



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

**14** C/OH NAME  
**Mr Sakib Shaikh**

**15** Filer ID (Ethics Commission Filers)

**16** NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17</b> CONTRIBUTION TOTALS  EXPENDITURE TOTALS  CONTRIBUTION BALANCE  OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 47750.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 5034.50
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 66436.16
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25000.00

**18** 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.

\*\*\* Electronically Certified \*\*\*

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr Sakib Shaikh, this the 14th day of July, 2024, 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 - COH

FORM C/OH  
COVER SHEET PG 3

<b>19</b> FILER NAME <b>Mr Sakib Shaikh</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$ 46750.00</b>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$ 1000.00</b>
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		<b>\$ 0</b>
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		<b>\$ 25000.00</b>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 5034.50</b>
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$ 0</b>
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		<b>\$ 0</b>
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		<b>\$ 0</b>
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/19/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sakib Shaikh**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**7639 Mission Hvn  
Boerne, TX 78015**

8 Principal occupation / Job title (See instructions)  
**Business Analyst**

9 Employer (See instructions)  
**American Payroll Association**

Date  
**3/21/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jay Brown**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**4127 Mt Laurel  
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**3/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Asad A Baig**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**2313 Oklahoma Ave  
Plano, TX 75074**

Principal occupation / Job title (See instructions)  
**HR**

Employer (See instructions)  
**PSA**

Date  
**3/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Asif Fasih**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**7733 Louis Pasteur Drive #304  
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)  
**Senior Software Engineer**

Employer (See instructions)  
**H-E-B**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>2 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/23/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hamzah S Khalaf</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>9415 Conbar Lane Helotes, TX 78023</b>		
8 Principal occupation / Job title (See instructions) <b>Physician</b>		9 Employer (See instructions) <b>Hamzah Khalaf</b>
Date <b>3/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Meena Syed</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>14007 Glade Bridge Ct Cypress, TX 77429</b>		
Principal occupation / Job title (See instructions) <b>Anesthesia Assistant</b>		Employer (See instructions) <b>Ambient Anesthesia</b>
Date <b>3/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Shahid Malik</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>21110 Pax HI San Antonio, TX 78256</b>		
Principal occupation / Job title (See instructions) <b>Atty</b>		Employer (See instructions) <b>Perez and malik</b>
Date <b>3/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hosam Attaya</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>17803 La Cantera Terrace #6706 San Antonio, TX 78256</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Strg</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**3 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/26/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Muhammad Abdullah**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**13610 Barsan Rd  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**Doctor**

9 Employer (See instructions)

Date  
**3/26/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Israr Khan**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**6339 Maverick Trail Dr  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Scientist**

Employer (See instructions)  
**Alamo Labs**

Date  
**3/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Veronica Garibay**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**13426 Baldwin Ridge  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Self Employed**

Date  
**3/28/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Faraaz Mir**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**25022 Earthstone Dr  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Car sales**

Employer (See instructions)  
**Noblex Holdings**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**4 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/2/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anwar Tahir**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**13538 Barsan Dr  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**Business Owner**

9 Employer (See instructions)  
**Self Employed**

Date  
**4/2/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ayaz Akmal**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**5231 Casbury  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Self Employed**

Date  
**4/7/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ali Baba Inter. Food Market**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**9307 Wurzbach Rd  
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Ali Baba**

Date  
**4/7/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rana Brother LLC**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**6358 Old Pearsall  
San Antonio, TX 78242**

Principal occupation / Job title (See instructions)  
**NA**

Employer (See instructions)  
**NA**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>5 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/8/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Maliha Imami</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>202 Five Oaks San Antonio, TX 78209</b>		
8 Principal occupation / Job title (See instructions) <b>Nonprofit</b>		9 Employer (See instructions) <b>SAMMinistries</b>
Date <b>4/15/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mohammad Khan</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>11310 Lazarro In Richmond, TX 77406</b>		
Principal occupation / Job title (See instructions) <b>Dentist</b>		Employer (See instructions) <b>Self</b>
Date <b>4/15/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Shameem Akhtar</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>7323 Steeple Park San Antonio, TX 78256</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/15/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>SANI PANHWAR</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>12235 Ashcroft Circle Jurupa Valley, CA 91752</b>		
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Mehran Company LLC</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**6 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/15/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Marcello Martinez**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**1543 E Highland Blvd  
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)  
**Architect**

9 Employer (See instructions)  
**1718 Architecture**

Date  
**4/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ijaz Hussain**

Amount of contribution (\$)  
**400.00**

Contributor address; City; State; Zip Code  
**222 Verde Bluff  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Engineer**

Employer (See instructions)  
**Stago**

Date  
**4/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Asim Shaikh**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**20618 Fertile Valley  
Richmond, TX 77407**

Principal occupation / Job title (See instructions)  
**Project Manager**

Employer (See instructions)  
**Teksystems**

Date  
**4/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jafar A**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**290 Spruce Ct  
Azusa, CA 91702**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Optum**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**7 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/15/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**rafay a mohajir**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**11111 Flanker Way  
Richmond, TX 77407**

8 Principal occupation / Job title (See instructions)  
**Crna**

9 Employer (See instructions)  
**Usap**

Date  
**4/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Hidayat Nagori**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**23207 Tablerock Way  
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)  
**Dentist**

Employer (See instructions)  
**Celebrate dental**

Date  
**4/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Khalec Tarboush**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**3 Walden Elms  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Dentist**

Employer (See instructions)  
**Self**

Date  
**4/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sarfraz Keshwani**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**18110 Gilbreath Drive  
Richmond, TX 77407**

Principal occupation / Job title (See instructions)  
**Engineer**

Employer (See instructions)  
**Wolters Kluwer**

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**8 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/17/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Aftab Haq**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**21703 Givenchy HI  
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)  
**Physician**

