

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>60</b>
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr</b>	FIRST <b>Sakib</b>	MI	<b>OFFICE USE ONLY</b>
	NICKNAME	LAST <b>Shaikh</b>	SUFFIX	Date Received <b>1/16/2025 9:38:57AM</b>
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; <b>110 Broadway #170</b> San Antonio TX 78205			
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( )	PHONE NUMBER -	EXTENSION	Date Hand-delivered or Date Postmarked
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mr</b>	FIRST <b>Drew</b>	MI	Receipt #
	NICKNAME	LAST <b>Galloway</b>	SUFFIX	Amount \$
<b>7</b> CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; <b>110 Broadway #170</b> San Antonio TX 78205			STATE; ZIP CODE
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE ( )	PHONE NUMBER -	EXTENSION	
<b>9</b> REPORT TYPE	<b>January 15: Semi-Annual</b>			
<b>10</b> PERIOD COVERED	Month Day Year <b>7/1/2024</b>		Month Day Year <b>12/31/2024</b>	
<b>11</b> ELECTION	ELECTION DATE Month Day Year <b>5/3/2025</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description _____		
<b>12</b> OFFICE	OFFICE HELD (if any) <b>NA</b>		<b>13</b> OFFICE SOUGHT (if known) <b>Council District 8</b>	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> Mr Sakib Shaikh		<b>15 Filer ID</b> (Ethics Commission Filers)
<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	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.	
	COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS
<b>17 CONTRIBUTION TOTALS</b>  <b>EXPENDITURE TOTALS</b>  <b>CONTRIBUTION BALANCE</b>  <b>OUTSTANDING LOAN TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16557.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 29891.32
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 57594.07
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25000.00
<b>18 AFFIDAVIT</b>		
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.		
<b>*** Electronically Certified ***</b>		
Signature of Candidate or Officeholder		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said <u>Mr Sakib Shaikh</u> this the <u>15th</u> day of <u>January</u> , 2025, 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>\$ 16557.00</b>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 0</b>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 29891.32</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

