

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: 60	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr			FIRST MI Sakib	
	NICKNAME			LAST SUFFIX Shaikh	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 110 Broadway #170 San Antonio TX 78205				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ()			PHONE NUMBER EXTENSION -	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr			FIRST MI Drew	
	NICKNAME			LAST SUFFIX Galloway	
	<div>Date Received 1/16/2025 9:38:57AM</div> <div>Date Hand-delivered or Date Postmarked</div> <div> <div>Receipt #</div> <div>Amount \$</div> </div> <div>Date Processed 1/16/2025 9:38:57AM</div> <div>Date Imaged</div>				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 110 Broadway #170 San Antonio TX 78205				
8 CAMPAIGN TREASURER PHONE	AREA CODE ()			PHONE NUMBER EXTENSION -	
9 REPORT TYPE	January 15: Semi-Annual				
10 PERIOD COVERED	<div>Month Day Year</div> <div>7/1/2024 THROUGH 12/31/2024</div>				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/3/2025	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any) NA		13 OFFICE SOUGHT (if known) Council District 8		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mr Sakib Shaikh	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
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COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16557.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 29891.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 57594.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25000.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Mr Sakib Shaikh**, this the **15th** day of **January**, **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

19 FILER NAME Mr Sakib Shaikh		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16557.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 29891.32
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
7/3/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
ANA SANDOVAL

7 Amount of contribution (\$)
75.00

6 Contributor address; City; State; Zip Code
**1222 Donaldson Avenue
San Antonio, TX 78228**

8 Principal occupation / Job title (See instructions)
Director

9 Employer (See instructions)
NALCAB

Date
7/3/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
HARRISON Elliff

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**1861 Brown Blvd
Arlington, TX 76006**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
7/15/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jay Brown

Amount of contribution (\$)
10.00

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

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
7/19/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Seema Dar

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**19284 Stoneoak Pkwy
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
7/23/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert Garcia

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**4523 Echo Grove
San Antonio, TX 78259**

8 Principal occupation / Job title (See instructions)
CPA

9 Employer (See instructions)
Self

Date
7/24/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delia Hernandez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4014 Adair Bluff
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)
PAC Manager

Employer (See instructions)
Camillo Companies

Date
8/5/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
AKR Trading

Amount of contribution (\$)
400.00

Contributor address; City; State; Zip Code
**805 W Main St
Kenedy, TX 78119**

Principal occupation / Job title (See instructions)
Self Employed

Employer (See instructions)
Self Employed

Date
8/17/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Aniq Bajwa

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**29635 Winter Copper
Bulverde, TX 78163**

Principal occupation / Job title (See instructions)
Mortgage Compliance Specialist

Employer (See instructions)
USAA

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
8/24/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jeri-Ashley Bremer

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**13310 Langtry
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)
CEO

9 Employer (See instructions)
The Mindfulness Co.

Date
8/24/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delia Hernandez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4014 Adair Bluff
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)
PAC Manager

Employer (See instructions)
Camillo Companies

Date
8/25/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sajidah Marwat-Khan

Amount of contribution (\$)
50.00

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

Principal occupation / Job title (See instructions)
Pharmacist

Employer (See instructions)
Walgreens

Date
9/3/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shazia Ali

Amount of contribution (\$)
25.00

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

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)
Homemaker

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
9/5/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jay Brown

7 Amount of contribution (\$)
10.00

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

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

9 Employer (See instructions)
Not Employed

Date
9/7/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roland Gonzales

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5103 Newcastle Ln.
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Dad/Poet/Attorney

Employer (See instructions)
Germer PLLC

Date
9/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul Drexel

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4202 Laurel Trail
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
9/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rafae Ahmed

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3502 Ivory Creek
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Analyst

Employer (See instructions)
Kindercare

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
9/8/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Khawaja Ahmed

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**3502 Ivory Creek
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
Engineer

9 Employer (See instructions)
GE

Date
9/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marcus Peoples

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**1002 Be 38Th St
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
Transit

Employer (See instructions)
VIA

Date
9/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ann Brown

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**11130 Vance Jackson #1320
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Gonzales ISD

Date
9/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Maliha Imami

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**202 Five Oaks
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Nonprofit

Employer (See instructions)
SAMMinistries

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
9/8/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Elsa Esparza-Hamilton

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code
**4026 Mount Laurel Dr.
San Antonio, TX 78240**

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

9 Employer (See instructions)
Not Employed

Date
9/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sajid Bajwa

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**21114 Balmoral Palace
San Antonio, TX 78158**