9 Employer (See instructions)  
**Aftab Haq**

Date  
**4/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sukhdeep Kaur**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**814 W Craig Pl  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Education Consultant**

Employer (See instructions)  
**EDreimagined**

Date  
**4/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rashid Sharaf**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**1 Chambord  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Renal Associates**

Date  
**4/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Asif Vohra**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**3414 Fredericksburg Rd.  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Self Employed**

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

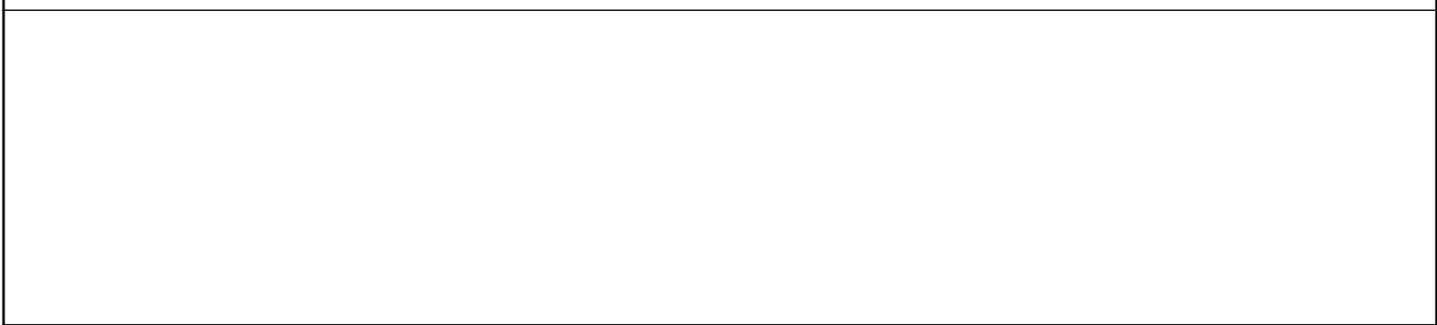
The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/18/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Khalid Bajwa</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>24403 Galo Canyon San Antonio, TX 78260</b>		
8 Principal occupation / Job title (See instructions) <b>Self Employed</b>		9 Employer (See instructions) <b>Self Employed</b>
Date <b>4/18/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Irfan Butt</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>9006 Eagle Bend Helotes, TX 78249</b>		
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Self Employed</b>
Date <b>4/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jawed Shaikh</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>7639 Mission Hvn Boerne, TX 78015</b>		
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NA</b>
Date <b>4/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sammir Elsunni</b>	Amount of contribution (\$) <b>30.00</b>
Contributor address; City; State; Zip Code <b>4106 Misty Glade San Antonio, TX 78247</b>		
Principal occupation / Job title (See instructions) <b>Cust. Sev. Spc.</b>		Employer (See instructions) <b>Vericast</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>10 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/21/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Saqib Syed</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>10 Kings View San Antonio, TX 78257</b>		
8 Principal occupation / Job title (See instructions) <b>Physician</b>		9 Employer (See instructions) <b>South texas renal care group</b>
Date <b>4/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jay Brown</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>4127 Mount Laurel San Antonio, TX 78240</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>4/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Aaron Tyler</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>6446 Babcock Rd #35 San Antonio, TX 78249</b>		
Principal occupation / Job title (See instructions) <b>Professor</b>		Employer (See instructions) <b>St. Marys University</b>
Date <b>4/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ayhan Oruc</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>9014 Brae Ridge San Antonio, TX 78249</b>		
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>self</b>



**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>11 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Anthony Valdivia</b>	7 Amount of contribution (\$) <b>75.00</b>
6 Contributor address; City; State; Zip Code <b>11306 Candle Park San Antonio, TX 78249</b>		
8 Principal occupation / Job title (See instructions) <b>Self-employed</b>		9 Employer (See instructions) <b>Anthony Valdivia</b>
Date <b>4/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ambika Dani</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1138 Fox Pointe Drive Cheswick, PA 15024</b>		
Principal occupation / Job title (See instructions) <b>Head of Programs</b>		Employer (See instructions) <b>NMS</b>
Date <b>5/1/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Aisha Rashid</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>21110 Pax HI San Antonio, TX 78256</b>		
Principal occupation / Job title (See instructions) <b>CPA</b>		Employer (See instructions) <b>Valero</b>
Date <b>5/1/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ravpreet Singh</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>8526 Camp Verde Rio San Antonio, TX 78255</b>		
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>Self Employed</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**12 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/1/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Inderjit Mehat**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**11219 Jadestone Blvd  
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)  
**Self Employed**

9 Employer (See instructions)  
**Self Employed**

Date  
**5/2/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mark Watson**

Amount of contribution (\$)  
**150.00**

Contributor address; City; State; Zip Code  
**7714 Kennedy Hill #4202  
San Antonio, TX 78235**

Principal occupation / Job title (See instructions)  
**Realtor**

Employer (See instructions)  
**Keller Williams**

Date  
**5/3/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Marvi Panhwar**

Amount of contribution (\$)  
**120.00**

Contributor address; City; State; Zip Code  
**7639 Mission Haven  
Boerne, TX 78015**

Principal occupation / Job title (See instructions)  
**Social worker**

Employer (See instructions)  
**Nonprofit**

Date  
**5/5/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Asif Memon**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**1225 Vienna Dr. #392  
Sunnyvale, CA 94089**

Principal occupation / Job title (See instructions)  
**Web Developer Manager**

Employer (See instructions)  
**Tailored Brands**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**13 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/6/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sajid Bajwa**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**24334 Arboles Verdes  
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**5/6/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Raja Hafeez**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**3623 Valencia Peak  
San Antonio, TX 78261**