<p>The Instruction Guide explains how to complete this form.</p>			<b>1</b> Total pages Schedule A1: <b>1 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/3/2024</b>	<b>5</b> Full name of contributor <b>ANA SANDOVAL</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>75.00</b>
<b>6</b> Contributor address; <b>1222 Donaldson Avenue San Antonio, TX 78228</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Director</b>		<b>9</b> Employer (See instructions) <b>NALCAB</b>	
Date <b>7/3/2024</b>	Full name of contributor <b>HARRISON Elliff</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>1861 Brown Blvd Arlington, TX 76006</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>7/15/2024</b>	Full name of contributor <b>Jay Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>4127 Mount Laurel San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>7/19/2024</b>	Full name of contributor <b>Seema Dar</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>19284 Stoneoak Pkwy San Antonio, TX 78258</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Self</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>2 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/23/2024</b>	<b>5</b> Full name of contributor <b>Robert Garcia</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>4523 Echo Grove San Antonio, TX 78259</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>CPA</b>		<b>9</b> Employer (See instructions) <b>Self</b>	
Date <b>7/24/2024</b>	Full name of contributor <b>Delia Hernandez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>4014 Adair Bluff San Antonio, TX 78223</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>	
Date <b>8/5/2024</b>	Full name of contributor <b>AKR Trading</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>400.00</b>
Contributor address; <b>805 W Main St Kenedy, TX 78119</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Self Employed</b>	
Date <b>8/17/2024</b>	Full name of contributor <b>Aniq Bajwa</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>29635 Winter Copper Bulverde, TX 78163</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Mortgage Compliance Specialist</b>		Employer (See instructions) <b>USAA</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>3 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/24/2024</b>	<b>5</b> Full name of contributor <b>Jeri-Ashley Bremer</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>25.00</b>
<b>6</b> Contributor address; <b>13310 Langtry San Antonio, TX 78248</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>CEO</b>		<b>9</b> Employer (See instructions) <b>The Mindfulness Co.</b>	
Date <b>8/24/2024</b>	Full name of contributor <b>Delia Hernandez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>4014 Adair Bluff San Antonio, TX 78223</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>	
Date <b>8/25/2024</b>	Full name of contributor <b>Sajidah Marwat-Khan</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>9206 Primrose Hill San Antonio, TX 78251</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Pharmacist</b>		Employer (See instructions) <b>Walgreens</b>	
Date <b>9/3/2024</b>	Full name of contributor <b>Shazia Ali</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>24518 Bliss Canyon San Antonio, TX 78260</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Homemaker</b>		Employer (See instructions) <b>Homemaker</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>4 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/5/2024</b>	<b>5</b> Full name of contributor <b>Jay Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>10.00</b>
<b>6</b> Contributor address; <b>4127 Mt Laurel San Antonio, TX 78240</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>9/7/2024</b>	Full name of contributor <b>Roland Gonzales</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>5103 Newcastle Ln. San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Dad/Poet/Attorney</b>		Employer (See instructions) <b>Germer PLLC</b>	
Date <b>9/8/2024</b>	Full name of contributor <b>Paul Drexel</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>4202 Laurel Trail San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>9/8/2024</b>	Full name of contributor <b>Rafae Ahmed</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>3502 Ivory Creek San Antonio, TX 78258</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Analyst</b>		Employer (See instructions) <b>Kindercare</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>5 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/8/2024</b>	<b>5</b> Full name of contributor <b>Khawaja Ahmed</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>200.00</b>
<b>6</b> Contributor address; <b>3502 Ivory Creek San Antonio, TX 78258</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Engineer</b>		<b>9</b> Employer (See instructions) <b>GE</b>	
Date <b>9/8/2024</b>	Full name of contributor <b>Marcus Peoples</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>20.00</b>
Contributor address; <b>1002 Be 38Th St San Antonio, TX 78228</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Transit</b>		Employer (See instructions) <b>VIA</b>	
Date <b>9/8/2024</b>	Full name of contributor <b>Ann Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>11130 Vance Jackson #1320 San Antonio, TX 78230</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Gonzales ISD</b>	
Date <b>9/8/2024</b>	Full name of contributor <b>Maliha Imami</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>202 Five Oaks San Antonio, TX 78209</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Nonprofit</b>		Employer (See instructions) <b>SAMMinistries</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>6 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/8/2024</b>	<b>5</b> Full name of contributor <b>Elsa Esparza-Hamilton</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>20.00</b>
<b>6</b> Contributor address; <b>4026 Mount Laurel Dr. San Antonio, TX 78240</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>9/10/2024</b>	Full name of contributor <b>Sajid Bajwa</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>21114 Balmoral Palace San Antonio, TX 78158</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self employed</b>		Employer (See instructions) <b>Self Employed</b>	
Date <b>9/16/2024</b>	Full name of contributor <b>Meena Syed</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>14007 Glade Bridge Ct Cypress, TX 77429</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Anesthesia Assistant</b>		Employer (See instructions) <b>Ambient Anesthesia</b>	
Date <b>9/19/2024</b>	Full name of contributor <b>Boerne Corner Stop</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>211 S Main St Boerne, TX 78006</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self employed</b>		Employer (See instructions) <b>Self Employed</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>7 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/24/2024</b>	<b>5</b> Full name of contributor <b>Delia Hernandez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>4014 Adair Bluff San Antonio, TX 78223</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>PAC Manager</b>		<b>9</b> Employer (See instructions) <b>Camillo Companies</b>	
