

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: 26				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY Date Received OCT 11 2022 RCVD Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged			
	Mrs. Sonia						
NICKNAME	LAST	SUFFIX					
Rash							
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
7602 Bogard Ct., Sugar Land, Texas 77479							
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
(713)		416-9704					
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
	Ms. Kathy						
NICKNAME	LAST	SUFFIX					
Cheng							
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
544 Westheimer Rd.				Houston,	Texas	77056	
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
(832)		788-8840					
9 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)			
	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)			
10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
7		/	1	/	22		
					9	/	29
					/	22	
11 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	Primary	Runoff	Other Description	
11 / 8 / 22			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)			
				Justice of the Peace, Precinct 3			
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	<small>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.</small>						
	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL	COMMITTEE ADDRESS					
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRESS					

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Sonia Rash		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,428.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,062.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 SIGNATURE 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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Sonia Rash, and my date of birth is 08/26/1971.

My address is 7602 Bogard Ct., Sugar Land, TX, 77479, Fort Bend.
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 11 day of 10, 2022.
(month) (year)

Sonia Rash
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Sonia Rash		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,428.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 8,750.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,062.54
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 14

2 FILER NAME
Sonia Rash

3 Filer ID (Ethics Commission Filers)

4 Date
07/08/20225 Full name of contributor out-of-state PAC (ID#: _____)
Yasmin Pavri

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
49 Briar Hollow Lane, #1702 Houston, Texas 77027

100.00

8 Principal occupation / Job title (See Instructions)
Retired9 Employer (See Instructions)
RetiredDate
07/08/2022Full name of contributor out-of-state PAC (ID#: _____)
Jamshed Dudha

Amount of contribution (\$)

Contributor address; City; State; Zip Code
9850 Meadowglen Lane, #184 Houston, Texas 77042

50.00

Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
RetiredDate
07/07/2022Full name of contributor out-of-state PAC (ID#: _____)
Fali Engineer

Amount of contribution (\$)

Contributor address; City; State; Zip Code
7317 Cook Road, Houston, Texas 77072

50.00

Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
RetiredDate
07/08/2022Full name of contributor out-of-state PAC (ID#: _____)
Ferrel Bonner

Amount of contribution (\$)

Contributor address; City; State; Zip Code
PO Box 1063, Fresno, Texas 77545

25.00

Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
Retired**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**If the requested information is not applicable, **DO NOT** include this page in the report.

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1 Total pages Schedule A1: 14

2 FILER NAME
Sonia Rash

3 Filer ID (Ethics Commission Filers)

4 Date
07/08/20225 Full name of contributor out-of-state PAC (ID#: _____)
Susan Bankston

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
509 S 5th St., Richmond, Texas 77469

100.00

8 Principal occupation / Job title (See Instructions)
Retired9 Employer (See Instructions)
RetiredDate
07/08/2022Full name of contributor out-of-state PAC (ID#: _____)
Abdur Khan

Amount of contribution (\$)

Contributor address; City; State; Zip Code
16119 Crooked Arrow Dr., Richmond, Texas 77498

50.00

Principal occupation / Job title (See Instructions)
N/AEmployer (See Instructions)
N/ADate
07/08/2022Full name of contributor out-of-state PAC (ID#: _____)
William Bobrick

Amount of contribution (\$)

Contributor address; City; State; Zip Code
PO Box 637, Sugar Land, Texas 77478

100.00

Principal occupation / Job title (See Instructions)
OrganizerEmployer (See Instructions)
ATF of TexasDate
07/08/2022Full name of contributor out-of-state PAC (ID#: _____)
Vanessa Villagomez

Amount of contribution (\$)

Contributor address; City; State; Zip Code
1305 Prairie St., #300, Houston, Texas 77002