Principal occupation / Job title (See instructions)  
**Banker**

Employer (See instructions)  
**NA**

Date  
**5/8/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nader Mehdawi**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**8920 John Barrett Dr  
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)  
**COO**

Employer (See instructions)  
**Culturingua**

Date  
**5/9/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Ricardo Venegas**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**3918 Clark Ave #23266  
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)  
**Real Estate**

Employer (See instructions)  
**Self**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>14 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/9/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sadia Sheikh</b> ..... 6 Contributor address; City; State; Zip Code <b>25806 Echo Mtn San Antonio, TX 78260</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Not Employed</b>		9 Employer (See instructions) <b>Not Employed</b>
Date <b>5/9/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Betullah Colak</b> ..... Contributor address; City; State; Zip Code <b>288 Milkweed Dr Allentown, PA 18104</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Imam</b>		Employer (See instructions) <b>Respect Islamic Grad School</b>
Date <b>5/10/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jamilyn Keeton</b> ..... Contributor address; City; State; Zip Code <b>6426 Hemlock Dale San Antonio, TX 78222</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See instructions) <b>Finance Operations Advisor</b>		Employer (See instructions) <b>M Leslie Palmer Consulting Group</b>
Date <b>5/11/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sissi Yado</b> ..... Contributor address; City; State; Zip Code <b>2707 Buena Vista Street San Antonio, TX 78207</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Executive Director</b>		Employer (See instructions) <b>Texas For All</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/12/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>William Goodman</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>100 W El Prado Dr #305 San Antonio, TX 78212</b>		
8 Principal occupation / Job title (See instructions) <b>Not Employed</b>		9 Employer (See instructions) <b>Not Employed</b>
Date <b>5/12/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ronald Smith</b>	Amount of contribution (\$) <b>10.00</b>
Contributor address; City; State; Zip Code <b>13510 Charter Bend San Antonio, TX 78231</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>5/13/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James Stadick</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>5613 Emerson ct Fairview, TX 75069</b>		
Principal occupation / Job title (See instructions) <b>Sales</b>		Employer (See instructions) <b>Microsoft</b>
Date <b>5/14/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jamal Siddiqui</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2656 S 120th Pl Burien, WA 98168</b>		
Principal occupation / Job title (See instructions) <b>Health care analyst</b>		Employer (See instructions) <b>Gainwell Technologies</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**16 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/14/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Farheen Farooqui**

7 Amount of contribution (\$)  
**100.00**

6 Contributor address; City; State; Zip Code  
**4840 Rabbit Trail  
Plano, TX 75074**

8 Principal occupation / Job title (See instructions)  
**Lawyer**

9 Employer (See instructions)  
**Self**

Date  
**5/14/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anne Hardgrove**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**114 E Huisache Ave  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Professor**

Employer (See instructions)  
**UTSA**

Date  
**5/15/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nida Memon**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**1085 Tasman Dr #224  
Sunnyvale, CA 94089**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**5/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jaami Baig**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**5203 Lemona ave #4  
Los Angeles, CA 91411**

Principal occupation / Job title (See instructions)  
**Dentist**

Employer (See instructions)  
**Self**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/16/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Khaled Alsadoon**

7 Amount of contribution (\$)  
**100.00**

6 Contributor address; City; State; Zip Code  
**10865 Shaenfield Rd #2103  
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)  
**Owner**

9 Employer (See instructions)  
**Hala cafe**

Date  
**5/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Matin Tabbakh**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**23023 Steeple blf  
San Antonio, TX 78256**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**5/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Saqib Ali**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**12129 Sheets Farm Road  
Gaithersburg, MD 20878**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**5/18/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Shehnaz Sarmast**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**1180 Rowley Mile  
fairview, TX 75069**

Principal occupation / Job title (See instructions)  
**doctor**

Employer (See instructions)  
**dermatology associates**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/18/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Charles Fuentes</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>4523 Emma Way San Antonio, TX 78222</b>		
8 Principal occupation / Job title (See instructions) <b>Technician</b>		9 Employer (See instructions) <b>At&amp;t</b>
Date <b>5/18/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Olivia Johnson</b>	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code <b>4327 Jarbet Drive San Antonio, TX 78220</b>		
Principal occupation / Job title (See instructions) <b>Analyst</b>		Employer (See instructions) <b>CoSA</b>
Date <b>5/18/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Angela Warren</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>7542 Copper Kettle Converse, TX 78109</b>		
Principal occupation / Job title (See instructions) <b>Health</b>		Employer (See instructions) <b>City of San Antonio</b>
Date <b>5/20/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jaffer Humayun</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>621 Ridgemont Dr Allen, TX 75002</b>		
Principal occupation / Job title (See instructions) <b>Customer Success</b>		Employer (See instructions) <b>Pure Storage</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**19 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/20/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Fahim Siddiqui**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**22415 navasota cir  
San Antonio, TX 78259**

8 Principal occupation / Job title (See instructions)  
**Pilot**

9 Employer (See instructions)  
**Spirit**

Date  
**5/22/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Aamir Ehsan**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**7 Grand Terrace  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Self Employed**

Date  
**5/22/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Hanif Pathan**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**18119 Resort View  
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**VA**

Date  
**5/22/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Saleem Rana**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**13426 Baldwin Ridge  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Self Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**20 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/22/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Khair Baloch**

7 Amount of contribution (\$)  
**60.00**

6 Contributor address; City; State; Zip Code  
**9419 Silver Vista  
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)  
**Bus Driver**

9 Employer (See instructions)  
**NISD**

Date  
**5/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nadeen Siddiqui**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**1813 Riggs Pl NW  
Washington, DC 20009**

Principal occupation / Job title (See instructions)  
**Product Manager**

Employer (See instructions)  
**Capital One**

Date  
**5/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Habiba Noor**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**25011 Granite Path  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**teacher**

