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** 10/29/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 13527 N. Tracewood Bend Houston, TX 77077 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **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** 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 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
River Oaks Area Demo	cratic Women			00037876	<u> </u>
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. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	7. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
F. CONTRIBUTION	111 1 3 3 1 3 7	DOLUTION CONTR	IDUITIONS (OTUED TUAN)	<u> </u>	
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	OR GUARANTEES ON IT AND THE STATE OF THE STA	LLY)	\$	52.00
	2. TOTAL POLITICA	L CONTRIBUTION	S	\$	1 570 00
	(OTHER THAN PLEI	DGES, LOANS, OR G	UARANTEES OF LOANS)		1,573.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENI	DITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	3	\$	1,045.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		INTAINED AS OF THE LAST	DAY \$	21,158.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OU REPORTING PERIOD	TSTANDING LOANS AS OF	THE \$	0.00
.6 AFFIDAVIT	<u> </u>			<u> </u>	
		true and	r, or affirm, under penalty of ped d correct and includes all infor Fitle 15, Election Code.	erjury, that the mation require	accompanying report is ed to be reported by me
			Mr. Leif	C. Hatlen	
			Signature of Ca	ımpaign Treas	urer
AFFIX NOTARY	' STAMP / SEAL ABOVE				
Sworn to and subscribed	I hefore me, by the said		, t	his the	day
	_, 20, to certify \				duy
	-	,			
Signature of officer ad	lministering oath	Printed name of office	er administering oath	Title of off	icer administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

				3 of 10	
17 COMMITT	(Ethics C	ommission Filers)			
River Oaks Area Democratic Women 00037876					
19 SCHEDUL NAME OF	SUB	STOTAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	982.00	
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	591.00	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$		
9.	SCHEDULE E: LOANS		\$		
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	1,045.29	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	5.35	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instruc	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/10	
2	FILER NAME River Oaks A	Area Democratic Women				3	Filer ID (Ethics Commission 00037876	n Filers)
4	Date 10/13/2025	te 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$55.00		
8	Principal occu Photographe	Houston, TX 77027 pation / Job title (See Instructions	s)	9	Employer (See Instructions Self	<u> </u> s)		
	Date 10/06/2025	Full name of contributor Harris, Susan Contributor address; City; S Houston, TX 77005	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
	Principal occu Physician	pation / Job title (See Instructions	s)		Employer (See Instructions Self	<u> </u>		
	Date 10/17/2025	Full name of contributor Huebel, Martha Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$100.00
	Dringing! aggs	Houston, TX 77035 pation / Job title (See Instructions	I		Employer (See Instructions	<u></u>		
	Not Employe	•	5)		Employer (See Instructions Not Employed	·)		
	Date 10/07/2025	Full name of contributor Lesley, Renee Contributor address; City; S Houston, TX 77006	out-of-state PAC (ID#:_ tate; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu Business Ow	pation / Job title (See Instructions	s)		Employer (See Instructions Corporate move Consul		J Inc	
	Date 10/14/2025	Full name of contributor McNeil, Kathryn Contributor address; City; S Houston, TX 77006	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$300.00
	Principal occu consultant	pation / Job title (See Instructions	s)		Employer (See Instructions self	s)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/10		
2	FILER NAME River Oaks A	Area Democratic Women		3	Filer ID (Ethics Commission 00037876	n Filers)	
4	Date 10/15/2025	5 Full name of contributor		7	Amount of Contribution (\$)	\$25.00	
8	Principal occu	Houston, TX 77004 upation / Job title (See Instructions)	9 Employer (See Instructions)			
	Not Employe	ed	Not Employed				
	Date Full name of contributor out-of-state PAC (ID#:) 10/16/2025 Natarajan, Rufi Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00	
		Houston, TX 77007					
	Principal occu Events Direc	pation / Job title (See Instructions) ctor	Employer (See Instructions Harris County Precinct 4				
	Date Full name of contributor out-of-state PAC (ID#:) Safi, Jill Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Houston, TX 77040					
	Principal occu not employe	pation / Job title (See Instructions) d	Employer (See Instructions)			
	Date 10/16/2025	Full name of contributor out-of-state PAC (ID#:_Wiener, Marla Contributor address; City; State; Zip Code Houston, TX 77096			Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/10 FILER NAME 3 Filer ID (Ethics Commission Filers) River Oaks Area Democratic Women 00037876 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/03/2025 Natarajan, Rufi \$591.00 Banner Pop-up frame 7 Contributor address; City; State; Zip Code Houston, TX 77007 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Harris County Precinct 4 **Events Director** 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nt Solicitation/Fundraising Expense
e Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/3 Rpt: 7/10	River Oaks Area Democratic Women 00037876
4 Date	5 Payee name
10/25/2025	ACTBLUE TEXAS
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$36.75	PO Box 382110
Expenditure from corporate funds	Cambridge, MA 02238-2110
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense transaction fee
	transaction ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
	<u> </u>
Date	Payee name
10/13/2025	Bown, Christopher
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	3315 Mercer St
Expenditure from corporate funds	Houston, TX 77027
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.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	webmaster
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitate to benefit 6/6	"
Date	Payee name
10/22/2025	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$63.95	1701 West Alabama ST
Expenditure from corporate funds	Houston, TX 77098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	refreshments for meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Contributions/ Donations Made By -

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/3 Rpt: 8/10	River Oaks Area Democratic Women 00037876
4 Date	5 Payee name
10/20/2025	MailChimp
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$57.56	675 Ponce de Leon Ave NE
	Suite 5000
Expenditure from corporate funds	Atlanta, GA 30308
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
LAI LIBITORE	Check if Austin, TX, officeholder living expense
	email service
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/23/2025	Olive Gardwn
Amount (\$)	Payee address; City; State; Zip Code
\$412.03	2929 Southwest Fwy
Ψ412.00	2323 Southwest I wy
Expenditure from corporate funds	Houston, TX 77098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
LAI LIBITORE	Check if Austin, TX, officeholder living expense
	refreshments for meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/13/2025	St. Stephens Episcopal Church
Amount (\$)	Payee address; City; State; Zip Code
\$175.00	1805 W. Alamba
Expenditure from	
corporate funds	Houston, TX 77098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	meeting room rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft C/O	•

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 9/10	River Oaks Area Democratic Women 00037876
4 Date	5 Payee name
10/13/2025	Wilkinson, Wendy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.00	410 Asbury ST
— Foreseditors from	
Expenditure from corporate funds	Houston, TX 77007
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	websitr update
	' '
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/13/2025	Williams, Sharon
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	7447 Cambridge #55
Expenditure from corporate funds	Houston, TX 77054
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	newsletter editor
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	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: 10/10 2 FILER NAME 3 Filer ID (Ethics Commission Filers) River Oaks Area Democratic Women 00037876 5 Name of person from whom amount is received 8 Amount (\$) Date 10/25/2025 \$5.35 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