Principal occupation / Job title (See instructions)
Self employed

Employer (See instructions)
Self Employed

Date
9/16/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Meena Syed

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**14007 Glade Bridge Ct
Cypress, TX 77429**

Principal occupation / Job title (See instructions)
Anesthesia Assistant

Employer (See instructions)
Ambient Anesthesia

Date
9/19/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Boerne Corner Stop

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**211 S Main St
Boerne, TX 78006**

Principal occupation / Job title (See instructions)
Self employed

Employer (See instructions)
Self Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
9/24/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Delia Hernandez

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
4014 Adair Bluff
San Antonio, TX 78223

8 Principal occupation / Job title (See instructions)
PAC Manager

9 Employer (See instructions)
Camillo Companies

Date
9/25/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kris Summers

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
9702 Laurel Oaks St
San Antonio, TX 78240

Principal occupation / Job title (See instructions)
Financial Advisor

Employer (See instructions)
Seasons Wealth LLC

Date
9/26/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ellen Barshop

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
15738 Dawn Crest
San Antonio, TX 78248

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Temple Beth-El

Date
9/30/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Whitney Rominger

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
4514 Black Oak Woods
San Antonio, TX 78249

Principal occupation / Job title (See instructions)
Therapist

Employer (See instructions)
Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
10/3/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Marvi Panhwar

7 Amount of contribution (\$)
120.00

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

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

9 Employer (See instructions)
Childsafe

Date
10/3/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chad Barris

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**1905 Westcliff Dr
Euless, TX 76040**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Arlington isd

Date
10/4/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Justin Rosenbaum

Amount of contribution (\$)
101.00

Contributor address; City; State; Zip Code
**5566 Cross Pond
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Northside

Date
10/7/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Asim Shaikh

Amount of contribution (\$)
250.00

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

Principal occupation / Job title (See instructions)
Project Manager

Employer (See instructions)
Teksystems

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
10/8/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ann Brown

7 Amount of contribution (\$)
10.00

6 Contributor address; City; State; Zip Code
**11130 Vance Jackson #1320
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
Gonzales ISD

Date
10/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
ghulam jaffer

Amount of contribution (\$)
100.00

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

Principal occupation / Job title (See instructions)
PM

Employer (See instructions)
Cisco

Date
10/9/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nazar Zaidi

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**20788 Norada Court
Saratoga, CA 95070**

Principal occupation / Job title (See instructions)
Engineer

Employer (See instructions)
AMD

Date
10/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Saeed Shaikh

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**10010 Halston Dr
Sugar Land, TX 77498**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
10/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Aftab Usmani

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**1014 Barry Way
Fremont, CA 94536**

8 Principal occupation / Job title (See instructions)
It

9 Employer (See instructions)
Oracle

Date
10/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ashfaq Khan

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**28766 Balcones Creek
Boerne, TX 78006**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Self

Date
10/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yusif Mohammad

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Pediatric Dentist

Employer (See instructions)
Southside Childrens Dental Center

Date
10/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hosam Attaya

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**17803 La Cantera Terrace #6706
San Antonio, TX 78256**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Strg

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
10/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Shameem Akhtar

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**7323 Steeple Park
San Antonio, TX 78256**

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

9 Employer (See instructions)
Not Employed

Date
10/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Asif Fasih

Amount of contribution (\$)
300.00

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

Principal occupation / Job title (See instructions)
Software Engineer

Employer (See instructions)
H-E-B

Date
10/24/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delia Hernandez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4014 Adair Bluff
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)
PAC Manager

Employer (See instructions)
Camillo Companies

Date
11/4/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sakib Shaikh

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4238 Laurel Trl
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Self Employed

Employer (See instructions)
Self Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
13 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
11/12/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
FARRUKH SHAMSI

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**3 Falling Leaf
Houston, TX 77024**

8 Principal occupation / Job title (See instructions)
President

9 Employer (See instructions)
Texas Clinic

Date
11/12/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
AJ Durrani

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**11702 Forest Glen St
Houston, TX 77024**

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

Employer (See instructions)

Date
11/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Niloufar Hafizi

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**6511 Sterling Canyon Dr
Katy, TX 77450**

Principal occupation / Job title (See instructions)
Nonprofit employee

Employer (See instructions)
Emgage Foundation

Date
11/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nabila Mansoor

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**7719 Ehrhardt Ln
Sugar Land, TX 77479**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
IZY Consultants LLC

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
11/13/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Maha Chishtey

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**14211 Deep Cove Ln
Sugar land, TX 77498**

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

9 Employer (See instructions)
Not Employed

Date
11/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zohaib Qadri

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2908 Moreno St.
Austin, TX 78723**