250.00

Principal occupation / Job title (See Instructions)
Officer ManagerEmployer (See Instructions)
Lee Law Firm**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **14****2** FILER NAME
Sonia Rash**3** Filer ID (Ethics Commission Filers)**4** Date
07/29/2022**5** Full name of contributor out-of-state PAC (ID#: _____)
Feroze Bhandara**7** Amount of contribution (\$)**6** Contributor address; City; State; Zip Code
45 Inverray Ln., Sugar Land, Texas 77479**500.00****8** Principal occupation / Job title (See Instructions)
Real Estate Investor**9** Employer (See Instructions)
Self-EmployedDate
07/29/2022Full name of contributor out-of-state PAC (ID#: _____)
Grady Prestage

Amount of contribution (\$)

Contributor address; City; State; Zip Code
PO Box 835, Missouri City, Texas 77459**1,000.00**Principal occupation / Job title (See Instructions)
CommissionerEmployer (See Instructions)
Fort BendDate
07/29/2022Full name of contributor out-of-state PAC (ID#: _____)
Douglas Beaton

Amount of contribution (\$)

Contributor address; City; State; Zip Code
6615 High Knoll Dr., Sugar Land, Texas 77479**200.00**Principal occupation / Job title (See Instructions)
N/AEmployer (See Instructions)
N/ADate
07/29/2022Full name of contributor out-of-state PAC (ID#: _____)
Noshir Challa

Amount of contribution (\$)

Contributor address; City; State; Zip Code
44 Harbor View Dr., Sugar Land, Texas 77479**500.00**Principal occupation / Job title (See Instructions)
Business OwnerEmployer (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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 07/29/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Sharmeen Irani 6 Contributor address; City; State; Zip Code 5031 Pineridge Dr., Sugar Land, Texas 77479	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 07/29/2022	Full name of contributor out-of-state PAC (ID#: _____) Javed Ashraf Contributor address; City; State; Zip Code 410 Kingfisher Drive, Sugar Land, Texas 77478	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/29/2022	Full name of contributor out-of-state PAC (ID#: _____) Rohintan Deputy Contributor address; City; State; Zip Code 977 Bainbridge Dr., Sugar Land, Texas 77479	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/29/2022	Full name of contributor out-of-state PAC (ID#: _____) Nadeem Anwar Contributor address; City; State; Zip Code 7818 Bulrush Canyon Trail, Katy, Texas 77494	Amount of contribution (\$) 101.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
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

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **14**

2 FILER NAME

Sonia Rash

3 Filer ID (Ethics Commission Filers)

4 Date

08/01/2022

5 Full name of contributor

Javed Iqbal

out-of-state PAC (ID#: _____)

6 Contributor address;

3010 Zephyr Glen Way,

City;

Houston, Texas 77084

State; Zip Code

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

N/A

9 Employer (See Instructions)

N/A

Date

08/01/2022

Full name of contributor

Joel Clouser

out-of-state PAC (ID#: _____)

Contributor address;

3026 Pelican Cove,

City;

Missouri City, Texas 77459

State; Zip Code

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

08/01/2022

Full name of contributor

Joelynn Clouser

out-of-state PAC (ID#: _____)

Contributor address;

3006 Sadie Court, Missouri City, Texas 77459

City;

State; Zip Code

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

N/A

Employer (See Instructions)

N/A

Date

08/01/2022

Full name of contributor

B. Brown Johnson

out-of-state PAC (ID#: _____)

Contributor address;

16714 Quail Run Dr., Missouri City, Texas 77489

City;

State; Zip Code

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

N/A

Employer (See Instructions)

