# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT



# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to co	emplete this form.	. Filer ID	2 Total pages filed: 40
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Abrahim	МІ	OFFICE USE ONLY  Date Received
	NICKNAME	LAST Javed	SUFFI	x JUL 15 2024 RG
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 11826 Matagorda Ln.	APT / SUITE #; CITY;	; ZIP CC	Date Hand-delivered or Date Postmarked  Receipt # Amount
Change of Address	Sugar Land , TX 7749	8		Date Imaged
5 CAMPAIGN	MS/MRS/MR	FIRST	MI	
TREASURER NAME	MR.	OMAR		
	NICKNAME	LAST	SUFFIX	(
		KHAWAJA		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO			CITY; STATE; ZIP CODE HOUSTON, TX, 77056
7 CAMPAIGN TREASURER PHONE	AREA CODE P	100 NUMBER EX	TENSION	
8 REPORT TYPE	January 15  X July 15	30th day before ele	_	15th day after campaign treasurer appointment (officeholder only)  Final Report (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Ye 02/25/2024			Day Year 0/2024
10 ELECTION	ELECTION DATE Month Day Ye 03/05/2024	ear X Prim	nary ELECTION TY  Runoff  Peral Special	PE Other

**GO TO PAGE 2** 

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Version V4.1.0.d378aba0

### **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

## FORM C/OH **COVER SHEET PG 2**

					2 01 40
13 C / OH NAME	Javed, Abrahim		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or officel	nolder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
-	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		I IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	21,994.39
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	71,761.07
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	4,286.14
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	211,900.00
Nota Com	MZA ABDUL JABBAR ry Public, State of Texas nm. Expires 11-01-2026 otary ID 131780884	I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.  Signature of		be reporte	
AFFIX NO	TARY STAMP / SEAL ABO	OVE			
	ribed before me, by the sa	Alorelaina Taxed	, this the		day
Signature of office	er administering	Hamro Jubber Printed name of officer administering	NO-low y Title of officer a	Publi	ng oa th
ı V					

## SUBTOTALS - C/OH -



# FORM C/OH COVER SHEET PG 3

3 of 40

		3-C123			0 0: 10
18 FIL	ER NA	ME . I	L9 Filer ID		
Ja	ved, Al	orahim			
		E SUBTOTALS		SUBT	OTAL AMOUNT
NA	ME OF	SCHEDULE		0051	OT/IL/INICONT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	13,732.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	8,262.39
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE E: LOANS		\$	11,900.00
5.	х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	71,761.07
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS O	F C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNS TO FILER	ETURNED	\$	

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/3 Rpt: 4/40 FILER NAME Filer ID Javed, Abrahim Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 02/29/2024 \$5.00 Aalia, Qazi 6 Contributor address; City; State; Zip Code 11610 Flint Forest Lane Houston, TX 77024 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) LyondeliBasell **Account Specialist** Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$4,000.00 03/01/2024 Abigail, Wynne Contributor address; City; State; Zip Code 5614 Winsome Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 02/28/2024 Bassam, Syed (Mr.) \$50.00 Contributor address; City; State; Zip Code 3231 Allen Pkwy Apt. 2201 Houston, TX 77019 Employer (See Instructions) Principal occupation / Job title (See Instructions) Not Employed Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ 02/28/2024 Belal, Salama (Mr.) \$2.00 Contributor address; City; State; Zip Code 1111 Conrd Sauer Dr Houston, TX 77043 Principal occupation / Job title (See Instructions) Employer (See Instructions) Student NA Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 02/28/2024 Bruce, Monteith (Mr.) Contributor address; City; State; Zip Code 5340 Las Virgenes Road 6 Calabasas, CA 91302 Employer (See Instructions) Principal occupation / Job title (See Instructions) CEO The Corporate Benefits Alliance

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/3 Rpt: 5/40 3 Filer ID FILER NAME Javed, Abrahim 7 Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25.00 03/20/2024 Gire, Mohamedali 6 Contributor address; City; State; Zip Code 1606 Potomac Dr Houston, TX 77057 Employer (See Instructions) Principal occupation / Job title (See Instructions) Myers Holum Consultant Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 03/02/2024 Hammad, Fazlani Contributor address; City; State; Zip Code 1113 Coolidge street Plano, TX 75094 Principal occupation / Job title (See Instructions) Employer (See Instructions) **FHLB** It Auditor out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$1,000.00 02/28/2024 Hani, Tohme Contributor address; City; State; Zip Code Po Box 20234 Beaumont, TX 77720 Principal occupation / Job title (See Instructions) Employer (See Instructions) **GTCE** Engineer Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$1,000.00 02/29/2024 Mohamed, Eldawy Contributor address; City; State; Zip Code 3513 Kingston Dr friendswood, TX 77546 Employer (See Instructions) Principal occupation / Job title (See Instructions) Royal Crown wealth managementRoyal Crown wealth Mohamed Eldawy out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$1,000.00 02/26/2024 Mohammad, Amjad (Mr.) Contributor address; City; State; Zip Code 7421 Burnet Rd Austin, TX 78757 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self **Arabic Teacher**