Employer (See instructions)  
**Trinity University**

Date  
**5/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Shahla Wahid**

Amount of contribution (\$)  
**25.00**

Contributor address; City; State; Zip Code  
**17918 Harbour Bridge Point Dr  
Cypress, TX 77429**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/24/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Khawaja Tariq</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>4146 Farnsworth Blvd Frisco, TX 75034</b>		
8 Principal occupation / Job title (See instructions) <b>Credit VP</b>		9 Employer (See instructions) <b>JPMC</b>
Date <b>5/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Delia Hernandez</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>4014 Adair Bluff San Antonio, TX 78223</b>		
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>
Date <b>5/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Asif Fasih</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>7733 Louis Pasteur Drive #304 San Antonio, TX 78229</b>		
Principal occupation / Job title (See instructions) <b>Software Engineer</b>		Employer (See instructions) <b>H-E-B</b>
Date <b>5/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tarek Alaaddin</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2880 Donnell Dr #2401 Round Rock, TX 78664</b>		
Principal occupation / Job title (See instructions) <b>Software engineer</b>		Employer (See instructions) <b>GM</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**22 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/27/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Noorjehan Javed**

7 Amount of contribution (\$)  
**50.00**

6 Contributor address; City; State; Zip Code  
**1410 Beckwith Drive  
Arlington, TX 76018**

8 Principal occupation / Job title (See instructions)  
**Not Employed**

9 Employer (See instructions)  
**Not Employed**

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Paul Martin**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**207 E Mulberry Ave #1  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Investment Advisor**

Employer (See instructions)  
**Martin Capital Advisors LLP**

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Avais Bhurgri**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**3019 Spider Lily  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**Berg Companies**

Date  
**5/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sonny Shaikh**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**1797 Alaqua drive  
Longwood, FL 32779**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**AGQ**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**23 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rashin Mazaheri**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**106 S St Marys #230  
San Antonio, TX 78295**

8 Principal occupation / Job title (See instructions)  
**Attorney**

9 Employer (See instructions)  
**Self**

Date  
**5/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mamoun Rafati**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**19935 Terra Canyon  
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)  
**BCBA**

Employer (See instructions)  
**AB Solutions**

Date  
**5/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Raheel Raof**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**106 Bella Luna  
Spring, TX 77381**

Principal occupation / Job title (See instructions)  
**Product Owner**

Employer (See instructions)  
**ABS**

Date  
**5/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Yusif Mohammad**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**15328 Escarpment Oak  
Helotes, TX 78023**

Principal occupation / Job title (See instructions)  
**Pediatric Dentist**

Employer (See instructions)  
**Southside Childrens Dental Center**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**24 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**5/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anwar Khan**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**9206 Primrose Hill  
San Antonio, TX 78251**

8 Principal occupation / Job title (See instructions)  
**Dentist**

9 Employer (See instructions)  
**Centromed**

Date  
**5/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nazli Siddiqui**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**4662 Sparrows Nest  
San Antonio, TX 78250**

Principal occupation / Job title (See instructions)  
**Business**

Employer (See instructions)  
**Self employed**

Date  
**5/31/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nazli Uppal**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**18702 Desert flower  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**VA**

Date  
**5/31/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**mojgan panah**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**13423 Gable village drive  
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)  
**Realtor**

Employer (See instructions)  
**Self employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>25 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/31/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Justin Rosenbaum</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>5566 Cross Pond San Antonio, TX 78249</b>		
8 Principal occupation / Job title (See instructions) <b>Teacher</b>		9 Employer (See instructions) <b>Northside</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ahad Akram</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>23003 Blackwater Rd San Antonio, TX 78258</b>		
Principal occupation / Job title (See instructions) <b>Health admin</b>		Employer (See instructions) <b>Lucid sleep</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hael Makki</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>18818 Turtle Cv San Antonio, TX 78255</b>		
Principal occupation / Job title (See instructions) <b>Accountant</b>		Employer (See instructions) <b>Self employed</b>
Date <b>5/31/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Osman Soofi</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>7926 Emmeline Dr Boerne, TX 78015</b>		
Principal occupation / Job title (See instructions) <b>Project Manager</b>		Employer (See instructions) <b>Accenture</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>26 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>5/31/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rashid Sharaf</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>1 Chambord San Antonio, TX 78257</b>		
8 Principal occupation / Job title (See instructions) <b>Physician</b>		9 Employer (See instructions) <b>Renal Associates</b>
Date <b>6/1/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chad Barris</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1905 Westcliff Dr Eules, TX 76040</b>		
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>AISD</b>
Date <b>6/1/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rafsunjani Mohammad</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>1135 Peacemaker San Antonio, TX 78258</b>		
Principal occupation / Job title (See instructions) <b>PA</b>		Employer (See instructions) <b>UHS</b>
Date <b>6/4/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rashid Atique</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>25843 Scenic Rock San Antonio, TX 78255</b>		
Principal occupation / Job title (See instructions) <b>physician</b>		Employer (See instructions) <b>dfhc</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>27 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/4/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hajar Moshirsadri</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>9015 Wellesley Manor Dr. San Antonio, TX 78240</b>		
8 Principal occupation / Job title (See instructions) <b>Director of Operations &amp; Strategic Partnerships</b>		9 Employer (See instructions) <b>Maverick MRI</b>
Date <b>6/5/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Farhan Islam</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>10915 Albeon Park San Antonio, TX 78249</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/5/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tariq Khan</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>19022 Yellowstone Landing Ct Cypress, TX 77433</b>		
Principal occupation / Job title (See instructions) <b>Lawyer</b>		Employer (See instructions) <b>NA</b>
Date <b>6/5/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sheikh Ahsan</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>126 S Main St Boerne, TX 78006</b>		
Principal occupation / Job title (See instructions) <b>Business</b>		Employer (See instructions) <b>Ivi Rugs Inc</b>