N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/01/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Fry Law Firm PC 6 Contributor address; City; State; Zip Code 1119 Oak Creek Dr., Richmond, Texas 77469	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Fry Law
Date 08/03/2022	Full name of contributor out-of-state PAC (ID#: _____) Shah Haleem Contributor address; City; State; Zip Code 5815 Silkbay Meadow Dr., Katy, Texas 77494	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/03/2022	Full name of contributor out-of-state PAC (ID#: _____) Himanshu Makwana Contributor address; City; State; Zip Code 7830 Westglen Dr., Houston, Texas 77063	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Project Person		Employer (See Instructions) Alliance Project Development LLC
Date 08/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Regina Johnson Contributor address; City; State; Zip Code 2511 Peninsulas Dr., Missouri City, Texas 77459	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Business Development		Employer (See Instructions) Austrailian Consulate General
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/04/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Douglas Beaton	7 Amount of contribution (\$) 50.00
	6 Contributor address; City; State; Zip Code 13431 Woodchester Dr., Sugar Land, Texas 77498	
8 Principal occupation / Job title (See Instructions) Director of Operations		9 Employer (See Instructions) American Cargo Assurance, LLC
Date 08/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Nancy Pulido	Amount of contribution (\$) 10.00
	Contributor address; City; State; Zip Code 2425 Holly Hall St., Unit 122, Houston, Texas 77054	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/05/2022	Full name of contributor out-of-state PAC (ID#: _____) Maneck Bharucha	Amount of contribution (\$) 500.00
	Contributor address; City; State; Zip Code 1705 Apollo Road, Richardson, Texas 75081	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Rueo Tuo	Amount of contribution (\$) 100.00
	Contributor address; City; State; Zip Code 6410 Dylan Springs Ln., Katy, Texas 77450	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Danish Hussain 6 Contributor address; City; State; Zip Code 6410 Kirkcaldy Court, Richmond, Texas 77407	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Police		9 Employer (See Instructions) HPD
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Ilyas Choudry Contributor address; City; State; Zip Code 5822 Catherwood Lane, Houston, Texas 77984	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Non-Profit Worker		Employer (See Instructions) HHRD
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Elsa Cantu Contributor address; City; State; Zip Code 1708 Spring Green Blvd., Katy, Texas 77494	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Donna Ellis Contributor address; City; State; Zip Code 13910 Placid Woods Ct., Sugar Land, Texas 77498	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Jamie Jordan 6 Contributor address; City; State; Zip Code 10110 Crosby Commons, Missouri City, Texas 77459	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self-Employed
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Bill Bobrick Contributor address; City; State; Zip Code PO Box 637, Sugar Land, Texas 77487	Amount of contribution (\$) 40.00
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) ATF of Texas
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Sourabh Sanduja Contributor address; City; State; Zip Code 8711 Hawk Haven Ct., Richmond, Texas 77460	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Rizwan Nabi Contributor address; City; State; Zip Code 12627 Altuve Drive, Houston, Texas 77034	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Chief Executive Officer		Employer (See Instructions) Riz energy
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Muhammad Javed <hr/> 6 Contributor address; City; State; Zip Code 2710 11th Street, Beaumont, Texas 77701	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Riceland Healthcare
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Lakshmi Ramakrishna <hr/> Contributor address; City; State; Zip Code 619 Arden Oaks Drive, Sugar Land, Texas 77479	Amount of contribution (\$) 101.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tecas Rio Grande Legal Aid, Inc.
Date 08/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Adeola Heyliger <hr/> Contributor address; City; State; Zip Code 1611 Glacier Blue Dr., Fresno, Texas 77545	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Ramel Blue <hr/> Contributor address; City; State; Zip Code 2211 Mad River Ln., Missouri City, Texas 77459	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/18/2022	5 Full name of contributor out-of-state PAC (ID#: _____) S. Edwards	50.00
	6 Contributor address; City; State; Zip Code 23303 Millcross Lane, Katy, Texas 77494	
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 08/22/2022	Full name of contributor out-of-state PAC (ID#: _____) LuAnn York	25.00
	Contributor address; City; State; Zip Code 3320 Oak Tree Ct., Katy, Texas 77494	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Nittasha Naidu	100.00
	Contributor address; City; State; Zip Code 4615 Elan Bend Ct., Sugar Land, Texas 77479	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Elsun MedStaff
Date 08/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Vanessa Villagovmez	250.00
	Contributor address; City; State; Zip Code 1305 Prairie St., #300, Houston, Texas 77002	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Lee Law
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/24/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Dylan Rusell 6 Contributor address; City; State; Zip Code 4518 Pebblestone Dr., Missouri City, Texas 77459	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hoove Slovacek LLP
Date 08/24/2022	Full name of contributor out-of-state PAC (ID#: _____) Anirudha Pangarkar Contributor address; City; State; Zip Code 38 Hessenford St., Sugar Land, Texas 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 08/24/2022	Full name of contributor out-of-state PAC (ID#: _____) Babu Thomas Contributor address; City; State; Zip Code 3518 Christopher Dr., Missouri City, Texas 77459	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self-Employed
Date 08/29/2022	Full name of contributor out-of-state PAC (ID#: _____) Vasanth Potdar Contributor address; City; State; Zip Code 18926 Majestic Vista Ln., Richmond, Texas 77407	Amount of contribution (\$) 1.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 14
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)
4 Date 08/29/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Dylan Russell 6 Contributor address; City; State; Zip Code 4518 Pebblestone Dr., Missouri City, Texas 77450	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Slovacek LLP
Date 09/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Syed Razzaqui Contributor address; City; State; Zip Code 6106 Stonebury Ct., Sugar Land, Texas 77479	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self Employed
Date 09/19/2022	Full name of contributor out-of-state PAC (ID#: _____) Thomas Hanan Contributor address; City; State; Zip Code 903 Goldfinch Ave., Sugar Land, Texas 77478	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Programer		Employer (See Instructions) Aetna
Date 09/18/2022	Full name of contributor out-of-state PAC (ID#: _____) Michele Lara Contributor address; City; State; Zip Code 3106 Shawnee, Sugar Land, Texas 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) MLara
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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **14**