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 6/40 FILER NAME 3 Filer ID Javed, Abrahim 5 Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/28/2024 \$1,000.00 Muhammad, Imran (Mr.) 6 Contributor address; City; State; Zip Code 6136 cardinal rd Bettendorf, IA 52722 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) **Business Employer** Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$4,000.00 02/28/2024 Omar, Khawaja Contributor address; City; State; Zip Code 611 Pinehaven Dr Houston, TX 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) Law office of Omar khawaja pllc Attorney Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$50.00 02/29/2024 Sameer, Zuberi Contributor address; City; State; Zip Code 12950 Ambrose Dr Frisco, TX 75035 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Software Engineer Amazon out-of-state PAC (ID#:\_ Amount of Contribution (\$) Full name of contributor Date \$500.00 02/28/2024 nash, kherany Contributor address; City; State; Zip Code 7730 North peninsula Drive Beaumont, TX 77707 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Self Awesome

Forms provided by Texas Ethics Commission

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Sch Sch: 1/6 Rpt:	
2 FILER NAME			3 Filer ID	
Javed, Abra	him			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date	6 Full name of contributor  ut-of-state PAC (ID#:	)	8 Amount of contribution (\$)	9 In-kind contribution description
02/25/2024	Innovative Solutions IT			Advertisement
	7 Contributor address; City; State; Zip Code		1	, 141 - 01 110 - 011
	10862 Redstone Ct		i	
	11		_ ;	
	Missouri City, TX 77459	I		utside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See ins	structions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (	See instructions)
14 Contributorio	omployor/lovy firm (FOR HIDICIAL)	15 Law firm of contribute	r's spause (if any) (F	OR JUDICIAL)
14 Contributors	employer/law firm (FOR JUDICIAL)	13 Law IIIII of Contributo	ir s spouse (ii aily) (F	OR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of	In-kind contribution
02/25/2024	Javed, Tahir		contribution (\$)	
	Contributor address; City; State; Zip Code		\$1,200.001	Food for meet and greet
	11826 Matagorda Ln		į	
			i	
	Sugar Land, TX 77498		Check if travel ou	itside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ins	structions)
Business M	an	Self		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (	See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (F	OR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor  out-of-state PAC (ID#:	)	Amount of	In-kind contribution
03/01/2024	Javed, Tahir		contribution (\$)	description
	Contributor address; City; State; Zip Code			Miscellaneous photocopies for poll-
	11826 Matagorda Ln			workers.
			į	
	Sugar Land, TX 77498		Check if travel ou	itside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ins	structions)
Business Ma	an	Self		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (S	See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (F	OR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A2: Sch: 2/6 Rpt: 8/40			
2 FILER NAME			3 Filer ID			
Javed, Abra	him					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date 03/01/2024	Date 6 Full name of contributor out-of-state PAC (ID#:)  Javed, Tahir  7 Contributor address; City; State; Zip Code  11826 Matagorda Ln  Sugar Land, TX 77498		8 Amount of contribution (\$) 9 In-kind contribution description \$1,500.00   Karachi Restaurant & leccream Parlor, Staff meal for poll workers			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON				
Business Ma	an	Self				
12 Contributor's	principal occupation (FOR JUDICIAL)	(FOR JUDICIAL) (See instructions)				
14 Contributor's	14 Contributor's employer/law firm (FOR JUDICIAL)  15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
16 If contributor i	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution description \$62.25   Ice Box 4453, Gas costs for pollworkers			
	Sugar Land, TX 77498		Check if travel outside of Texas, Complete Schedule T.			
Principal occu Business Ma	pation / Job title (FOR NON-JUDICIAL) (See instructions) an	Employer (FOR NON Self	-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 contribute	or's spouse (if any) (FOR JบองอIAL)			
If contributor i	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution description \$31.24   Shell, Gas for pollworkers			
Principal occu	pation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)			
Business Ma	an	Self				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
If contributor i	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 3/6 Rpt: 9/40
2 FILER NAME		3 Filer ID
Javed, Abrahim		
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 02/27/2024 6 Full name of contributor out-of-state PAC (ID#:	8 Amount of 9 In-kind contribution contribution (\$) description \$28.31   Staff meal	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	Check if travel outside of Texas. Complete Schedule T.  JUDICIAL) (See instructions)
Business Man	Self	oosion is, (
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 contributo	r'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 out-of-state PAC (ID#:  02/27/2024 Javed, Tahir  Contributor address; City; State; Zip Code  11826 Matagorda Ln		Amount of In-kind contribution contribution (\$) description \$221.31 Lasbela Restaurant & Cat, Catering
Sugar Land, TX 77498		Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	JUDICIAL) (See instructions)
Business Man	Self	
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (	FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 02/26/2024  Full name of contributor  Javed, Tahir  Contributor address; City; State; Zip Code 11826 Matagorda Ln		Amount of In-kind contribution description \$830.02   Elite - Indo Pak - Catering
Sugar Land, TX 77498  Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	Check if travel outside of Texas. Complete Schedule T.  JUDICIAI ) (See instructions)
Business Man	Self	JODICIAL) (See insudedons)
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)		