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>28 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/5/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Masoon Balouch</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>110 Brioadway #170 San Antonio, TX 78205</b>		
8 Principal occupation / Job title (See instructions) <b>Not Employed</b>		9 Employer (See instructions) <b>Not Employed</b>
Date <b>6/6/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Christopher Gieseke</b>	Amount of contribution (\$) <b>75.00</b>
Contributor address; City; State; Zip Code <b>8611 Cape Valley San Antonio, TX 78227</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/7/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Omar Husain</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>4828 Walking Stick Rd. McKinney, TX 75071</b>		
Principal occupation / Job title (See instructions) <b>Professor</b>		Employer (See instructions) <b>Prescott College</b>
Date <b>6/7/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>My Info Yan</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>122 Calumet PI San Antonio, TX 79209</b>		
Principal occupation / Job title (See instructions) <b>Sale</b>		Employer (See instructions) <b>Real Broker LLC</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/7/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Usman Mohammed**

7 Amount of contribution (\$)  
**50.00**

6 Contributor address; City; State; Zip Code  
**5700 Highlands Plaza Drive #4017  
Saint Louis, MO 63110**

8 Principal occupation / Job title (See instructions)  
**Dentist**

9 Employer (See instructions)  
**Familia Dental**

Date  
**6/7/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sarah Samreen**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**314 Pueblo Pintado  
Helotes, TX 78023**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**6/9/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sajidah Marwat-Khan**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**9206 Primrose Hill  
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)  
**Pharmacist**

Employer (See instructions)  
**Walgreens**

Date  
**6/11/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Shazli Malik**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**21123 Harvest Hills  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Pathology Associates of San Antonio**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/11/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Courtney Wai**

7 Amount of contribution (\$)  
**25.00**

6 Contributor address; City; State; Zip Code  
**5926 Larkspur Valley  
San Antonio, TX 78218**

8 Principal occupation / Job title (See instructions)  
**Professional Learning Facilitator**

9 Employer (See instructions)  
**Southern Poverty Law Center**

Date  
**6/12/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Afaque Hussain**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**851 Big Sky Dr  
san antonio, TX 78245**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**6/12/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Faraaz Hussain**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**24518 Bliss Cyn  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**System Administrator**

Employer (See instructions)  
**Applied Insight**

Date  
**6/13/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Saagar Shaikh**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**6677 Santa Monica Blvd  
los angeles, CA 90038**

Principal occupation / Job title (See instructions)  
**actor**

Employer (See instructions)  
**self employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/13/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**racquel gilford**

7 Amount of contribution (\$)  
**50.00**

6 Contributor address; City; State; Zip Code  
**10131 Windstone Creek  
san antonio, TX 78254**

8 Principal occupation / Job title (See instructions)  
**Consultant**

9 Employer (See instructions)  
**Self-employed**

Date  
**6/13/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Shazia Ali**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**24518 Bliss Canyon  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**Homemaker**

Employer (See instructions)  
**Homemaker**

Date  
**6/13/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nicholas Lopez**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**522 Pleasant Valley Drive  
Boerne, TX 78008**

Principal occupation / Job title (See instructions)  
**CWEO**

Employer (See instructions)  
**BBCW Holdings**

Date  
**6/13/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kristin Flores**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**12510 Glad Heart  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**n/a**

Employer (See instructions)  
**n/a**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>32 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/14/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sarah Shaikh</b>	7 Amount of contribution (\$) <b>200.00</b>
6 Contributor address; City; State; Zip Code <b>51301 Shamrock Hills Drive Granger, IN 46530</b>		
8 Principal occupation / Job title (See instructions) <b>Not Employed</b>		9 Employer (See instructions) <b>Not Employed</b>
Date <b>6/14/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Eugene Marck</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>345 Argyle Ave San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/14/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ashfaq Khan</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>28766 Balcones Creek Boerne, TX 78006</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Hcpnv</b>
Date <b>6/15/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Salim Ahmedabadi</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>12014 waterway ridge San Antonio, TX 78249</b>		
Principal occupation / Job title (See instructions) <b>Engineer</b>		Employer (See instructions) <b>Accenture</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/15/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Syed Ahmed**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**1130 Jackson Avenue  
River Forest, IL 60305**

8 Principal occupation / Job title (See instructions)  
**Physician**

9 Employer (See instructions)  
**Self**

Date  
**6/16/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Saeed Kazmi**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**11020 Liberty Farms Dr  
Austin, TX 78754**

Principal occupation / Job title (See instructions)  
**Engineer**

Employer (See instructions)  
**Lighthousesolar**

Date  
**6/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Shekhar Sinha**

Amount of contribution (\$)  
**5.00**

Contributor address; City; State; Zip Code  
**2838 Running Fawn  
San Antonio, TX 78261**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

Date  
**6/17/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Noor Assar**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**1502 Roxburg Way  
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)  
**Self Employed**

Employer (See instructions)  
**Sangam Entertainment**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>34 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/19/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nader Farhat</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>2225 Edison Drive San Antonio, TX 78201</b>		
8 Principal occupation / Job title (See instructions) <b>IT Director</b>		9 Employer (See instructions) <b>Alamo Architects</b>
Date <b>6/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Navid Saigal</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>4 Belcourt Pl San Antonio, TX 78257</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Renal Associates</b>
Date <b>6/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Raana Sidiki</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>8010 Summit Cliff Ct Richmond, TX 77407</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Abdul Ahad Hayee</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>3840 Ridgetop Ln Plano, TX 75074</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Self</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/19/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Bilqees Shah**

7 Amount of contribution (\$)  
**20.00**

6 Contributor address; City; State; Zip Code  
**9419 Silver Vista  
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)  
**Unemployed**