2 FILER NAME
Sonia Rash

3 Filer ID (Ethics Commission Filers)

4 Date
09/18/2022

5 Full name of contributor out-of-state PAC (ID#: _____)
Helen Shih

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
3526 Mira Hlen Drive, Pearland, Texas 77584

100.00

8 Principal occupation / Job title (See Instructions)
Consultant

9 Employer (See Instructions)
Flow of Light Natural Health

Date
09/18/2022

Full name of contributor out-of-state PAC (ID#: _____)
Douglas Beaton

Amount of contribution (\$)

Contributor address; City; State; Zip Code
13431 Woodchester Dr., Sugar Land, Texas 77498

50.00

Principal occupation / Job title (See Instructions)
Director of Operations

Employer (See Instructions)
American Cargo Assurance, LLC

Date
09/28/2022

Full name of contributor out-of-state PAC (ID#: _____)
Kate Boriack

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2906 Kara Brook Ct., Katy, Texas 7797

100.00

Principal occupation / Job title (See Instructions)
N/A

Employer (See Instructions)
N/A

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 8,750.00	
5 Date 07/27/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Firozgary	8 Amount of Contribution \$ 750.00	9 In-kind contribution description DJ Services
7 Contributor address; City; State; Zip Code 14719 Comdywood Dr., Houston, Texas 77079		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 09/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sam Turner	Amount of Contribution \$ 3,000.00	In-kind contribution description Website/Social Media
Contributor address; City; State; Zip Code 17811 Mackeson Ct., C.A. 90746		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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2	
2 FILER NAME Sonia Rash		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 8,750.00	
5 Date 07/27/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seargent Khan 7 Contributor address; City; State; Zip Code 3455 South Dairy Ashford, Houston, Texas 77082	8 Amount of Contribution \$ 5,000.00	9 In-kind contribution description Rental of Hall and Catering Services 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
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.			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/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	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
4 Date 08/04/2022	5 Payee name FBDP	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 13515 Southwest Fwy., #204, Sugar Land, Texas 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Political Expense	(b) Description FBD Coordinated Campaign
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 08/06/2022	Payee name R.G. Moore	
Amount (\$) 1,000.00	Payee address; City; State; Zip Code 2513 Princes Lane, Missouri City, Texas 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Literature Drop
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 08/08/2022	Payee name Patty Del La Garza	
Amount (\$) 75.00	Payee address; City; State; Zip Code 4514 Nassau Dr., Sugar Land, Texas 77479	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Literature Drop
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
4 Date 08/10/2022	5 Payee name Patty Del La Garza	
6 Amount (\$) 75.00	7 Payee address; City; State; Zip Code 4514 Nassau Dr., Sugar Land, Texas 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Literature Drop
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 08/16/2022	Payee name Allied Signs	
Amount (\$) 1,012.14	Payee address; City; State; Zip Code 6820 Harwin Dr., Houston, Texas 77036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Materials	Description Pushcards & Door Hangers
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 08/20/2022	Payee name R.G. Moore	
Amount (\$) 1,000.00	Payee address; City; State; Zip Code 2513 Princess Lane, Missouri City, Texas 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Literature Drop
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
4 Date 09/02/2022	5 Payee name FBDP	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 13515 Southwest Fwy., #204 Sugar Land, Texas 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Political Expense	(b) Description FBD Coodinated Campaign
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 09/14/2022	Payee name Allied Signs	
Amount (\$) 541.12	Payee address; City; State; Zip Code 6820 Harwin Dr., Houston, Texas 77036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Priting Materials	Description Street Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A