Principal occupation / Job title (See instructions)
Council Member

Employer (See instructions)
City of Austin

Date
11/13/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Amatulla Contractor

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**6015 Piney Knoll Ct.
Katy, TX 77449**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self

Date
11/18/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yaseen Khandwalla

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**21419 Bentgrass Ct
Katy, TX 77450**

Principal occupation / Job title (See instructions)
Business Analyst

Employer (See instructions)
Army Air Force Exchange

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
11/19/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Assad Siddiqui

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**17407 Woodfalls Ln
Richmond, TX 77407**

8 Principal occupation / Job title (See instructions)
Case manager

9 Employer (See instructions)
Fort bend

Date
11/19/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Andrew Denoncour

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**4422 Black Hickory Woods
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
VP of Innovation

Employer (See instructions)
Firstmark Credit Union

Date
11/21/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Abdu Ftesi

Amount of contribution (\$)
300.00

Contributor address; City; State; Zip Code
**118 San Miniato
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Envisionhealth

Date
11/21/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Imad Ahmed

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3013 E 17Th St.
Austin, TX 78702**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
11/21/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Yasser Farra

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1910 Spanish Bay
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)
Physician

9 Employer (See instructions)
Baptist

Date
11/21/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Houssam Alghadban

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**17103 Turin Rdg
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)
Periodontist

Employer (See instructions)
Self employed

Date
11/22/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ananda Tomas

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4909 Woodstone Dr
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Executive Director

Employer (See instructions)
ACT 4 SA

Date
11/24/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Delia Hernandez

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4014 Adair Bluff
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)
PAC Manager

Employer (See instructions)
Camillo Companies

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
11/25/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Pervez Agwan

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**2008 Crocker
Houston, TX 77006**

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

9 Employer (See instructions)
Not Employed

Date
12/2/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alejandro Barragan

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**2614 Arlene Park
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)
Development Director

Employer (See instructions)
Annie, A&S List

Date
12/2/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sara Valenzuela

Amount of contribution (\$)
150.00

Contributor address; City; State; Zip Code
**649 East 14Th Street Apt. #10E
New York, NY 10009**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Valenzuela Strategies LLC

Date
12/2/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Patricia Carlisle

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**307 Royal Oaks Drive
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Scientist

Employer (See instructions)
Avantiqor

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
12/2/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Brannon Miller

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1765 Hillview
Jackson, MS 39211**

8 Principal occupation / Job title (See instructions)
Consultant

9 Employer (See instructions)
Chism Strategies

Date
12/3/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
MaryEllen Veliz

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**130 Shannon Lee
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Business Development

Employer (See instructions)
DSPolitical

Date
12/4/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Matthew Baiza

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**7343 Park West Drive
San Antonio, TX 78250**

Principal occupation / Job title (See instructions)
Texas State Director

Employer (See instructions)
NextGen America

Date
12/4/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hamzah S Khalaf

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9415 Conbar Lane
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Hamzah Khalaf

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
12/5/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Erick De Luna

7 Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
8670 W Rockport Rd
Von Ormy, TX 78073

8 Principal occupation / Job title (See instructions)
City Council

9 Employer (See instructions)
City of San Antonio

Date
12/6/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sofia Ramos

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
9813 Sandhill Dr #43
Laredo, TX 78045

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Texas Elite

Date
12/8/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ann Brown

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
11130 Vance Jackson #1320
San Antonio, TX 78230

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Gonzales ISD

Date
12/9/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steven Steven Lopez

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
1222 Stetson Grn.
San Antonio, TX 78201

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
12/9/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Olatunji Olaoye

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**5734 Genoa Springs Ln
Sugar Land, TX 77479**

8 Principal occupation / Job title (See instructions)
Olatunji

9 Employer (See instructions)
Olaoye

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shumaila Panhwar

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**12235 Ashcroft Cir
Jurupa Valley, CA 91752**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Awais Sheikh

Amount of contribution (\$)
35.00

Contributor address; City; State; Zip Code
**11815 Mill Rock Rd
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Star Team Intensive Care and Hospitalist

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sohail Rao

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**30 Devon Wood
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
INNOVACORE

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21 of 30
2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brian Chunn 6 Contributor address; City; State; Zip Code 309 Cloudmont Dr San Antonio, TX 78239	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Not Employed		9 Employer (See instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John Gunkel Contributor address; City; State; Zip Code 1038 Fulton Ave San Antonio, TX 78201	Amount of contribution (\$) 35.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fasih Soherwardy Contributor address; City; State; Zip Code 5742 Pin Pt San Antonio, TX 78266	Amount of contribution (\$) 35.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terry Doane Contributor address; City; State; Zip Code 8119 Floating San Antonio, TX 78255	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Not Employed		Employer (See instructions) Not Employed
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
12/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Salim Ahmedabadi

