   | Amount of Contribution (\$) \$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Slp                      |   | Employer (See Instructions)<br>TSBVI                      |
| Date<br>04/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                   | Amount of Contribution (\$) \$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Slp                      |   | Employer (See Instructions)<br>TSBVI                      |
| Date<br>05/14/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                   | Amount of Contribution (\$) \$25.00                       |
| Principal occupation / Job title (See Instructions)<br>Slp                      |   | Employer (See Instructions)<br>TSBVI                      |

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**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>    |   | <b>1</b> Total pages Schedule A1:<br>Sch: 10/18 Rpt: 14/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>06/14/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hiller, Jay<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Slp |   | <b>9</b> Employer (See Instructions)<br>TSBVI              |
| Date<br>04/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ireson, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                 | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>none                        |
| Date<br>01/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ireson, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                 | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>none                        |
| Date<br>01/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757               | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>Retired                     |
| Date<br>02/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757               | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired      |   | Employer (See Instructions)<br>Retired                     |

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**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 11/18 Rpt: 15/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>03/28/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)<br>Retired            |
| Date<br>04/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                     |
| Date<br>05/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                     |
| Date<br>06/28/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keysor, Georgia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                     |
| Date<br>05/03/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kyba, Ferne<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                       | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>none                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 12/18 Rpt: 16/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>06/15/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leesa, Tilotta<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Round Rock, TX 78664 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>06/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leff, Debra<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                          | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>01/11/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                     |
| Date<br>02/11/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                     |
| Date<br>03/11/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                   | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired               |  | Employer (See Instructions)<br>Retired                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 13/18 Rpt: 17/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>04/11/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.) | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00        |
|   | <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                                     |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |   | <b>9</b> Employer (See Instructions)<br>Retired            |
| Date<br>05/11/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.)          | Amount of Contribution (\$)<br><br>\$50.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78756  |  |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                     |
| Date<br>06/11/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loomis, Mina (Ms.)          | Amount of Contribution (\$)<br><br>\$50.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78756  |  |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                     |
| Date<br>06/17/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lyford, Sara                | Amount of Contribution (\$)<br><br>\$10.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78763  |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |   | Employer (See Instructions)<br>Not Employed                |
| Date<br>01/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Martin, Betsy Palmer        | Amount of Contribution (\$)<br><br>\$1,000.00              |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78731  |  |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>None                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                |  | <b>1</b> Total pages Schedule A1:<br>Sch: 14/18 Rpt: 18/29                     |
| <b>2</b> FILER NAME<br>Rosedale Huddle  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388                       |
| <b>4</b> Date<br>05/04/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McLean, Gentry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00                            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Patent attorney |  | <b>9</b> Employer (See Instructions)<br>Kowert, Hood, Munyon, Rankin & Goetzel |
| Date<br>06/04/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McLean, Gentry<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                   | Amount of Contribution (\$)<br><br>\$10.00                                     |
| Principal occupation / Job title (See Instructions)<br>Patent attorney          |  | Employer (See Instructions)<br>Kowert, Hood, Munyon, Rankin & Goetzel          |
| Date<br>06/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rutishauser, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731              | Amount of Contribution (\$)<br><br>\$200.00                                    |
| Principal occupation / Job title (See Instructions)<br>Retired                  |  | Employer (See Instructions)<br>Retired   |
| Date<br>04/30/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schenk, Eric<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                     | Amount of Contribution (\$)<br><br>\$25.00                                     |
| Principal occupation / Job title (See Instructions)<br>Not employed             |  | Employer (See Instructions)<br>Not employed                                    |
| Date<br>04/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schenk, Eric<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                     | Amount of Contribution (\$)<br><br>\$25.00                                     |
| Principal occupation / Job title (See Instructions)<br>Not employed             |  | Employer (See Instructions)<br>Not employed                                    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>      |   | 1 Total pages Schedule A1:<br>Sch: 15/18 Rpt: 19/29 |
| 2 FILER NAME<br>Rosedale Huddle                                       |   | 3 Filer ID (Ethics Commission Filers)<br>00085388   |
| 4 Date<br>03/23/2025  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schenk, Eric    | 7 Amount of Contribution (\$) \$25.00               |
|   | 6 Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                                  |   |
| 8 Principal occupation / Job title (See Instructions)<br>Not employed |   | 9 Employer (See Instructions)<br>Not employed       |
| Date<br>02/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schenk, Eric      | Amount of Contribution (\$) \$50.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                                    |   |
| Principal occupation / Job title (See Instructions)<br>Not employed   |   | Employer (See Instructions)<br>Not employed         |
| Date<br>06/15/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schleuse, William | Amount of Contribution (\$) \$100.00                |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                                    |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |   | Employer (See Instructions)<br>Not Employed         |
| Date<br>01/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Siff, Judith      | Amount of Contribution (\$) \$250.00                |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                                    |   |
| Principal occupation / Job title (See Instructions)<br>Retired        |   | Employer (See Instructions)<br>none                 |
| Date<br>02/11/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Smolinsky, Gerald | Amount of Contribution (\$) \$100.00                |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                                    |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |   | Employer (See Instructions)<br>Not Employed         |