Date <b>9/25/2024</b>	Full name of contributor <b>Kris Summers</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>9702 Laurel Oaks St San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Financial Advisor</b>		Employer (See instructions) <b>Seasons Wealth LLC</b>	
Date <b>9/26/2024</b>	Full name of contributor <b>Ellen Barshop</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>15738 Dawn Crest San Antonio, TX 78248</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Temple Beth-El</b>	
Date <b>9/30/2024</b>	Full name of contributor <b>Whitney Rominger</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>4514 Black Oak Woods San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Therapist</b>		Employer (See instructions) <b>Self</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>8 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/3/2024</b>	<b>5</b> Full name of contributor <b>Marvi Panhwar</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>120.00</b>
<b>6</b> Contributor address; <b>7639 Mission Haven Boerne, TX 78015</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Social worker</b>		<b>9</b> Employer (See instructions) <b>Childsafe</b>	
Date <b>10/3/2024</b>	Full name of contributor <b>Chad Barris</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>1905 Westcliff Dr Euless, TX 76040</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Arlington isd</b>	
Date <b>10/4/2024</b>	Full name of contributor <b>Justin Rosenbaum</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>101.00</b>
Contributor address; <b>5566 Cross Pond San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Northside</b>	
Date <b>10/7/2024</b>	Full name of contributor <b>Asim Shaikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>20618 Fertile Valley Richmond, TX 77407</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Project Manager</b>		Employer (See instructions) <b>Teksystems</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>9 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/8/2024</b>	<b>5</b> Full name of contributor <b>Ann Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>10.00</b>
<b>6</b> Contributor address; <b>11130 Vance Jackson #1320</b> <b>San Antonio, TX 78230</b>			
<b>8</b> Principal occupation / Job title (See instructions) <b>Teacher</b>		<b>9</b> Employer (See instructions) <b>Gonzales ISD</b>	
Date <b>10/8/2024</b>	Full name of contributor <b>ghulam jaffer</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>2432 Balmoor Trce</b> <b>Apex, NC 27523</b>			
Principal occupation / Job title (See instructions) <b>PM</b>		Employer (See instructions) <b>Cisco</b>	
Date <b>10/9/2024</b>	Full name of contributor <b>Nazar Zaidi</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>20788 Norada Court</b> <b>Saratoga, CA 95070</b>			
Principal occupation / Job title (See instructions) <b>Engineer</b>		Employer (See instructions) <b>AMD</b>	
Date <b>10/10/2024</b>	Full name of contributor <b>Saeed Shaikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>10010 Halston Dr</b> <b>Sugar Land, TX 77498</b>			
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</b>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>10 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/10/2024</b>	<b>5</b> Full name of contributor <b>Aftab Usmani</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>25.00</b>
<b>6</b> Contributor address; <b>1014 Barry Way Fremont, CA 94536</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>It</b>		<b>9</b> Employer (See instructions) <b>Oracle</b>	
Date <b>10/10/2024</b>	Full name of contributor <b>Ashfaq Khan</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>28766 Balcones Creek Boerne, TX 78006</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Self</b>	
Date <b>10/10/2024</b>	Full name of contributor <b>Yusif Mohammad</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>15328 Escarpment Oak Helotes, TX 78023</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Pediatric Dentist</b>		Employer (See instructions) <b>Southside Childrens Dental Center</b>	
Date <b>10/10/2024</b>	Full name of contributor <b>Hosam Attaya</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>17803 La Cantera Terrace #6706 San Antonio, TX 78256</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Strg</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>11 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/10/2024</b>	<b>5</b> Full name of contributor <b>Shameem Akhtar</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>250.00</b>
<b>6</b> Contributor address; <b>7323 Steeple Park San Antonio, TX 78256</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>10/10/2024</b>	Full name of contributor <b>Asif Fasih</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>300.00</b>
Contributor address; <b>7733 Louis Pasteur Drive #304 San Antonio, TX 78229</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Software Engineer</b>		Employer (See instructions) <b>H-E-B</b>	
Date <b>10/24/2024</b>	Full name of contributor <b>Delia Hernandez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>4014 Adair Bluff San Antonio, TX 78223</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>	
Date <b>11/4/2024</b>	Full name of contributor <b>Sakib Shaikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>4238 Laurel Trl San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Self Employed</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>12 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/4/2024</b>	<b>5</b> Full name of contributor <b>Kinza Shaikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>6</b> Contributor address; <b>4238 Laurel Trl San Antonio, TX 78240</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Self Employed</b>		<b>9</b> Employer (See instructions) <b>Self Employed</b>	
Date <b>11/8/2024</b>	Full name of contributor <b>Ann Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>11130 Vance Jackson #1320 San Antonio, TX 78230</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Gonzales ISD</b>	
Date <b>11/9/2024</b>	Full name of contributor <b>Amatulla Contractor</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>6015 Piney Knoll Ct. Katy, TX 77449</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Self</b>	
Date <b>11/12/2024</b>	Full name of contributor <b>Utbah Masud</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>20.00</b>
Contributor address; <b>3208 Emerald Edge Drive Wylie, TX 75098</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Deloitte</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>13 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/12/2024</b>	<b>5</b> Full name of contributor <b>FARRUKH SHAMSI</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>6</b> Contributor address; <b>3 Falling Leaf</b> <b>Houston, TX 77024</b>			City;      State;      Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>President</b>		<b>9</b> Employer (See instructions) <b>Texas Clinic</b>	
Date <b>11/12/2024</b>	Full name of contributor <b>AJ Durrani</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>11702 Forest Glen St</b> <b>Houston, TX 77024</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Engineer (Retired)</b>		Employer (See instructions)	