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**12014 waterway ridge
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)
Engineer

9 Employer (See instructions)

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sarah Samreen

Amount of contribution (\$)
35.00

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

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Asif Fasih

Amount of contribution (\$)
250.00

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

Principal occupation / Job title (See instructions)
Software Engineer

Employer (See instructions)
H-E-B

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Deanna Jones

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**9526 Wolf Point
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

SCHEDULE **A1**

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

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
12/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Ana Sandoval

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
1222 Donaldson Ave
San Antonio, TX 78228

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

9 Employer (See instructions)
Bexar County Hospital District

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Faiz Mian

Amount of contribution (\$)
35.00

Contributor address; City; State; Zip Code
13415 Asbury Vista
San Antonio, TX 78249

Principal occupation / Job title (See instructions)
SDM

Employer (See instructions)
ESC20

Date
12/11/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Uzair Iqbal

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
13114 Aurora Crst
San Antonio, TX 78249

Principal occupation / Job title (See instructions)
Analyst

Employer (See instructions)
Ecompex

Date
12/11/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
ABRAHAM TANARI

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
7635 Bandera Rd #9102
San Antonio, TX 78238

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

3 Filer ID (Ethics Commission Filers)

4 Date
12/11/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Claudia Gutierrez

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**9520 Cactus Canyon
San Antonio, TX 78254**

8 Principal occupation / Job title (See instructions)
Loan officer

9 Employer (See instructions)
New American Funding

Date
12/12/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Andres Perez

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**11751 Elmscourt
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Perez & Malik PLLC

Date
12/15/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Iram Baloch

Amount of contribution (\$)
50.00

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

Principal occupation / Job title (See instructions)
Cashier

Employer (See instructions)
Goodwill

Date
12/17/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sajidah Marwat-Khan

Amount of contribution (\$)
30.00

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

Principal occupation / Job title (See instructions)
Pharmacist

Employer (See instructions)
Walgreens

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
28 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
12/23/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Neema Shaikh

7 Amount of contribution (\$)
500.00

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

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

9 Employer (See instructions)
Not Employed

Date
12/30/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sumbel Zeb

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**144 State Highway #205
Rockwall, TX 75032**

Principal occupation / Job title (See instructions)
Director of development

Employer (See instructions)
DBIA SW

Date
12/30/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Shahla Wahid

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**2218 Briarstone Bluff Xing
Pearland, TX 77089**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

Date
12/30/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Parvinder Kaur

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**98 Turnberry Way
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 30

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date
12/31/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jeremy Gray

7 Amount of contribution (\$)
35.00

6 Contributor address; City; State; Zip Code
**519 N Palmetto
San Antonio, TX 78202**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
San Antonio ISD

Date
12/31/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniela Salinas

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**7111 Norman Ln
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Social Worker

Employer (See instructions)
Nueva Vida Behavioral Health

Date
12/31/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mehmet Oguz

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**19106 Summer Haven
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
Self employed

Employer (See instructions)
Mehmet Oguz

Date
12/31/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Caryl Olson

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**4115 Mt. Laurel
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Not Employed

Employer (See instructions)
Not Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
1 of 1

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID# _____)

8 Amount of Pledge \$

9 In-kind contribution description

7 Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See instructions)

11 Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

15 ☐ Check if personal funds were deposited into political
account (See instructions)

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ 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
☐ none

☐ Check if personal funds were deposited into political
account (See Instructions)