The Instruction Guide explains how to complete this form.  1 Total pages Schedule A2: Sch: 4/6 Rpt: 10/40					
2 FILER NAME			3 Filer ID		
Javed, Abra	him				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$			
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution		
02/29/2024	Javed, Tahir		contribution (\$) description \$58.82 I Home Depot - Ponchos		
	7 Contributor address; City; State; Zip Code		for pollworkers		
	11826 Matagorda Ln		'		
	Sugar Land, TX 77498		Check if travel outside of Texas. Complete Schedule T.		
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)		
Business M	an	Self			
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 contributo	r'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  out-of-state PAC (ID#:		Amount of In-kind contribution		
02/27/2024	Javed, Tahir		contribution (\$) description		
	Contributor address; City; State; Zip Code		\$9.42   Minuti Coffee - Staff Meal		
	11826 Matagorda Ln	a a	1		
			į		
	Sugar Land, TX 77498		Check if travel outside of Texas. Complete Schedule T.		
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
Business M		Self			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution		
02/25/2024	Javed, Tahir		contribution (\$) description		
	Contributor address; City; State; Zip Code		\$28.31   Beans UP Coffee		
	11826 Matagorda Ln				
	Sugar Land, TX 77498		Check if travel outside of Texas. Complete Schedule T.		
· ·	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	-JUDICIAL) (See instructions)		
Business M			(FOR JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (	,		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 5/6 Rpt: 11/40		
2 FILER NAME			3 Filer ID		
Javed, Abra	ahim				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 02/29/2024 6 Full name of contributor out-of-state PAC (ID#:			8 Amount of 9 In-kind contribution contribution (\$) description \$52.82 The Home Depot		
,	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)		
Business M	an	Self			
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 contributo	r's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 03/04/2024	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution contribution (\$) description \$8.50 Office Depot, OfficeMax		
	Sugar Land, TX 77498		Check if travel outside of Texas. Complete Schedule T.		
Principal occu Business Ma	an	Employer (FOR NON- Self			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 03/04/2024	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution description \$31.39   Office Depot, OfficeMax  Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-			
Business Ma	an	Self			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (	FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

#### **NON-MONETARY (IN-KIND) POLITICAL** SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 6/6 Rpt: 12/40 2 FILER NAME 3 Filer ID Javed, Abrahim \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor out-of-state PAC (ID#: Amount of 9 In-kind contribution contribution (\$) description 03/05/2024 Javed, Tahir \$1,000.00 Expense for Poll worker Contributor address; City; State; Zip Code 11826 Matagorda Ln Sugar Land, TX 77498 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) **Business Man** Self 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) Full name of contributor Amount of In-kind contribution Date out-of-state PAC (ID#: contribution (\$) description 03/01/2024 Riceland Healthcare \$2,000.00 Rides and transportation Contributor address; City; State; Zip Code to polls 85 i-10 FRONTAGE ROAD SUITE NO 111 Beaumont, TX 77707 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) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### **LOANS** SCHEDULE E 1 Total pages Schedule E: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/40 3 Filer ID 2 FILER NAME Javed, Abrahim \$ TOTAL OF UNITEMIZED LOANS 9 Loan Amount (\$) 5 Date of loan 7 Name of lender out-of-state PAC (ID#: 03/19/2024 Javed, Tahir (Mr.) \$7,500.00 Lender address; 10 Interest Rate Is lender a City; State; Zip Code financial 11826 Matagorda Ln institution? 11 Maturity Date No 12/31/2025 Sugar Land, TX 77498 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) Businessman 14 Description of Collateral 15 Check if personal funds were deposited into political account (See Instructions) X None **16 GUARANTOR** 19 Amount Guaranteed (\$) 17 Name of guarantor INFORMATION X not applicable 18 Guarantor address; City; State; Zip Code 20 Principal occupation 21 Employer (See Instructions) Loan Amount (\$) Date of loan Name of lender ut-of-state PAC (ID#:\_ 03/06/2024 \$4,400.00 Javed, Tahir (Mr.) Is lender a Lender address; State: Zip Code Interest Rate City; financial 11826 Matagorda Ln institution? Maturity Date No 12/31/2025 Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) Employer (See Instructions) Businessman Check if personal funds were deposited into political account Description of Collateral (See Instructions) X None Amount Guaranteed (\$) **GUARANTOR** Name of guarantor INFORMATION X not applicable State; Zip Code Guarantor address; City; Principal occupation Employer (See Instructions)

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wagns/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Political Committee 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. Filer ID Total pages Schedule F1: |2 FILER NAME Sch: 1/27 Rpt: 14/40 Javed, Abrahim 4 Date 5 Payee name 03/01/2024 Ali, Ahad 6 Amount (\$) Payee address; City; State; Zip Code \$256.60 17227 Endel Way Richmond, TX 77407 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2024 Ali, Laarayb Payee address; State; Zip Code Amount (\$) City; \$390.00 10602 Pearl Landing Dr Richmond, TX 77407 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2024 Ayton, Jack Amount (\$) Payee address; City; State; Zip Code \$100.00 147 N. Villa Oaks Dr. Spring, TX 77382 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Early March Fuel Reimbursement

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memonals Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/27 Rpt: 15/40	Javed, Abrahim
4	Date	5 Payee name
	03/01/2024	Ayton, Jack
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	147 N. Villa Oaks Dr.
		Spring, TX 77382
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Field Director Pay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oł	1
	Date	Payee name
	03/06/2024	Ayton, Jack
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.00	147 N. Villa Oaks Dr.
		Spring, TX 77382
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Field Director Pay
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	02/25/2024	Balderas, Yancy
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	2926 Green Fields Dr
		Sugar Land, TX 77479
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff payroll/pay
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
-	Toylor Distriction	hise Commission Varsion Value state by us