Date <b>11/13/2024</b>	Full name of contributor <b>Niloufar Hafizi</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>6511 Sterling Canyon Dr</b> <b>Katy, TX 77450</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Nonprofit employee</b>		Employer (See instructions) <b>Emgage Foundation</b>	
Date <b>11/13/2024</b>	Full name of contributor <b>Nabila Mansoor</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>7719 Ehrhardt Ln</b> <b>Sugar Land, TX 77479</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>IZY Consultants LLC</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>14 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/13/2024</b>	<b>5</b> Full name of contributor <b>Maha Chishtey</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>25.00</b>
<b>6</b> Contributor address; <b>14211 Deep Cove Ln Sugar land, TX 77498</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>11/13/2024</b>	Full name of contributor <b>Zohaib Qadri</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>2908 Moreno St. Austin, TX 78723</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Council Member</b>		Employer (See instructions) <b>City of Austin</b>	
Date <b>11/13/2024</b>	Full name of contributor <b>Amatulla Contractor</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>6015 Piney Knoll Ct. Katy, TX 77449</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Self</b>	
Date <b>11/18/2024</b>	Full name of contributor <b>Yaseen Khandwalla</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>21419 Bentgrass Ct Katy, TX 77450</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Business Analyst</b>		Employer (See instructions) <b>Army Air Force Exchange</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>15 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/19/2024</b>	<b>5</b> Full name of contributor <b>Assad Siddiqui</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>17407 Woodfalls Ln Richmond, TX 77407</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Case manager</b>		<b>9</b> Employer (See instructions) <b>Fort bend</b>	
Date <b>11/19/2024</b>	Full name of contributor <b>Andrew Denoncour</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>4422 Black Hickory Woods San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>VP of Innovation</b>		Employer (See instructions) <b>Firstmark Credit Union</b>	
Date <b>11/21/2024</b>	Full name of contributor <b>Abdu Ftesi</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>300.00</b>
Contributor address; <b>118 San Miniato San Antonio, TX 78260</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Envisionhealth</b>	
Date <b>11/21/2024</b>	Full name of contributor <b>Imad Ahmed</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>3013 E 17Th St. Austin, TX 78702</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Self employed</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>16 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/21/2024</b>	<b>5</b> Full name of contributor <b>Yasser Farra</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>500.00</b>
	<b>6</b> Contributor address; <b>1910 Spanish Bay San Antonio, TX 78260</b>	City; State; Zip Code	
<b>8</b> Principal occupation / Job title (See instructions) <b>Physician</b>		<b>9</b> Employer (See instructions) <b>Baptist</b>	
Date <b>11/21/2024</b>	Full name of contributor <b>Houssam Alghadban</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
	Contributor address; <b>17103 Turin Rdg San Antonio, TX 78255</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>Periodontist</b>		Employer (See instructions) <b>Self employed</b>	
Date <b>11/22/2024</b>	Full name of contributor <b>Ananda Tomas</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
	Contributor address; <b>4909 Woodstone Dr San Antonio, TX 78230</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>Executive Director</b>		Employer (See instructions) <b>ACT 4 SA</b>	
Date <b>11/24/2024</b>	Full name of contributor <b>Delia Hernandez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
	Contributor address; <b>4014 Adair Bluff San Antonio, TX 78223</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>PAC Manager</b>		Employer (See instructions) <b>Camillo Companies</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</b>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>17 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/25/2024</b>	<b>5</b> Full name of contributor <b>Pervez Agwan</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>6</b> Contributor address; <b>2008 Crocker Houston, TX 77006</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>12/2/2024</b>	Full name of contributor <b>Alejandro Barragan</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>2614 Arlene Park San Antonio, TX 78251</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Development Director</b>		Employer (See instructions) <b>Annie,Äôs List</b>	
Date <b>12/2/2024</b>	Full name of contributor <b>Sara Valenzuela</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>150.00</b>
Contributor address; <b>649 East 14Th Street Apt. #10E New York, NY 10009</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Valenzuela Strategies LLC</b>	
Date <b>12/2/2024</b>	Full name of contributor <b>Patricia Carlisle</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>307 Royal Oaks Drive San Antonio, TX 78209</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Scientist</b>		Employer (See instructions) <b>Avantiqor</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>18 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/2/2024</b>	<b>5</b> Full name of contributor <b>Brannon Miller</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>6</b> Contributor address; <b>1765 Hillview Jackson, MS 39211</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Consultant</b>		<b>9</b> Employer (See instructions) <b>Chism Strategies</b>	
Date <b>12/3/2024</b>	Full name of contributor <b>MaryEllen Veliz</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>130 Shannon Lee San Antonio, TX 78216</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Business Development</b>		Employer (See instructions) <b>DSPolitical</b>	
Date <b>12/4/2024</b>	Full name of contributor <b>Matthew Baiza</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>7343 Park West Drive San Antonio, TX 78250</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Texas State Director</b>		Employer (See instructions) <b>NextGen America</b>	
Date <b>12/4/2024</b>	Full name of contributor <b>Hamzah S Khalaf</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>500.00</b>
Contributor address; <b>9415 Conbar Lane Helotes, TX 78023</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Hamzah Khalaf</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>19 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/5/2024</b>	<b>5</b> Full name of contributor <b>Erick De Luna</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>8670 W Rockport Rd Von Ormy, TX 78073</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>City Council</b>		<b>9</b> Employer (See instructions) <b>City of San Antonio</b>	
Date <b>12/6/2024</b>	Full name of contributor <b>Sofia Ramos</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>9813 Sandhill Dr #43 Laredo, TX 78045</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self-employed</b>		Employer (See instructions) <b>Texas Elite</b>	
