



# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> River Oaks Area Democratic Women	<b>13 Filer ID</b> (Ethics Commission Filers) 00037876
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (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> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 90.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,851.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 3,828.27
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 33,419.40
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.

Mr. Leif C. Hatlen  
\_\_\_\_\_  
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 - MPAC

<b>17 COMMITTEE NAME</b> River Oaks Area Democratic Women		<b>18 Filer ID</b> (Ethics Commission Filers) 00037876
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,851.00
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	\$ 3,828.27
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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 8.76

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/7 Rpt: 4/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/04/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Karen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Karen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adams, Kristen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions) LSPI
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baldwin, Shannon <hr/> Contributor address; City; State; Zip Code  Humble, TX 77396	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris County
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barreto, Larisa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Policy		Employer (See Instructions) Harris County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/7 Rpt: 5/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 01/28/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Briones, Lesley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>8</b> Principal occupation / Job title (See Instructions) Commissioner		<b>9</b> Employer (See Instructions) Harris County
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Care, Lilian <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) Charles Taylor adjusting
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Darlene <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cleary, Carolyn <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007-5813	Amount of Contribution (\$)  \$8.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook, Kara <hr/> Contributor address; City; State; Zip Code  Spring, TX 77380	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director of Innovation		Employer (See Instructions) Harris County Precinct 4

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 01/28/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cottage, Jan <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77098-2086	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Durham, Michelle <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Instride Health
Date 01/28/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Field, Linda J <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Friedrich, Mary Anne <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gasner, Kathleen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77082	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/04/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hatlen, Leif <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huebel, Martha <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huebel, Martha <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/08/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Christyna <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) EdwardJones
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lyerly, Patty <hr/> Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/7 Rpt: 8/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 01/28/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McSherry, Noelle <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Technical Trainer		<b>9</b> Employer (See Instructions) Rochich AGV Solutions
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Natarajan, Rufi <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Events Director		Employer (See Instructions) Harris County Precinct 4
Date 02/09/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Natarajan, Rufi <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Events Director		Employer (See Instructions) Harris County Precinct 4
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nath, Audrey <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Neurologist		Employer (See Instructions) Audrey Nath MD PLLC
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nizza, Diane <hr/> Contributor address; City; State; Zip Code  Houston, TX 77098	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/7 Rpt: 9/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/25/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simmons, Lauren Ashley <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77054	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Organizer		<b>9</b> Employer (See Instructions) BAJI
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singh, Manpreet <hr/> Contributor address; City; State; Zip Code  BELLAIRE, TX 77401	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris county
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spain, Charles <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006-5018	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 02/04/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valle, Toni <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) UNIVERSITY of Houston
Date 02/25/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waldrop, Teresa <hr/> Contributor address; City; State; Zip Code  Houston, TX 77001	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Texas State Judiciary

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/7 Rpt: 10/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/25/2026	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Ambalika <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$8.00
<b>8</b> Principal occupation / Job title (See Instructions) Senior Campaign Strategist		<b>9</b> Employer (See Instructions) ACLU

# 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: Sch: 1/4 Rpt: 11/15	<b>2</b> FILER NAME River Oaks Area Democratic Women	<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/25/2026	<b>5</b> Payee name ACTBLUE TEXAS	
<b>6</b> Amount (\$) \$109.12  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 382110  Cambridge, MA 02238-2110	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/11/2026	Payee name Bown, Christopher	
Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b> Houston, TX 77027	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense webmaster
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/17/2026	Payee name Bua's Bistro	
Amount (\$) \$1,062.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1330 Post Oak Blvd  Houston, TX 77056	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refreshment for a memorial service for a member
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: Sch: 2/4 Rpt: 12/15	<b>2</b> FILER NAME River Oaks Area Democratic Women	<b>3</b> Filer ID (Ethics Commission Filers) 00037876
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<b>4</b> Date 02/12/2026	<b>5</b> Payee name Drop of the Creator
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<b>6</b> Amount (\$) \$250.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 10929 Chimney Rock Rd  Houston, TX 77096
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense International Woman's Day
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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 02/18/2026	Payee name HEB
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Amount (\$) \$53.35  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1701 West Alabama ST  Houston, TX 77098
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refreshments for meeting
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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 02/18/2026	Payee name MailChimp
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Amount (\$) \$57.56  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email service
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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  
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: Sch: 3/4 Rpt: 13/15	<b>2</b> FILER NAME River Oaks Area Democratic Women	<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/17/2026	<b>5</b> Payee name Phoenica	
<b>6</b> Amount (\$) \$324.86  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1001 Austin St  houston, TX 77010	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense refreshments for meeting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2026	Payee name Planned Parenthood of Greater Texas	
Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7424 Greenville Avenue, Suite 206  Dallas, TX 75231	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fund raising Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/11/2026	Payee name Wilkinson, Wendy	
Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code  <b>REDACTED PER 254.0401, ELEC. CODE</b>  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense web site update
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: Sch: 4/4 Rpt: 14/15	<b>2</b> FILER NAME River Oaks Area Democratic Women	<b>3</b> Filer ID (Ethics Commission Filers) 00037876
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<b>4</b> Date 02/11/2026	<b>5</b> Payee name Williams, Sharon
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<b>6</b> Amount (\$) \$100.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  <div style="background-color: black; color: white; text-align: center; padding: 2px;"><b>REDACTED PER 254.0401, ELEC. CODE</b></div> Houston, TX 77054
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newsletter editor
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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 02/09/2026	Payee name Zoom Video Communications Inc.
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Amount (\$) \$170.46  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd, 6th Floor  San Jose, CA 95113
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense video conferencing
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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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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 15/15
<b>2</b> FILER NAME River Oaks Area Democratic Women		<b>3</b> Filer ID (Ethics Commission Filers) 00037876
<b>4</b> Date 02/25/2026	<b>5</b> Name of person from whom amount is received Amegy Bank	<b>8</b> Amount (\$) \$8.76
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code  Houston, TX 77210-4837	
	<b>7</b> Purpose for which amount is received interest	<input type="checkbox"/> Check if political contribution returned to filer