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/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: 2 FILER NAME 3 Filer ID Sch: 3/27 Rpt: 16/40 Javed, Abrahim 4 Date Payee name 02/27/2024 Balderas, Yancy 6 Amount (\$) Payee address; State; Zip Code City; \$1,940.00 2926 Green Fields Dr Sugar Land, TX 77479 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Feb 18 through Feb 27 Salary Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2024 Balderas, Yancy Amount (\$) Payee address; City; State; Zip Code \$480.00 2926 Green Fields Dr Sugar Land, TX 77479 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/05/2024 Balderas, Yancy Amount (\$) Payee address; State; Zip Code City: \$960.00 2926 Green Fields Dr Sugar Land, TX 77479

**PURPOSE** 

OF

**EXPENDITURE** 

Complete ONLY if direct expenditure to benefit C/OH

Office sought

(b) Description

Staff payroll/pay

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

(a) Category (See Categories listed at the top of this schedule)

Salaries/Wages/Contract Labor

Candidate/Officeholder name

#### SCHEDULE F1

#### **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 evaluing how to complete this form

╙		The instruction dutile explains flow to con	iihiere	e uns form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 4/27 Rpt: 17/40	Javed, Abrahim		
4	Date	5 Payee name		
l	03/01/2024	Bowman, Felicia		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de	
	\$1,013.40	1034 Saulnier St		
l				
		Houston, TX 77019		
8	PURPOSE		(h) D	Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor	г, с Г	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Galaries/Wages/Goritact Eapor	Ī	Check if Austin, TX, officeholder living expense
ı			S	Staff payroll/pay
l				
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O			
	Date	Payee name		
	03/06/2024	Bowman, Felicia		
	Amount (\$)	Payee address; City; State; Zip Code	le	
	\$568.20	1034 Saulnier St		
ı				
		Houston, TX 77019		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> D	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
			S	Staff payroll/pay
L		L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	ht	Office held
	Date	Payee name		
	03/07/2024	CG Studio		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$2,500.00	5850 San Felipe		
		Suite #500		
		Houston, TX 77057		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> D	escription
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Ē	Check if Austin, TX, officeholder living expense
			Đ	Pigital Ad Creation and Content Management
			<u></u>	0.5
				Ottion hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Complete ONLY if direct expenditure to benefit C/OH		nτ	Office field
			nt 	Office field
			nt 	Office field

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

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. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 5/27 Rpt: 18/40 Javed, Abrahim 4 Date Payee name 03/06/2024 Campaign Services LLC Amount (\$) Payee address; City; State; Zip Code \$3,250.00 6814 E Riverside Dr Unit 42 Austin, TX 78741 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Administrative Support Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/29/2024 Clark, Trevor Amount (\$) Payee address; City; State; Zip Code \$420.00 23307 Peareson Bend LN Richmond, TX 77469 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Poll Worker Pay Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/18/2024 Cricket Amount (\$) Payee address; City; State; Zip Code \$143.00 11611 W Airport Blvd Ste G Meadows Place, TX 77477 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cell Phone & Mobile Hotspot Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	l
L	Sch: 6/27 Rpt: 19/40	Javed, Abrahim
4	Date	5 Payee name
L	04/16/2024	Cricket
	Amount (\$) \$148.00	7 Payee address; City; State; Zip Code 11611 W Airport Blvd Ste G Meadows Place, TX 77477
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Cell Phone & Mobile Hotspot
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/16/2024	Cricket
	Amount (\$) \$148.00	Payee address; City; State; Zip Code  11611 W Airport Blvd  Ste G  Meadows Place, TX 77477
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Cell Phone & Mobile Hotspot
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/17/2024	Payee name Cricket
	Amount (\$) \$148.00	Payee address; City; State; Zip Code 11611 W Airport Blvd Ste G Meadows Place, TX 77477
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cell Phone & Mobile Hotspot
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 7/27 Rpt: 20/40	Javed, Abrahim
4	Date	5 Payee name
	03/01/2024	Debjani , Tarafder
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$764.80	9230 Grove Haven Dr
	!	
	!	Houston, TX 77083
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVDENDITUDE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	1	Field Organizing
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	expenditure to benefit of or	
	Date	Payee name
	03/06/2024	Debjani , Tarafder
	Amount (\$)	Payee address; City; State; Zip Code
	\$306.60	9230 Grove Haven Dr
		Houston, TX 77083
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Field Organizing
	Complete ONLY if direct expenditure to benefit C/OI-	Candidate/Officeholder name Office sought Office held
	experience to believe at a	
	Date	Payee name
	02/27/2024	Dollar Tree
		25.12.11.05
	Amount (\$)	Payee address; City; State; Zip Code
	Amount (\$) \$4.06	
	l l	Payee address; City; State; Zip Code
	l l	Payee address; City; State; Zip Code
	\$4.06 PURPOSE	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498
	\$4.06 PURPOSE OF	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
	\$4.06 PURPOSE	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	\$4.06 PURPOSE OF	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
	\$4.06  PURPOSE  OF  EXPENDITURE	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Supplies
	\$4.06  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sought  Office held
	\$4.06  PURPOSE  OF  EXPENDITURE	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sought  Office held
	\$4.06  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Payee address; City; State; Zip Code  11755 Hwy 6 South  Sugar Land, TX 77498  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  Candidate/Officeholder name Office sought  Office held

#### SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to con	nplete this form.
1	Total pages Schedule F1:		3 Filer ID
	Sch: 8/27 Rpt: 21/40	Javed, Abrahim	
4	Date	5 Payee name	
L	03/01/2024	Effendi, Laiba	
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de
	\$440.00	2222 Keevan Point Ct.	
		Sugar Land, TX 77498	
8	PURPOSE OF	, (,	(b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Staff payroll/pay
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	03/06/2024	Effendi, Laiba	
_	Amount (\$)	Payee address; City; State; Zip Coo	de
	\$40.00	2222 Keevan Point Ct.	
		Sugar Land, TX 77498	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Staff payroll/pay
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
	expenditure to benefit C/OF	1	
	Date	Payee name	
	03/01/2024	Estrada, Ariana	
	Amount (\$)	Payee address; City; State; Zip Cod	de
	\$353.40	1034 Saulnier St	
		Houston, TX 77019	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Staff payroll/pay
		İ	
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
	Complete ONLY if direct expenditure to benefit C/O		ht Office held
			ht Office held
			ht Office held

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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)

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 9/27 Rpt: 22/40 Javed, Abrahim Date Payee name 02/29/2024 **GM Chevron** Amount (\$) Payee address; City; State; Zip Code \$28.04 11836 S TEXAS 6 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense **FUEL** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2024 **GM Chevron** Amount (\$) Payee address; City; State; Zip Code \$24.38 11836 S TEXAS 6 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Fuel Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/06/2024 **GM Chevron** Payee address; State; Zip Code Amount (\$) City; \$25.85 11836 S TEXAS 6 Sugar Land, TX 77498 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense Fuel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/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
OTHER (enter a category not listed above)

Candidate/Officeholder/Political Committee
Credit Card Payment OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 10/27 Rpt: 23/40 Javed, Abrahim 4 Date 5 Payee name 03/06/2024 **GM Chevron** Amount (\$) Payee address; State; Zip Code City; \$40.24 11836 S TEXAS 6 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Transportation Equipment And Related **EXPENDITURE** Check if Austin, TX, officeholder living expense Expense **Fuel** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2024 **GOOGLE** Amount (\$) Payee address; City; State; Zip Code \$38.29 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gsuite Payment for email Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 03/01/2024 **GOOGLE** Payee address; City; State; Zip Code Amount (\$) \$13.70 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **SVCS** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

#### SCHEDULE F1

#### **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 Glft/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. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 11/27 Rpt: 24/40 Javed, Abrahim 4 Date 5 Payee name 04/02/2024 **GOOGLE** Amount (\$) Payee address; State; Zip Code City; \$41.13 1600 Amphitheatre Parkway Mountain View, TX 94043 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gsuite Payment for email Candidate/Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 05/02/2024 **GOOGLE** Amount (\$) Payee address; City; State; Zip Code \$13.65 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense SVCS Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/02/2024 **GOOGLE** Payee address; City; State; Zip Code Amount (\$) \$41.13 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gsuite Payment for email Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 12/27 Rpt: 25/40 Javed, Abrahim Date Payee name 06/03/2024 **GOOGLE** 6 Amount (\$) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway \$13.65 Mountain View, TX 94043 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **SVCS** Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/03/2024 GOOGLE City; Amount (\$) Payee address; State; Zip Code \$41.13 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gsuite Payment for email Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/01/2024 Garrett, Whitney State; Zip Code Payee address; City; Amount (\$) \$250.00 4875 Beechaven St. Houston, TX 77053 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

#### SCHEDULE F1

#### **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 Gitt/Awards/Memorials Expense Legal Services

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

		The instruction Guid	ie explains now to co	inhiei	ete uns form.	
1 Total pages So Sch: 13/27 R		2 FILER NAME Javed, Abrahim			3 Filer ID	
4 Date 03/06/2024		5 Payee name Garrett, Whitney				
6 Amount (\$)	\$100.00	7 Payee address; City; 4875 Beechaven St.	State; Zip Co	de		
8 PURPOSE OF EXPENDITUR	[ ]	Houston, TX 77053  (a) Category (See Categories listed at the Salaries/Wages/Contract Lab		[	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Staff payroll/pay	
9 Complete ONL expenditure to		Candidate/Officeholder name	Office sou	ght	Office held	
Date 02/27/2024		Payee name Infocus campaigns LLC				
Amount (\$)	\$2,464.11	Payee address; City; 2700 Coast Ave  Mountain View, CA 94043	State; Zip Cod	de		
PURPOSE OF EXPENDITUR	ľ	a) Category (See Categories listed at the t Advertising Expense	op of this schedule)		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Texting	
Complete ONL expenditure to		Candidate/Officeholder name	Office souç	jht	Office held	
Date 03/04/2024		Payee name Infocus campaigns LLC				
Amount (\$)	52,489.80	Payee address; City; 2700 Coast Ave	State; Zip Coo	de		
		Mountain View, CA 94043				
PURPOSE OF EXPENDITUR	]`	a) Category (See Categories listed at the t Advertising Expense	op of this schedule)		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Texting	
Complete ONL expenditure to l	Y if direct benefit C/OH	Candidate/Officeholder name	Office soug	jht	Office held	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poliing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 14/27 Rpt: 27/40 Javed, Abrahim Date Payee name 02/27/2024 Innovative Solutions IT 6 Amount (\$) Payee address; State; Zip Code City; \$500.00 10862 Redstone Ct Missouri City, TX 77459 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Web Design Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 02/27/2024 Innovative Solutions IT State; Zip Code Payee address; City; Amount (\$) \$5,501.15 10862 Redstone Ct Missouri City, TX 77459 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Flags, Pushcard and Retainer Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Johnston Campaigns 02/26/2024 State; Zip Code Payee address; City; Amount (\$) 1140 FM 2094 \$9,779.21 Ste 116 Kemah, TX 77565 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Print & Mail Deposit Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