Date <b>12/8/2024</b>	Full name of contributor <b>Ann Brown</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>11130 Vance Jackson #1320 San Antonio, TX 78230</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Teacher</b>		Employer (See instructions) <b>Gonzales ISD</b>	
Date <b>12/9/2024</b>	Full name of contributor <b>Steven Steven Lopez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>1222 Stetson Grn. San Antonio, TX 78201</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>self</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>20 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/9/2024</b>	<b>5</b> Full name of contributor <b>Olatunji Olaoye</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>200.00</b>
<b>6</b> Contributor address; <b>5734 Genoa Springs Ln Sugar Land, TX 77479</b>			City;      State;      Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Olatunji</b>		<b>9</b> Employer (See instructions) <b>Olaoye</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Shumaila Panhwar</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>12235 Ashcroft Cir Jurupa Valley, CA 91752</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Awais Sheikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>11815 Mill Rock Rd San Antonio, TX 78230</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Star Team Intensive Care and Hospitalist</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Sohail Rao</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>30 Devon Wood San Antonio, TX 78257</b>			City;      State;      Zip Code
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>INNOVACORE</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>21 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2024</b>	<b>5</b> Full name of contributor <b>Brian Chun</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>309 Cloudmont Dr</b> <b>San Antonio, TX 78239</b>			
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>John Gunkel</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>1038 Fulton Ave</b> <b>San Antonio, TX 78201</b>			
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Fasih Soherwary</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>5742 Pin Pt</b> <b>San Antonio, TX 78266</b>			
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Terry Doane</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>8119 Floating</b> <b>San Antonio, TX 78255</b>			
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</b>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>22 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2024</b>	<b>5</b> Full name of contributor <b>Salim Ahmedabadi</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>6</b> Contributor address; <b>12014 waterway ridge</b> <b>San Antonio, TX 78249</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Engineer</b>		<b>9</b> Employer (See instructions)	
Date <b>12/10/2024</b>	Full name of contributor <b>Sarah Samreen</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>314 Pueblo Pintado</b> <b>Helotes, TX 78023</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Asif Fasih</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>7733 Louis Pasteur Drive #304</b> <b>San Antonio, TX 78229</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Software Engineer</b>		Employer (See instructions) <b>H-E-B</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Deanna Jones</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>9526 Wolf Point</b> <b>San Antonio, TX 78251</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>23 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2024</b>	<b>5</b> Full name of contributor <b>Francisco Elias</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>20965 Cielo Vista Drive San Antonio, TX 78255</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>real estate</b>		<b>9</b> Employer (See instructions) <b>self employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>John Amundson</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>214 S Bell Ave Apt. #1306 Denton, TX 76201</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Psychotherapist</b>		Employer (See instructions) <b>Wellovation PLLC</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Leslie Palmer</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>1150 N Loop 1604 W -559 #108 San Antonio, TX 78248</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>self</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Ishrat Karbach</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>6319 Kingston Ranch San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>24 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2024</b>	<b>5</b> Full name of contributor <b>Hidayat Nagori</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>250.00</b>
	<b>6</b> Contributor address; <b>20303 Stone Oak Parkway #13306</b> <b>San Antonio, TX 78258</b>	City; State; Zip Code	
<b>8</b> Principal occupation / Job title (See instructions) <b>Dentist</b>		<b>9</b> Employer (See instructions) <b>Celebrate dental</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Thomas Roehr</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>5.00</b>
	Contributor address; <b>4340 Ulysses Drive</b> <b>Sacramento, CA 95864</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Marrium Sohail</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
	Contributor address; <b>10602 Kendall Canyon</b> <b>SanAntonio, TX 78255</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>Business owner</b>		Employer (See instructions) <b>Nil</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Heidi Narjis Pierre</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
	Contributor address; <b>334 Zedgebrook</b> <b>San Antonio, TX 78213</b>	City; State; Zip Code	
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</b>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>25 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/10/2024</b>	<b>5</b> Full name of contributor <b>Ana Sandoval</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>6</b> Contributor address; <b>1222 Donaldson Ave San Antonio, TX 78228</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Assistant Director</b>		<b>9</b> Employer (See instructions) <b>Bexar County Hospital District</b>	
Date <b>12/10/2024</b>	Full name of contributor <b>Faiz Mian</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>35.00</b>
Contributor address; <b>13415 Asbury Vista San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>SDM</b>		Employer (See instructions) <b>ESC20</b>	
Date <b>12/11/2024</b>	Full name of contributor <b>Uzair Iqbal</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>40.00</b>
Contributor address; <b>13114 Aurora Crst San Antonio, TX 78249</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Analyst</b>		Employer (See instructions) <b>Ecompex</b>	
Date <b>12/11/2024</b>	Full name of contributor <b>ABRAHAM TANARI</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>7635 Bandera Rd #9102 San Antonio, TX 78238</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>26 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/11/2024</b>	<b>5</b> Full name of contributor <b>Claudia Gutierrez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>6</b> Contributor address; <b>9520 Cactus Canyon San Antonio, TX 78254</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Loan officer</b>		<b>9</b> Employer (See instructions) <b>New American Funding</b>	