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 1 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 7/15/2024	5 Payee name Duabie		
6 Amount (\$) 3000.00	7 Payee address; City; State; Zip Code 110 Broadway #170 San Antonio, TX 78205		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 7/15/2024	Payee name Duabie		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 110 Broadway #170 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 8/20/2024	Payee name Duabie		
Amount (\$) 3000.00	Payee address; City; State; Zip Code 110 Broadway #170 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 8/28/2024	5 Payee name Prestige Printing		
6 Amount (\$) 182.94	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description Campaign Materials Printing
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 8/28/2024	Payee name Prestige Printing		
Amount (\$) 626.77	Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description Campaign Materials Printing
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/5/2024	Payee name Facebook		
Amount (\$) 1.90	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/5/2024	5 Payee name Facebook		
6 Amount (\$) 2.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/5/2024	Payee name Facebook		
Amount (\$) 2.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/5/2024	Payee name Facebook		
Amount (\$) 2.60	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/5/2024	5 Payee name Facebook		
6 Amount (\$) 3.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/5/2024	Payee name Facebook		
Amount (\$) 3.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/6/2024	Payee name Facebook		
Amount (\$) 5.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/6/2024	5 Payee name Facebook		
6 Amount (\$) 7.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/6/2024	Payee name Facebook		
Amount (\$) 10.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/6/2024	Payee name Facebook		
Amount (\$) 15.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/6/2024	5 Payee name Facebook		
6 Amount (\$) 25.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/9/2024	Payee name Facebook		
Amount (\$) 35.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 9/9/2024	Payee name Facebook		
Amount (\$) 39.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/9/2024	5 Payee name Facebook		
6 Amount (\$) 43.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 9/9/2024	Payee name Luce Ristorante		
Amount (\$) 1565.00	Payee address; City; State; Zip Code 11255 Huebner #200 San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense		Description Campaign Event Expenses
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 9/9/2024	Payee name Sky Blue Printing		
Amount (\$) 539.99	Payee address; City; State; Zip Code 143 Westknoll San Antonio, TX 78227		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description Campaign Materials Printing
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 9/16/2024	5 Payee name Facebook		
6 Amount (\$) 48.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 9/18/2024	Payee name Facebook		
Amount (\$) 53.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 9/26/2024	Payee name JVC Media		
Amount (\$) 3864.53	Payee address; City; State; Zip Code 321 Media Blvd San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Media Services and Production
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 9 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 10/2/2024	5 Payee name Harland Clarke Check Order		
6 Amount (\$) 34.30	7 Payee address; City; State; Zip Code 5800 Northwest Pkwy San Antonio, TX 78249		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description Campaign Materials Printing
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 10/7/2024	Payee name Facebook		
Amount (\$) 5.51	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 10/10/2024	Payee name Duable		
Amount (\$) 5116.52	Payee address; City; State; Zip Code 110 Broadway #170 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 10 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 10/16/2024	5 Payee name Prestige Printing		
6 Amount (\$) 739.35	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description Campaign Materials Printing
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 10/30/2024	Payee name CACSM Consulting		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 1122 Colorado St #208 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description Campaign Consulting Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 10/31/2024	Payee name CACSM Consulting		
Amount (\$) 2152.00	Payee address; City; State; Zip Code 1122 Colorado St #208 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description Campaign Consulting Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 11 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 11/21/2024	5 Payee name Facebook		
6 Amount (\$) 59.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 11/22/2024	Payee name Facebook		
Amount (\$) 59.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 11/25/2024	Payee name Facebook		
Amount (\$) 65.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 11/25/2024	5 Payee name Facebook		
6 Amount (\$) 72.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			

Date 11/25/2024	Payee name Facebook		
Amount (\$) 80.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

Date 11/27/2024	Payee name Facebook		
Amount (\$) 88.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 13 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 12/3/2024	5 Payee name CACSM Consulting		
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 1122 Colorado St #208 Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign Consulting Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/4/2024	Payee name CACSM Consulting		
Amount (\$) 1700.00	Payee address; City; State; Zip Code 1122 Colorado St #208 Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description Campaign Consulting Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/4/2024	Payee name Facebook		
Amount (\$) 97.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 14 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 12/5/2024	5 Payee name Facebook		
6 Amount (\$) 7.96	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/10/2024	Payee name Facebook		
Amount (\$) 107.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/16/2024	Payee name Facebook		
Amount (\$) 107.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 15 of 15	2 FILER NAME Mr Sakib Shaikh		3 Filer ID (Ethics Commission Filers)
4 Date 12/23/2024	5 Payee name Facebook		
6 Amount (\$) 118.00	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Digital Marketing and Advertising Services
	(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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/26/2024	Payee name Mailchimp		
Amount (\$) 79.95	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Atlanta, GA 30308		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Email Marketing Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			
Date 12/30/2024	Payee name Facebook		
Amount (\$) 130.00	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Digital Marketing and Advertising Services
	<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 Sakib Shaikh Office sought Council District 8 Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Mr Sakib Shaikh	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

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

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME Mr Sakib Shaikh	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 Date	6 Payee name
---------------	---------------------

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
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Date	Payee name
------	------------

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking
Advertising Expense
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

1 Total pages Schedule G: 1 of 1	2 FILER NAME Mr Sakib Shaikh	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
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	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee 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

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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME Mr Sakib Shaikh	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 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	
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		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Mr Sakib Shaikh

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE T

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

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