#### SCHEDULE F1

#### **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. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 15/27 Rpt: 28/40 Javed, Abrahim Date Payee name 03/01/2024 Ketchum, Rada 6 Amount (\$) Payee address; State; Zip Code City; \$375.00 4814 Carmen St Apt. 5 Houston, TX 77033 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2024 Khan, Raima Amount (\$) Payee address; Citv: State; Zip Code \$200.00 3010 Richland Spring Ln Sugar Land, TX 77479 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff payroll/pay Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/25/2024 Kroger Payee address; State; Zip Code Amount (\$) City; 11565 S Texas 6 \$17.93 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Meal Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

#### SCHEDULE F1

#### **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. Total pages Schedule F1: 2 FILER NAME 3 Filer 1D Sch: 16/27 Rpt: 29/40 Javed, Abrahim Date Payee name 02/29/2024 Kroger Amount (\$) Payee address; City; State; Zip Code \$22.92 11565 S Texas 6 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Meal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/29/2024 Kroger Amount (\$) Payee address; State; Zip Code City; \$16.44 11565 S Texas 6 Sugar Land, TX 77498 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Meal Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/01/2024 Kroger Payee address; City; State; Zip Code Amount (\$) \$11.02 11565 S Texas 6 Sugar Land, TX 77498 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Staff Meal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 17/27 Rpt: 30/40	Javed, Abrahim
4	Date	5 Payee name
	03/03/2024	Kroger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$20.43	11565 S Texas 6
	!	
		Sugar Land, TX 77498
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	!	Check if Austin, TX, officeholder living expense  Staff Meal
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/O	
	Date	Payee name
	03/05/2024	Little Caesars Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$53.80	10581 S Highway 6
		Sugar Land, TX 77498
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	1	Staff Meal
		Stall Hou
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	03/01/2024	Mustafa, Al-Hinai
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,405.00	11826 Matagorda
	42,	TIDEO Malago. Ca
		Sugar Land, TX 77498
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EM EMBITO	Check if Austin, TX, officeholder living expense Staff payroll/pay
		Stall payroll/pay
	The Chilly if disease	Office held
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Legal Services Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.

Loan Repayment/Reimbursement Office Overhead/Rental Expense

		The Instruction Guide explains how to com	iplei	te this form.
1	Total pages Schedule F1: Sch: 18/27 Rpt: 31/40	2 FILER NAME Javed, Abrahim		3 Filer ID
4	Date 03/06/2024	5 Payee name Mustafa, Al-Hinai		
6	Amount (\$) \$800.00	7 Payee address; City; State; Zip Cod 11826 Matagorda Sugar Land, TX 77498	е	
8	PURPOSE OF EXPENDITURE		[	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Staff payroll/pay
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date 03/05/2024	Payee name NGP VAN		
	Amount (\$) \$56.24	Payee address; City; State; Zip Code 655 15th NW Suite 650 Washington, DC 20005	e	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Advertising Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mass Email & Donor Database
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	Office held
	Date 03/04/2024	Payee name NGP VAN		
	Amount (\$) \$338.56	Payee address; City; State; Zip Code 655 15th NW Suite 650 Washington, DC 20005	9	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Advertising Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sough	nt	Office held

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement Office Overhead/Rental Expense

		The instruction Guide explains now to com	piere	e dils joilli.	
1	Total pages Schedule F1:			3 Filer ID	
	Sch: 19/27 Rpt: 32/40	Javed, Abrahim			
4	Date	5 Payee name			
	03/06/2024	NGP VAN			
6	Amount (\$)	7 Payee address; City; State; Zip Code	е		
	\$183.54	655 15th NW			
		Suite 650			
_		Washington, DC 20005			
8	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b) D	Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense	E	Check if Austin, TX, officeholder living expense	
			M	Mass Email & Donor Database	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	Office held	
	Date	Payee name			
	04/02/2024	NGP VAN			
	Amount (\$)	Payee address; City; State; Zip Code	е		
	\$338.56	655 15th NW			
		Suite 650			
		Washington, DC 20005			- 1
	PURPOSE OF		<b>o)</b> D	Description	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	o) D	Check if travel outside of Texas. Complete Schedule T.	
	OF				
	OF			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	OF	Advertising Expense  Candidate/Officeholder name Office sough	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE  Complete ONLY if direct	Advertising Expense  Candidate/Officeholder name Office sough	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF	Advertising Expense  Candidate/Officeholder name  Office sough	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF	Advertising Expense  Candidate/Officeholder name  Office sough  Payee name	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date  03/01/2024	Advertising Expense  Candidate/Officeholder name  Office sough  Payee name  Nandini, Sarkar	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)	Candidate/Officeholder name  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)	Candidate/Officeholder name  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code	M	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mass Email & Donor Database	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00	Advertising Expense  Candidate/Officeholder name Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (See Categories listed at the top of this schedule)	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mass Email & Donor Database  Office held	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00	Candidate/Officeholder name Office sough Payee name Nandini, Sarkar Payee address; City; State; Zip Code 5227 Harvest Bend Ct Sugar Land, TX 77479	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mass Email & Donor Database Office held	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF	Advertising Expense  Candidate/Officeholder name Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (See Categories listed at the top of this schedule)	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF	Advertising Expense  Candidate/Officeholder name Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (See Categories listed at the top of this schedule)	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Candidate/Officeholder name  Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF EXPENDITURE	Candidate/Officeholder name  Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Staff payroll/pay	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Candidate/Officeholder name  Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Staff payroll/pay	
	OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OF  Date 03/01/2024  Amount (\$)  \$90.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct	Candidate/Officeholder name  Office sough  Payee name Nandini, Sarkar  Payee address; City; State; Zip Code 5227 Harvest Bend Ct  Sugar Land, TX 77479  (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate/Officeholder name  Office sough	M M	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Mass Email & Donor Database  Office held  Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Staff payroll/pay	