Date <b>12/12/2024</b>	Full name of contributor <b>Andres Perez</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>250.00</b>
Contributor address; <b>11751 Elmscourt San Antonio, TX 78230</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Perez &amp; Malik PLLC</b>	
Date <b>12/15/2024</b>	Full name of contributor <b>Iram Baloch</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>9419 Silver Vista San Antonio, TX 78254</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Cashier</b>		Employer (See instructions) <b>Goodwill</b>	
Date <b>12/17/2024</b>	Full name of contributor <b>Sajidah Marwat-Khan</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>30.00</b>
Contributor address; <b>9206 Primrose Hill San Antonio, TX 78251</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Pharmacist</b>		Employer (See instructions) <b>Walgreens</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>27 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/18/2024</b>	<b>5</b> Full name of contributor <b>Chad Barris</b>  <b>6</b> Contributor address; <b>1905 Westcliff Dr</b> <b>Euless, TX 76040</b>	<input type="checkbox"/> out-of-state PAC (ID# _____)	<b>7</b> Amount of contribution (\$) <b>50.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Teacher</b>		<b>9</b> Employer (See instructions) <b>Arlington ISD</b>	
Date <b>12/20/2024</b>	Full name of contributor <b>Aamir Ehsan</b>  Contributor address; <b>7 Grand Terrace</b> <b>San Antonio, TX 78257</b>	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Self</b>	
Date <b>12/21/2024</b>	Full name of contributor <b>Michael Wooley</b>  Contributor address; <b>506 Possum Oak</b> <b>San Antonio, TX 78230</b>	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>Physician</b>		Employer (See instructions) <b>Michael Wooley</b>	
Date <b>12/23/2024</b>	Full name of contributor <b>Romey Imam</b>  Contributor address; <b>461 Bella Luna Way</b> <b>Liberty Hill, TX 78642</b>	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Security Manager</b>		Employer (See instructions) <b>OneTrust</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>28 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/23/2024</b>	<b>5</b> Full name of contributor <b>Neema Shaikh</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>6</b> Contributor address; <b>7639 Mission Hvn Boerne, TX 78015</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Not Employed</b>		<b>9</b> Employer (See instructions) <b>Not Employed</b>	
Date <b>12/30/2024</b>	Full name of contributor <b>Sumbel Zeb</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>50.00</b>
Contributor address; <b>144 State Highway #205 Rockwall, TX 75032</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Director of development</b>		Employer (See instructions) <b>DBIA SW</b>	
Date <b>12/30/2024</b>	Full name of contributor <b>Shahla Wahid</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>2218 Briarstone Bluff Xing Pearland, TX 77089</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date <b>12/30/2024</b>	Full name of contributor <b>Parvinder Kaur</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>200.00</b>
Contributor address; <b>98 Turnberry Way San Antonio, TX 78230</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>29 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2024</b>	<b>5</b> Full name of contributor <b>Jeremy Gray</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>35.00</b>
<b>6</b> Contributor address; <b>519 N Palmetto San Antonio, TX 78202</b>			City; State; Zip Code
<b>8</b> Principal occupation / Job title (See instructions) <b>Teacher</b>		<b>9</b> Employer (See instructions) <b>San Antonio ISD</b>	
Date <b>12/31/2024</b>	Full name of contributor <b>Daniela Salinas</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>7111 Norman Ln San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Social Worker</b>		Employer (See instructions) <b>Nueva Vida Behavioral Health</b>	
Date <b>12/31/2024</b>	Full name of contributor <b>Mehmet Oguz</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>100.00</b>
Contributor address; <b>19106 Summer Haven San Antonio, TX 78259</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Self employed</b>		Employer (See instructions) <b>Mehmet Oguz</b>	
Date <b>12/31/2024</b>	Full name of contributor <b>Caryl Olson</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>25.00</b>
Contributor address; <b>4115 Mt. Laurel San Antonio, TX 78240</b>			City; State; Zip Code
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
<p style="text-align: center;"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>			<b>1</b> Total pages Schedule A1: <b>30 of 30</b>
<b>2</b> FILER NAME <b>Mr Sakib Shaikh</b>			<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2024</b>	<b>5</b> Full name of contributor <b>Mohammed Jaweed</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	<b>7</b> Amount of contribution (\$) <b>100.00</b>
<b>6</b> Contributor address; <b>2127 Indian Meadows Dr</b> <b>San Antonio, TX 78230</b>			
<b>8</b> Principal occupation / Job title (See instructions) <b>Manager</b>		<b>9</b> Employer (See instructions) <b>Galaxy food mart</b>	
Date <b>12/31/2024</b>	Full name of contributor <b>Marilyn Gaeta</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>10.00</b>
Contributor address; <b>12331 Fleming Surf</b> <b>San Antonio, TX 78249</b>			
Principal occupation / Job title (See instructions) <b>Homemaker</b>		Employer (See instructions) <b>Not employed</b>	
Date <b>12/31/2024</b>	Full name of contributor <b>Deanna Jones</b>	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) <b>6.00</b>
Contributor address; <b>9526 Wolf Point</b> <b>San Antonio, TX 78251</b>			
Principal occupation / Job title (See instructions) <b>Not Employed</b>		Employer (See instructions) <b>Not Employed</b>	
Date	Full name of contributor	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$)
Contributor address;			
Principal occupation / Job title (See instructions)		Employer (See instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> <b>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</b>			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p><b>1</b> Total pages Schedule A2: <b>1 of 1</b></p>
<p><b>2</b> FILER NAME <b>Mr Sakib Shaikh</b></p>		<p><b>3</b> Filer ID (Ethics Commission Filers)</p>
<p><b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p><b>\$ 0</b></p>
<p><b>5</b> Date</p>	<p><b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p><b>7</b> Contributor address; City; State; Zip Code</p>	<p><b>8</b> Amount of Contribution \$ . . . . . <b>9</b> In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p><b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p><b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p><b>12</b> Contributor's principal occupation (FOR JUDICIAL)</p>		<p><b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p><b>14</b> Contributor's employer/law firm (FOR JUDICIAL)</p>		<p><b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p><b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)</p> <p>Contributor address; City; State; Zip Code</p>	<p>Amount of Contribution \$ . . . . . In-kind contribution description</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