9 Employer (See instructions)  
**Unemployed**

Date  
**6/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jafar A**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**290 Spruce Ct  
Azusa, CA 91702**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Optum**

Date  
**6/20/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anas Athar**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**6004 Ridgemore Dr  
Parker, TX 75002**

Principal occupation / Job title (See instructions)  
**Orthodontist**

Employer (See instructions)  
**Smile Brands**

Date  
**6/22/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sebastien Laroche**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**230 Lucas Street #101  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Policy Director**

Employer (See instructions)  
**Methodist Healthcare Ministries**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/22/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Iram Baloch**

7 Amount of contribution (\$)  
**40.00**

6 Contributor address; City; State; Zip Code  
**9419 Silver Vista  
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)  
**Assistant**

9 Employer (See instructions)  
**NISD**

Date  
**6/22/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sohnal Baloch**

Amount of contribution (\$)  
**20.00**

Contributor address; City; State; Zip Code  
**9419 Silver Vista  
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)  
**Retail Employee**

Employer (See instructions)  
**GAP Inc**

Date  
**6/23/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Amber Zafar**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**7173 Standing Boy Road  
Columbus, GA 31904**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Piedmont**

Date  
**6/24/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Gety Siddiqui**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**13702 Wood Pt  
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>37 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/24/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tazeen Syed</b> ..... 6 Contributor address; City; State; Zip Code <b>3923 Glenellen San Antonio, TX 78257</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Self employed</b>		9 Employer (See instructions) <b>Pulmonology and sleep</b>
Date <b>6/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Faraaz Osmani</b> ..... Contributor address; City; State; Zip Code <b>8240 Palomino Drive Naperville, IL 60540</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jawaad Hasan</b> ..... Contributor address; City; State; Zip Code <b>1539 4th St #512 Santa Monica, CA 90401</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>Sales</b>		Employer (See instructions) <b>Snapchat</b>
Date <b>6/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Shaan Baig</b> ..... Contributor address; City; State; Zip Code <b>19505 Astor Place Northridge, CA 91324</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Dentist</b>		Employer (See instructions) <b>Baig Dental</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>38 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/24/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Wajiha Ibrahim</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>2250 N Fairview St Burbank, CA 90038</b>		
8 Principal occupation / Job title (See instructions) <b>Photographer</b>		9 Employer (See instructions) <b>Self</b>
Date <b>6/24/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Delia Hernandez</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>4014 Adair Bluff San Antonio, TX 78223</b>		
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>
Date <b>6/25/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jahid Agrawala</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1802 Enero Park San Antonio, TX 78230</b>		
Principal occupation / Job title (See instructions) <b>Investor</b>		Employer (See instructions) <b>Jahid</b>
Date <b>6/25/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kausar Mohammed</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1809 Oakwood Ave #1 Glendale, CA 91208</b>		
Principal occupation / Job title (See instructions) <b>actor</b>		Employer (See instructions) <b>self-employed</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>39 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/25/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Howaida Werfelli</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>5119 Flipper Drive San Antonio, TX 78238</b>		
8 Principal occupation / Job title (See instructions) <b>Entrepreneur</b>		9 Employer (See instructions) <b>Tripolis Mediterranean Grill LLC</b>
Date <b>6/25/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Armen Babajanian</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>122 Atwater Drive Castle Hills, TX 78213</b>		
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>World Affairs Council</b>
Date <b>6/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ayesha Khan</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>3711 Hundred Oaks Dr San Antonio, TX 78217</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>SA Voice &amp; ENT Institute</b>
Date <b>6/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lauren Deal</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2343 W Kings Hwy San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Fundraiser</b>		Employer (See instructions) <b>San Antonio Food Bank</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**40 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/27/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Salman Qayyum**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**302 Eucharis  
San Antonio, TX 78245**

8 Principal occupation / Job title (See instructions)  
**Consulting Manager**

9 Employer (See instructions)  
**Deloitte**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cecily Pretty**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**124 E Jadon Dr  
Lebanon, OR 97355**

Principal occupation / Job title (See instructions)  
**Administrative Services Director**

Employer (See instructions)  
**City of Sweet Home OR**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Abelardo Salinas III**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**126 E. Norwood Ct  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Engineer**

Employer (See instructions)  
**K Friese**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Muhammad Syed**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**9006 Warbler Creek  
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)  
**Doctor**

Employer (See instructions)  
**Methodist Childrens**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**41 of 50**

2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/27/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mohammad Ali Tukdi**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**13276 Research Blvd #107  
Austin, TX 78750**

8 Principal occupation / Job title (See instructions)  
**Realtor**

9 Employer (See instructions)  
**DASH REALTY**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Meher Masood**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**9003 Maggie court  
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)  
**Nn**

Employer (See instructions)  
**Nn**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Tasneem Qamari**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**13117 Caterpillar Dr  
Frisco, TX 75035**

Principal occupation / Job title (See instructions)  
**Finance**

Employer (See instructions)  
**BD**

Date  
**6/27/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anne Ferguson**

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**1915 N Flores St #1  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Nonprofit Associate**

Employer (See instructions)  
**San Antonio Area Foundation**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>42 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/27/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Muhammad Hisham Khan</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>5222 Breeze Way San Antonio, TX 78249</b>		
8 Principal occupation / Job title (See instructions) <b>Accountant</b>		9 Employer (See instructions) <b>NA</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James Cooper Jr</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>302 Palma Noce San Antonio, TX 78253</b>		
Principal occupation / Job title (See instructions) <b>Workforce Development</b>		Employer (See instructions) <b>Alamo Colleges</b>
Date <b>6/27/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ahsan Awan</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>3727 Coggeshall Ln San Antonio, TX 78257</b>		
Principal occupation / Job title (See instructions) <b>ClinOps</b>		Employer (See instructions) <b>PPD</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Wajahat Siddiqui</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>268 Bowery #3 Manhattan, NY 10012</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>43 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Curtis Loos</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>16483 Revello Dr Helotes, TX 78023</b>		
8 Principal occupation / Job title (See instructions) <b>Healthcare Executive</b>		9 Employer (See instructions) <b>Corepath</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Margaret Costantino</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>8417 Bear Tree Circle San Antonio, TX 78255</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mohamed Werfelli</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>108 County Road 2816 Mico, TX 78056</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Atifa Zafar</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>239 Winding Lane San Antonio, TX 78232</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/28/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Armen Babajanian**