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**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 16/18 Rpt: 20/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>01/25/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>02/25/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>03/25/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/25/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>05/25/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                   | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                |

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| <b>The Instruction Guide explains how to complete this form.</b>                             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/18 Rpt: 21/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>06/25/2025  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed                 |  | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>01/19/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stanley, Jeanie R (Rev.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731       | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Retired                               |  | Employer (See Instructions)<br>none                        |
| Date<br>03/15/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thompson, Sara Jo<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731              | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired writer, editor, social worker |  | Employer (See Instructions)<br>Retired                     |
| Date<br>04/26/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thompson, Sara Jo<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731              | Amount of Contribution (\$)<br><br>\$50.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired writer, editor, social worker |  | Employer (See Instructions)<br>Retired                     |
| Date<br>01/16/2025   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Warner, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                  | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>retired                               |  | Employer (See Instructions)<br>retired                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |  | <b>1</b> Total pages Schedule A1:<br>Sch: 18/18 Rpt: 22/29 |
| <b>2</b> FILER NAME<br>Rosedale Huddle                                      |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388   |
| <b>4</b> Date<br>01/17/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Warner, David | <b>7</b> Amount of Contribution (\$) \$300.00              |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731 |  |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>retired     |  | <b>9</b> Employer (See Instructions)<br>retired            |
| Date<br>05/16/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>White, Sandra          | Amount of Contribution (\$) \$50.00                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78759          |  |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |  | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/26/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wright, Tibby          | Amount of Contribution (\$) \$50.00                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78731          |  |  |
| Principal occupation / Job title (See Instructions)<br>Retired              |  | Employer (See Instructions)<br>none                        |

# 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.

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| <b>1</b> Total pages Schedule F1:<br>Sch: 1/7 Rpt: 23/29 | <b>2</b> FILER NAME<br>Rosedale Huddle | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388 |
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|-----------------------------|-----------------------------------|
| <b>4</b> Date<br>05/03/2025 | <b>5</b> Payee name<br>Brewtorium |
|-----------------------------|-----------------------------------|

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|---|---|
| <b>6</b> Amount (\$)<br>\$269.49<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>6015 Dillard Circle<br>Suite A<br>Austin, TX 78752 |
|---|---|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting room |
|---------------------------------|--|--|

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| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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| Date<br>05/07/2025 | Payee name<br>Brewtorium |
|--------------------|--------------------------|

|  |  |
|--|--|
| Amount (\$)<br>\$150.00<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>6015 Dillard Circle<br>Suite A<br>Austin, TX 78752 |
|--|--|

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|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>tape damage to meeting room wallpaper |
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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|------------------------------------|
| Date<br>06/23/2025 | Payee name<br>Compton, Dorothy Ann |
|--------------------|------------------------------------|

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|---|---|
| Amount (\$)<br>\$77.91<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>2600 Ellise<br><br>Austin, TX 78757 |
|---|---|

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|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Banner supplies |
|-------------------------------|--|---|

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| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/7 Rpt: 24/29 | <b>2</b> FILER NAME<br>Rosedale Huddle | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388 |
|--|--|--|

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|-----------------------------|-------------------------------------|
| <b>4</b> Date<br>03/28/2025 | <b>5</b> Payee name<br>Field, Megan |
|-----------------------------|-------------------------------------|

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|---|--|
| <b>6</b> Amount (\$)<br>\$313.93<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>5901 Sarah Ct<br><br>Austin, TX 78757 |
|---|--|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Flyers for table at Cornyn town hall |
|---------------------------------|---|--|

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|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|----------------------------|
| Date<br>04/28/2025 | Payee name<br>Field, Megan |
|--------------------|----------------------------|

|  |   |
|--|---|
| Amount (\$)<br>\$238.15<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>5901 Sarah Ct<br><br>Austin, TX 78757 |
|--|---|

|                        |  |   |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Hands-Off picnic flyers from PostNet |
|------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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|--------------------|----------------------------|
| Date<br>06/23/2025 | Payee name<br>Field, Megan |
|--------------------|----------------------------|

|  |   |
|--|---|
| Amount (\$)<br>\$176.15<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>5901 Sarah Ct<br><br>Austin, TX 78757 |
|--|---|

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|------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Reimbursement for flyers from PostNet |
|------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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# 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 -         | 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/7 Rpt: 25/29  | <b>2</b> FILER NAME<br>Rosedale Huddle   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>03/08/2025   | <b>5</b> Payee name<br>McKenzie, JoAnn   |   |
| <b>6</b> Amount (\$)<br>\$300.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>4100 Jackson Ave<br>#441<br>Austin, TX 78731  |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Justin Anderson<br>Freelance videographer |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>04/30/2025  | Payee name<br>McKenzie, JoAnn  |   |
| Amount (\$)<br>\$179.20<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>4100 Jackson Ave<br>#441<br>Austin, TX 78731           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Postcard stamps     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Postcard stamps from USPS                 |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>04/30/2025  | Payee name<br>McKenzie, JoAnn  |   |
| Amount (\$)<br>\$313.93<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>4100 Jackson Ave<br>#441<br>Austin, TX 78731           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>PostNet Inv 628765 Plug In Flyers         |
| 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.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/7 Rpt: 26/29  | <b>2</b> FILER NAME<br>Rosedale Huddle  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>06/18/2025   | <b>5</b> Payee name<br>McKenzie, JoAnn  |   |
| <b>6</b> Amount (\$)<br>\$1,125.10<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>4100 Jackson Ave<br>#441<br>Austin, TX 78731   |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>2000 Postcard stamps | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>2000 Postcard stamps from USPS for outreach postcards |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>04/03/2025  | Payee name<br>PostNetTX 157   |   |
| Amount (\$)<br>\$300.00<br><br><input type="checkbox"/> Expenditure from corporate funds            | Payee address; City; State; Zip Code<br>3571 Far West Blvd<br><br>Austin, TX 78731              |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>banners   |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>05/01/2025  | Payee name<br>PostNetTX 157   |   |
| Amount (\$)<br>\$240.00<br><br><input type="checkbox"/> Expenditure from corporate funds            | Payee address; City; State; Zip Code<br>3571 Far West Blvd<br><br>Austin, TX 78731              |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>2 banners   |
| 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.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/7 Rpt: 27/29  | <b>2</b> FILER NAME<br>Rosedale Huddle  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>06/13/2025   | <b>5</b> Payee name<br>PostNetTX 157  |   |
| <b>6</b> Amount (\$)<br>\$247.50<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>3571 Far West Blvd<br><br>Austin, TX 78731 |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>No Kings flyers   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>06/16/2025  | Payee name<br>PostNetTX 157   |   |
| Amount (\$)<br>\$13.89<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>3571 Far West Blvd<br><br>Austin, TX 78731          |   |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Sales tax for No Kings flyers left off original invoice |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>05/20/2025  | Payee name<br>The Commune   |   |
| Amount (\$)<br>\$200.00<br><br><input type="checkbox"/> Expenditure from corporate funds          | Payee address; City; State; Zip Code<br>101 E North Loop Blvd<br><br>Austin, TX 78751       |   |
| <b>PURPOSE OF EXPENDITURE</b>   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>meeting room  |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/7 Rpt: 28/29 | <b>2</b> FILER NAME<br>Rosedale Huddle | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388 |
|--|--|--|

|                             |                                    |
|-----------------------------|------------------------------------|
| <b>4</b> Date<br>06/21/2025 | <b>5</b> Payee name<br>The Commune |
|-----------------------------|------------------------------------|

|   |  |
|---|--|
| <b>6</b> Amount (\$)<br>\$200.00<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>101 E North Loop Blvd<br><br>Austin, TX 78751 |
|---|--|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting room |
|---------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                           |
|--------------------|---------------------------|
| Date<br>06/22/2025 | Payee name<br>The Commune |
|--------------------|---------------------------|

|  |   |
|--|---|
| Amount (\$)<br>\$200.00<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>101 E North Loop Blvd<br><br>Austin, TX 78751 |
|--|---|

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Meeting room for August |
|-------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                       |
|--------------------|-----------------------|
| Date<br>01/28/2025 | Payee name<br>Wix.com |
|--------------------|-----------------------|

|   |   |
|---|---|
| Amount (\$)<br>\$26.90<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>40 Namal<br><br>Tel Aviv 6350671 Israel |
|---|---|

|                               |  |  |
|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website domain renewal |
|-------------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/7 Rpt: 29/29  | <b>2</b> FILER NAME<br>Rosedale Huddle   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00085388  |
| <b>4</b> Date<br>02/04/2025   | <b>5</b> Payee name<br>Wix.com   |   |
| <b>6</b> Amount (\$)<br>\$818.37<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>40 Namal<br><br>Tel Aviv 6350671 Israel       |   |
| <b>8</b> PURPOSE OF EXPENDITURE   | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Web site hosting renewal      |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                                      | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>06/01/2025  | Payee name<br>Wix.com  |   |
| Amount (\$)<br>\$96.93<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>40 Namal<br><br>Tel Aviv 6350671 Israel                |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>domain name 3 years           |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>06/30/2025  | Payee name<br>Wix.com  |   |
| Amount (\$)<br>\$96.93<br><br><input type="checkbox"/> Expenditure from corporate funds           | Payee address; City; State; Zip Code<br>40 Namal<br><br>Tel Aviv 6350671 Israel                |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>alternate domain name 3 years |
| Complete ONLY if direct expenditure to benefit C/OH   | Candidate/Officeholder name  | Office sought Office held   |