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

**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>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See instructions)		<b>13</b> Employer (See instructions)
<b>14</b> Description of Collateral <input 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 type="checkbox"/> not applicable	<b>17</b> Name of guarantor  <b>18</b> Guarantor address; City; State; Zip Code	<b>19</b> Amount Guaranteed (\$)
<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)
<b>GUARANTOR INFORMATION</b> <input type="checkbox"/> not applicable	<b>Name of guarantor</b>  <b>Guarantor address;</b> City; State; Zip Code	<b>Amount Guaranteed (\$)</b>
Principal occupation (See instructions)		Employer (See instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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

1 Total pages Schedule F1: <b>1 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>7/15/2024</b>	5 Payee name <b>Duable</b>	
6 Amount (\$) <b>3000.00</b>	7 Payee address; <b>110 Broadway #170 San Antonio, TX 78205</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>7/15/2024</b>	Payee name <b>Duable</b>	
Amount (\$) <b>3000.00</b>	Payee address; <b>110 Broadway #170 San Antonio, TX 78205</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>8/20/2024</b>	Payee name <b>Duable</b>	
Amount (\$) <b>3000.00</b>	Payee address; <b>110 Broadway #170 San Antonio, TX 78205</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>2 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>8/28/2024</b>	5 Payee name <b>Prestige Printing</b>	
6 Amount (\$) <b>182.94</b>	7 Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description <b>Campaign Materials Printing</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>8/28/2024</b>	Payee name <b>Prestige Printing</b>	
Amount (\$) <b>626.77</b>	Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Campaign Materials Printing</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/5/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>1.90</b>	Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>3 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/5/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>2.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/5/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>2.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/5/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>2.60</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>4 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/5/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>3.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/5/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>3.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/6/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>5.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>5 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/6/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>7.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/6/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>10.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/6/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>15.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>6 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/6/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>25.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/9/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>35.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/9/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>39.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>7 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/9/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>43.00</b>	7 Payee address; <b>1 Hacker Way Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/9/2024</b>	Payee name <b>Luce Ristorante</b>	
Amount (\$) <b>1565.00</b>	Payee address; City; State; Zip Code <b>11255 Huebner #200 San Antonio, TX 78230</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Event Expense</b>	Description <b>Campaign Event Expenses</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/9/2024</b>	Payee name <b>Sky Blue Printing</b>	
Amount (\$) <b>539.99</b>	Payee address; City; State; Zip Code <b>143 Westknoll San Antonio, TX 78227</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description <b>Campaign Materials Printing</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>8 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>9/16/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>48.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/18/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>53.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>9/26/2024</b>	Payee name <b>JVC Media</b>	
Amount (\$) <b>3864.53</b>	Payee address; <b>321 Media Blvd</b> <b>San Antonio, TX 78205</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Media Services and Production</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>9 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/2/2024</b>	5 Payee name <b>Harland Clarke Check Order</b>	
6 Amount (\$) <b>34.30</b>	7 Payee address; City; State; Zip Code <b>5800 Northwest Pkwy San Antonio, TX 78249</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description <b>Campaign Materials Printing</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>10/7/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>5.51</b>	Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>10/10/2024</b>	Payee name <b>Duable</b>	
Amount (\$) <b>5116.52</b>	Payee address; City; State; Zip Code <b>110 Broadway #170 San Antonio, TX 78205</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>10 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>10/16/2024</b>	5 Payee name <b>Prestige Printing</b>	
6 Amount (\$) <b>739.35</b>	7 Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description <b>Campaign Materials Printing</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>10/30/2024</b>	Payee name <b>CACSM Consulting</b>	
Amount (\$) <b>1000.00</b>	Payee address; City; State; Zip Code <b>1122 Colorado St #208 Austin, TX 78701</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Campaign Consulting Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>10/31/2024</b>	Payee name <b>CACSM Consulting</b>	
Amount (\$) <b>2152.00</b>	Payee address; City; State; Zip Code <b>1122 Colorado St #208 Austin, TX 78701</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Campaign Consulting Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>11 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>11/21/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>59.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>11/22/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>59.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>11/25/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>65.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>12 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>11/25/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>72.00</b>	7 Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>11/25/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>80.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>11/27/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>88.00</b>	Payee address; <b>1 Hacker Way</b> <b>Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held