7 Amount of contribution (\$)  
**50.00**

6 Contributor address; City; State; Zip Code  
**122 Atwater Drive  
Castle Hills, TX 78213**

8 Principal occupation / Job title (See instructions)  
**CEO**

9 Employer (See instructions)  
**World Affairs Council**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rabelle Siddiki**

Amount of contribution (\$)  
**25.00**

Contributor address; City; State; Zip Code  
**22675 Simonet Blanc Terrace  
Ashburn, VA 20148**

Principal occupation / Job title (See instructions)  
**Registered Nurse**

Employer (See instructions)  
**Inova Loudoun Hospital**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Nazli Siddiki**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**2200 Astoria Circle #207  
Herndon, VA 20170**

Principal occupation / Job title (See instructions)  
**Teacher**

Employer (See instructions)  
**Playful Platoes**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Lubna Alghoul**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**3035 Fall Crest Dr  
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)  
**Pharmacist**

Employer (See instructions)  
**Evolve pharmacy**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>45 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/29/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jason Massiatte</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>15823 Augusta Corner Converse, TX 78247</b>		
8 Principal occupation / Job title (See instructions) <b>President</b>		9 Employer (See instructions) <b>Ma Hila's Heart</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Acevedo Ana</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>9614 Dove Shadow San Antonio, TX 78230</b>		
Principal occupation / Job title (See instructions) <b>Executive Director</b>		Employer (See instructions) <b>San Antonio Education Partnership</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>H. Drew Galloway</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>9106 Harbor View Street San Antonio, TX 78242</b>		
Principal occupation / Job title (See instructions) <b>Executive Director</b>		Employer (See instructions) <b>BRIDGE Infrastructure Fund / NEO Philanthropy Inc.</b>
Date <b>6/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Harun Rashid</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1542 Crescent Glen San Antonio, TX 78258</b>		
Principal occupation / Job title (See instructions) <b>Engineer</b>		Employer (See instructions) <b>MHR Engineering</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/29/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Amjed Baghdadi**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**17925 Prato Dr  
Pflugerville, TX 78660**

8 Principal occupation / Job title (See instructions)  
**Healthcare Administrator**

9 Employer (See instructions)  
**DVA**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Saamir Shaikh**

Amount of contribution (\$)  
**120.00**

Contributor address; City; State; Zip Code  
**7639 Mission Hvn  
Boerne, TX 78015**

Principal occupation / Job title (See instructions)  
**Self**

Employer (See instructions)  
**Self**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Said Atif**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**5903 Hart Field  
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)  
**Employed**

Employer (See instructions)  
**Namcc**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Marco Flores**

Amount of contribution (\$)  
**75.00**

Contributor address; City; State; Zip Code  
**19 Champion Trl  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Lawyer**

Employer (See instructions)  
**Self**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/29/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jerry Buecher**

7 Amount of contribution (\$)  
**25.00**

6 Contributor address; City; State; Zip Code  
**1814 Mancero Park  
san antonio, TX 78230**

8 Principal occupation / Job title (See instructions)  
**Teacher**

9 Employer (See instructions)  
**NISD**

Date  
**6/29/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Fatima Arebi**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**108 CR 2816  
Mico, TX 78053**

Principal occupation / Job title (See instructions)  
**Chef**

Employer (See instructions)  
**Tripoli's**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Irfan Shehzad**

Amount of contribution (\$)  
**200.00**

Contributor address; City; State; Zip Code  
**8527 Nichols sky  
Boerne, TX 78015**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Pediatrix**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Umar Khan**

Amount of contribution (\$)  
**300.00**

Contributor address; City; State; Zip Code  
**3203 Spider Lily  
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Physician**

Employer (See instructions)  
**Self**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
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2 FILER NAME  
**Mr Sakib Shaikh**

3 Filer ID (Ethics Commission Filers)

4 Date  
**6/30/2024**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Aizaz Hundal**

7 Amount of contribution (\$)  
**100.00**

6 Contributor address; City; State; Zip Code  
**21630 Milsa Dr #1431  
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)  
**Doctor**

9 Employer (See instructions)  
**Neurology**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Omar Akhil**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**310 W. Sunset  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Investment Advisor**

Employer (See instructions)  
**Vaulkshire LLC**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**ghulam jaffer**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**2432 Balmoor Trce  
Apex, NC 27523**

Principal occupation / Job title (See instructions)  
**PM**

Employer (See instructions)  
**Cisco**

Date  
**6/30/2024**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Abrar Hussain**

Amount of contribution (\$)  
**20.00**

Contributor address; City; State; Zip Code  
**851 Big Sky Dr  
San Antonio, TX 78245**