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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

	Creat Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 20/27 Rpt: 33/40	Javed, Abrahim
4	Date	5 Payee name
	03/06/2024	Nandini, Sarkar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.60	5227 Harvest Bend Ct
		Sugar Land, TX 77479
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ŀ	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI CHOTTONE	Check if Austin, TX, officeholder living expense  Staff payroll/pay
İ		Stan payron/pay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
=	Date	
	02/27/2024	Payee name Network Television Marketing Inc.
_	·	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 17-16 215th St
	\$1,000.00	1st Floor
		Bayside, TX 11360
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule)  Advertising Expense.  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Ads
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/25/2024	Office Depot, OfficeMax
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.24	15375 SouthWest Freeway
		Sugar Land, TX 77478
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPERDITORE	Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memorials Legal Services The Instruction Gu			/ages	s/Contract Labor	Travel Out of District OTHER (enter a category not li	sted above)
1	Total pages Schedule F1:	10	EILED MANG		ilde explains	now to co	прк		B = 11 15	
1	Sch: 21/27 Rpt: 34/40	2	Javed, Abra					ľ	3 Filer ID	
4	Date	5	Payee name							
	03/02/2024	L	Office Depo	t, OfficeMax						
6	Amount (\$) \$145.57	7	Payee address 15375 South	s; City; nWest Freeway	State	; Zip Co	de			
			Sugar Land,	TX 77478						
8	PURPOSE OF	(a)		e Categories listed at th		edule)	(b)	Description		
	EXPENDITURE		Office Overh	nead/Rental Exp	ense				rtside of Texas. Complete Schedule FX, officeholder living expense S	т.
9	Complete ONLY if direct	Ļ	`andidata/Offic	eholder name		Office sou	u b t		Office held	
ט	expenditure to benefit C/Ol		andidate/Onic	enoider name		Jilice sout	JIII.		Office held	
	Date		Payee name							
	02/25/2024		Office Depot	, OfficeMax						
	Amount (\$)		Payee addres	s; City;	State;	; Zip Co	de			
	\$84.48		15375 South	West Freeway						
			Sugar Land,	TX 77478						
	PURPOSE	(a)	Category (See	e Categories listed at th	e top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Office Overh	ead/Rental Exp	ense			<u></u>	tside of Texas. Complete Schedule	т.
								Office Supplies	X, officeholder living expense	
	Complete ONLY if direct		andidate/Offic	eholder name	C	Office soug	jht		Office held	
	expenditure to benefit C/Ol	1								
	Date		Payee name							
	03/01/2024		Pinson Jr. , I	Michael						
	Amount (\$)		Payee addres	s; City;	State;	Zip Cod	de			
	\$365.00		4814 Carme	n St #5						
			Houston, TX	77033						
-	PURPOSE	(a)	Category (See	Categories listed at the	e top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Salaries/Wa	ges/Contract La	bor	1		ليبا	tside of Texas. Complete Schedule	т.
								Staff payroll/pa	X, officeholder living expense	
								- 3 F 3.7 P 0	•	
	Complete ONLY if direct	C	andidate/Offic	eholder name	C	Office soug	ht		Office held	
	expenditure to benefit C/OI	1								

#### SCHEDULE F1

Advertising Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Polling Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
_			Instruction Guide explains	how to com	plete this form.				
1	Total pages Schedule F1:	ŀ				3	Filer ID		
	Sch: 22/27 Rpt: 35/40	Javed, Abrahin	1						
4	Date	5 Payee name							
	03/01/2024	Pourbabaei, Ar	idre "Lex"						
6	Amount (\$)	7 Payee address;	City; State:	Zip Code	9		1		
	\$1,884.25	7006 Feather C	Creek Dr						
		Houston, TX 77	7086						
8	PURPOSE	(a) Category (See Ca	tegories listed at the top of this sch	edule) (I	) Description				
	OF		s/Contract Labor	edule)	_	outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE				Check if Austin	, TX,	officeholder living expense		
					Staff payroll/	pay			
				İ					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officehold	older name C	Office sough	t		Office held		
	Date	Payee name							
	03/06/2024	Pourbabaei, Ar	dre "Lex"						
	Amount (\$)	Payee address;	City; State;	Zip Code	<u> </u>				
	\$904.68	7006 Feather C		2.p 0000	•				
	<b>4004.00</b>	1000100010	TOOK DI						
		Houston TV 77	7006						
		Houston, TX 77							
	PURPOSE OF		tegories listed at the top of this sch	edule) (t	Description		to at Tarres Consolute Cabadala T		
	EXPENDITURE	Salaries/Wages	s/Contract Labor		<u></u>		de of Texas. Complete Schedule T. officeholder living expense		
					Staff payroll/p				
						ر			
	Complete ONLY if direct	Candidate/Officeho	older name C	Office sough	t		Office held		
	expenditure to benefit C/OI		, ido, riamo	inco ooug.	•				
	Date	Payee name							
	03/03/2024	Reach Progress	S PBC						
	Amount (\$)	Payee address;	City; State;	Zip Code	:				
	\$300.00	228 Park Ave S							
		PMB 62932							
		New York, NY	10003						
	PURPOSE	(a) Category (associated)	tegories listed at the top of this sche	dula) (b	) Description				
	OF		draising Expense	edule)		outsic	le of Texas. Complete Schedule T.		
	EXPENDITURE	Cononacional an	araioning Experies		Check if Austin	TX,	officeholder living expense		
					Canvassing A	٩pp			
	Complete ONLY if direct	Candidate/Officeho	older name C	office sough	t		Office held		
	expenditure to benefit C/OI	1							