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 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

1 Total pages Schedule F1: <b>13 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/3/2024</b>	5 Payee name <b>CACSM Consulting</b>	
6 Amount (\$) <b>2000.00</b>	7 Payee address; City; State; Zip Code <b>1122 Colorado St #208 Austin, TX 78701</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	(b) Description <b>Campaign Consulting Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/4/2024</b>	Payee name <b>CACSM Consulting</b>	
Amount (\$) <b>1700.00</b>	Payee address; City; State; Zip Code <b>1122 Colorado St #208 Austin, TX 78701</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Campaign Consulting Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/4/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>97.00</b>	Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>14 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/5/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>7.96</b>	7 Payee address; <b>1 Hacker Way Menlo Park, CA 94025</b>	City; State; Zip Code
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/10/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>107.00</b>	Payee address; <b>1 Hacker Way Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/16/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>107.00</b>	Payee address; <b>1 Hacker Way Menlo Park, CA 94025</b>	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F1: <b>15 of 15</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>12/23/2024</b>	5 Payee name <b>Facebook</b>	
6 Amount (\$) <b>118.00</b>	7 Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Digital Marketing and Advertising Services</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/26/2024</b>	Payee name <b>Mailchimp</b>	
Amount (\$) <b>79.95</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE Atlanta, GA 30308</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Email Marketing Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
Date <b>12/30/2024</b>	Payee name <b>Facebook</b>	
Amount (\$) <b>130.00</b>	Payee address; City; State; Zip Code <b>1 Hacker Way Menlo Park, CA 94025</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Digital Marketing and Advertising Services</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 <b>Sakib Shaikh</b>	Office sought <b>Council District 8</b> Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# 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

1 Total pages Schedule F2: 1 of 1	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
-----------------------	---

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

11 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
-------------	--------------------------------------

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

# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F3

<p>The Instruction Guide explains how to complete this form.</p>		<p><b>1</b> Total pages Schedule F3: <b>1 of 1</b></p>	
<p><b>2</b> FILER NAME <b>Mr Sakib Shaikh</b></p>		<p><b>3</b> Filer ID (Ethics Commission Filers)</p>	
<p><b>4</b> Date</p>	<p><b>5</b> Name of person from whom investment is purchased</p> <p>.....</p> <p><b>6</b> Address of person from whom investment is purchased;      City;      State;      Zip Code</p>		
	<p><b>7</b> Description of investment</p>		
	<p><b>8</b> Amount of investment (\$)</p>		
<p>Date</p>	<p>Name of person from whom investment is purchased</p> <p>.....</p> <p>Address of person from whom investment is purchased;      City;      State;      Zip Code</p>		
	<p>Description of investment</p>		
	<p>Amount of investment (\$)</p>		
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p>			

# 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

1 Total pages Schedule F4: <b>1 of 1</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0	
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
11 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		
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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# 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 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 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 (\$)	<b>7</b> Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended				
<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 (\$)	Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended			<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			
<input type="checkbox"/> Reimbursement from political contributions intended			<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	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

1 Total pages Schedule H: <b>1 of 1</b>	2 FILER NAME <b>Mr Sakib Shaikh</b>	3 Filer ID (Ethics Commission Filers)	
4 Date	5 Business name		
6 Amount (\$)	7 Business address; City; State; Zip Code		
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See categories listed at the top of this schedule)	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 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		
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
Date	Business name		
Amount (\$)	Business address; City; State; Zip Code		
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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE I

The Instruction Guide explains how to complete this form.

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

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

## SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: <b>1 of 1</b></p>
<p><b>2 FILER NAME</b> <b>Mr Sakib Shaikh</b></p>		<p><b>3 Filer ID (Ethics Commission Filers)</b></p>
<p><b>4 Date</b></p>	<p><b>5 Name of person from whom amount is received</b></p> <p>.....</p> <p><b>6 Address of person from whom amount is received; City; State; Zip Code</b></p>	<p><b>8 Amount (\$)</b></p>
	<p><b>7 Purpose for which amount is received</b></p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	

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

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

## SCHEDULE T

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

# 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