Principal occupation / Job title (See instructions)  
**Not Employed**

Employer (See instructions)  
**Not Employed**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>49 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/30/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Syed Husaini</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>67 Olmsted #103 Stanford, CA 94305</b>		
8 Principal occupation / Job title (See instructions) <b>Manager</b>		9 Employer (See instructions) <b>Procurement</b>
Date <b>6/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hadiyah Aljabri</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>11633 Northdale Dr Moorpark, CA 93021</b>		
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>
Date <b>6/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mario Bravo</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1554 West Mulberry Avenue San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Self-employed</b>		Employer (See instructions) <b>Mario Bravo</b>
Date <b>6/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ayaan Khan</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>7106 Hovingham San Antonio, TX 78257</b>		
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>IPHA</b>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>50 of 50</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>6/30/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Angela Barcus</b> ..... 6 Contributor address; City; State; Zip Code <b>114 Stardream Dr San Antonio, TX 78216</b>	7 Amount of contribution (\$) <b>50.00</b>
8 Principal occupation / Job title (See instructions) <b>Program coordinator</b>		9 Employer (See instructions) <b>UTSA</b>
Date <b>6/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ali Hakeem</b> ..... Contributor address; City; State; Zip Code <b>25523 Celtic Terrace Dr Katy, TX 77494</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Self</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ..... Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>1 of 1</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
5 Date <b>5/18/2024</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Martin Martinez</b> 7 Contributor address; City; State; Zip Code <b>110 Broadway #170 San Antonio, TX 78205</b>	8 Amount of Contribution \$ <b>500.00</b> 9 In-kind contribution description <b>Food and Venue for Fundraising Event</b> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) <b>NA</b>		11 Employer (FOR NON-JUDICIAL) (See instructions) <b>NA</b>
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
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)		
Date <b>6/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Nadia Mavrakis</b> Contributor address; City; State; Zip Code <b>8920 John Barrett Dr San Antonio, TX 78240</b>	Amount of Contribution \$ <b>500.00</b> In-kind contribution description <b>Food and Venue for Fundraising Event</b> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) <b>CEO</b>		Employer (FOR NON-JUDICIAL) (See instructions) <b>Culturlingua</b>
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: <b>1 of 1</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		<b>\$ 0</b>
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <b>1 of 1</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$ 0</b>
<b>5</b> Date of loan <b>3/1/2024</b>	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mr Sakib Shaikh</b>	<b>9</b> Loan Amount (\$) <b>25000.00</b>
<b>6</b> Is lender a financial institution? <b>N</b>	<b>8</b> Lender address; City; State; Zip Code <b>110 Broadway #170 San Antonio TX 78205</b>	<b>10</b> Interest rate <b>0.000000</b>
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See instructions) <b>Self Employed</b>		<b>13</b> Employer (See instructions) <b>Self Employed</b>
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$) <b>0.00</b>
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation (See instructions)		<b>21</b> Employer (See instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$)
Is lender a financial institution?	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See instructions)		Employer (See instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation (See instructions)		Employer (See instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 2</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>3/26/2024</b>	<b>5</b> Payee name <b>Texas Democratic Party</b>
-----------------------------------	--

<b>6</b> Amount (\$) <b>920.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1106 Lavaca St Austin, TX 78701</b>
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Other</b>	<b>(b)</b> Description <b>VAN</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<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 <b>4/12/2024</b>	Payee name <b>Bexar County Elections</b>
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Amount (\$) <b>50.00</b>	Payee address; City; State; Zip Code <b>100 Dolorosa San Antonio, TX 78205</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Other</b>	Description <b>Voter File Data</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>5/22/2024</b>	Payee name <b>Hilton Garden Inn San Antonio At The Rim</b>
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Amount (\$) <b>1064.50</b>	Payee address; City; State; Zip Code <b>5730 Rim Pass San Antonio, TX 78257</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Event Venue</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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: <b>2 of 2</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>6/15/2024</b>	<b>5</b> Payee name <b>Duale</b>	
<b>6</b> Amount (\$) <b>3000.00</b>	<b>7</b> Payee address;                      City;     State;     Zip Code <b>110 Broadway #170</b> <b>San Antonio, TX 78205</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	<b>(b)</b> Description <b>Campaign Management</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
	Office held	

Date	Payee name		
Amount (\$)	Payee address;                      City;     State;     Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date	Payee name		
Amount (\$)	Payee address;                      City;     State;     Zip Code		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F2: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
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<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**PURCHASE OF INVESTMENTS MADE  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F3:  
**1 of 1**

**2** FILER NAME  
**Mr Sakib Shaikh**

**3** Filer ID (Ethics Commission Filers)

**4** Date

**5** Name of person from whom investment is purchased

.....  
**6** Address of person from whom investment is purchased;                      City;                      State;                      Zip Code

**7** Description of investment

**8** Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....  
Address of person from whom investment is purchased;                      City;                      State;                      Zip Code

Description of investment

Amount of investment (\$)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By	Gifts/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 G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee Name	
<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address;                      City;      State;      Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;                      City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;                      City;      State;      Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/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)
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**The Instruction Guide explains how to complete this form**

<b>1</b> Total pages Schedule H: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Business name	
<b>6</b> Amount (\$)	<b>7</b> Business address;                      City;     State;     Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date	Business name	
Amount (\$)	Business address;                      City;     State;     Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held
Date	Business name	
Amount (\$)	Business address;                      City;     State;     Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought                      Office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories.)	<b>(b)</b> Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
1 of 1

2 FILER NAME  
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	..... 6 Address of person from whom amount is received; City; State; Zip Code	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

**SCHEDULE T**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <b>1 of 1</b>
2 FILER NAME <b>Mr Sakib Shaikh</b>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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**CANDIDATE / OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT**

**FORM C/OH - FR**

**The Instruction Guide explains how to complete this form.  
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••**

C/OH NAME  
**Mr Sakib Shaikh**

Filer ID (Ethics Commission Filers)

**SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

**FILER WHO IS NOT AN OFFICEHOLDER**

**•• Complete A & B below *only* if you are not an officeholder. ••**

**A. CAMPAIGN FUNDS**

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

**OFFICEHOLDER**

**•• Complete this section *only* if you are an officeholder. ••**

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest of other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder