

Schedule A: Direct Contributions Over \$100 Full Name of Contributor Mailing Address of Contributor	Donor Information 1. Employer or Business (If Corporate/Company Donor: N/A) 2. Type of Business(If Corporate Donor Type of Business) 3. Business Location	Date Received	Contribution This Period	Aggregate To Date
H.F. Partnership LLP PO Box 60250 Palm Bay, FL 32906-0250	1. 2.Apartment Building Operators 3.Palm Bay, FL	10/29/2025	\$10,000.00	\$10,000.00

No Schedule B results to display.

No Schedule E-1 results to display.