Date 09/21/2022	Payee name HUM FM LLC	
Amount (\$) 2,000.00	Payee address; City; State; Zip Code 6161 Savoy Dr., Suite 1140, Houston, Texas 77036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Radio Advertising
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3
		Office held N/A

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/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	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
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4 Date 07/01/2022	5 Payee name Google Suite
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6 Amount (\$) 12.79	7 Payee address; 1600 Amphitheater Parkway, Mountain View, CA 94043	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Online Digital Tool	(b) Description Digital Project Management Tool
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held
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Date 07/13/2022	Payee name Google Domains
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Amount (\$) 6.40	Payee address; 1600 Amphitheater Parkway, Mountain View, CA 94043	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Online Digital Tool	Description Doamin Name
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date 08/01/2022	Payee name Google Suite
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Amount (\$) 12.78	Payee address; 1600 Amphitheater Parkway, Mountain View, CA 94043	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Online Digital Tool	Description Doamin Name
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/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	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
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4 Date 08/15/2022	5 Payee name Google Domians
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6 Amount (\$) 6.40	7 Payee address; City; State; Zip Code 1600 Amphitheater Parkway, Mountainview, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Online Domain	(b) Description Domain Name
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date 08/01/2022	Payee name Allied Signs
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Amount (\$) 1,295.52	Payee address; City; State; Zip Code 6820 Harwin Dr., Houston, Texas 77036
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expenses	Description Road Signs
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date 09/15/2022	Payee name Google Domians
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Amount (\$) 6.40	Payee address; City; State; Zip Code 1600 Amphitheater Parkway, Mountainview, CA 94043
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Online Domain	Description Domain Name
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
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4 Date 09/01/2022	5 Payee name Google Suites
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6 Amount (\$) 12.79	7 Payee address; 1600 Amphitheater Parkway,	City; Mountainview, CA	State; CA	Zip Code 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Online Digital Tool	(b) Description Digital Project Management Tool
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date 07/30/2022	Payee name Act Blue
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Amount (\$) 27.11	Payee address; 366 Summer St,	City; Somerville, MA	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Fees on donations for month of July.
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date 08/31/2022	Payee name Act Blue
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Amount (\$) 166.07	Payee address; 366 Summer St,	City; Somerville,	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Fees on donations for month of August
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7	2 FILER NAME Sonia Rash	3 Filer ID (Ethics Commission Filers)
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4 Date 09/29/2022	5 Payee name Act Blue
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6 Amount (\$) 12.91	7 Payee address; 366 Summer St, Somerville, MA 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Fees on donations for month of September
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Sonia Rash	Office sought JP3	Office held N/A
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Date	Payee name
------	------------

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

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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