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Candidate/Officehole Credit Card Payment	lder/Politica	l Committee	Legal Services The Instruction Guide		-	Contract Labor		OTHER (enter a category not listed above	<del>2</del> )
1 Total pages Sched							3	Filer ID	
Sch: 23/27 Rpt:	36/40	Javed, Ab	ahim						
4 Date		5 Payee name	2						
02/29/2024		Resonate	Networks, Inc.						
6 Amount (\$)		7 Payee addr	ess; City;	State; Zip Co	ode				
\$2,0	060.00	11700 Pla	za America Drive						
		Suite 1000	1						
		Reston, V	A 20190						
8 PURPOSE		(a) Category (	See Categories listed at the to	p of this schedule)	(b)	Description			
OF EXPENDITURE	l	Advertising	gExpense					de of Texas. Complete Schedule T. officeholder living expense	
						Digital Ads	1 1 / 1	onicential ining expense	
9 Complete ONLY if			îiceholder name	Office sou	ught			Office held	
expenditure to ben	en c/or	1		AND THE PARTY OF T					
Date		Payee name	2						
02/25/2024		SHELL							
Amount (\$)		Payee addr	•	State; Zip Co	ode				
\$	50.02	11750 S H	WY 6						
		Sugar Lan	d, TX 77498						
PURPOSE OF			See Categories listed at the to		(b)	Description		=	
EXPENDITURE		Transporta Expense	tion Equipment And	l Related		느		de of Texas. Complete Schedule T. officeholder living expense	
		Lipelise				Fuel		•	
Complete ONLY if			ficeholder name	Office sou	ıght			Office held	
expenditure to bene	efit C/OF	1							
Date		Payee name	9						
03/01/2024		Sarkar, Na	ndini						
Amount (\$)		Payee addr	ess; City;	State; Zip Co	ode				
\$2	63.40	5227 Harv	est Bend Ct						
		Sugar Lan	d, TX 77479						
PURPOSE			See Categories listed at the to		(b)	Description			
OF EXPENDITURE		Salaries/W	ages/Contract Labo	r	ĺ			de of Texas. Complete Schedule T. officeholder living expense	
						Staff payroll/p		он <b>о</b>	
							•		
Complete ONLY if			ficeholder name	Office sou	ught			Office held	
expenditure to bene	efit C/OF	ł							

### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide 6	Salaries	Expen /Wage	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER					3	Filer ID
	Sch: 24/27 Rpt: 37/40	1	I, Abrahim					The is
4	Date	5 Payee	name					
	03/01/2024	Shah	Usman					
6	Amount (\$)	7 Payee	address; City;	State; Zip C	ode			***************************************
	\$373.40	0839	Buckeye Furnace Lane					
		Sugai	Land, TX 77498					
8	PURPOSE	(a) Categ	Ory (See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Salari	es/Wages/Contract Labor			<u></u>	, TX,	de of Texas. Complete Schedule T. officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		ate/Officeholder name	Office so	ught			Office held
	Date	Payee	name					
	03/06/2024	Shah,	Usman					
	Amount (\$)	Payee	address; City;	State; Zip C	ode			
	\$120.00	0839	Buckeye Furnace Lane					
		Sugar	Land, TX 77498					
	PURPOSE	(a) Catego	OFY (See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE		es/Wages/Contract Labor			<u></u>		de of Texas. Complete Schedule T.
	_/4 _/4					Staff payroll/p		officeholder living expense
						Stall payroling	Jay	
_	Complete ONLY if direct	Candida	te/Officeholder name	Office so	uaht			Office held
	expenditure to benefit C/O		and of modified that he	2	-9			
	Date	Payee	name					
	02/29/2024	Shahi	Darbar					
	Amount (\$)	Payee	address; City;	State; Zip C	ode			
	\$1,926.85	Shahi	Darbar					
		12920	University Boulevard					
		Sugar	Land, TX 77479					
	PURPOSE	(a) Catego	OFY (See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE		Beverage Expense		ł			de of Texas. Complete Schedule T.
	274 274311 3172					Staff Meal	TX,	officeholder living expense
						Stan Widai		
	Complete ONLY if direct	Candida	te/Officeholder name	Office so	ught			Office held
	expenditure to benefit C/O		and The state of t	JIII00 30	agint			5.1100 11014
				'				

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Travel Out of District

L	Cardidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
L	Sch: 25/27 Rpt: 38/40	Javed, Abrahim
4	Date	5 Payee name
	03/07/2024	Shahi Darbar
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,170.95	Shahi Darbar
	ł	12920 University Boulevard
L		Sugar Land, TX 77479
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	1	Staff Meal
	!	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	02/29/2024	Strategic Blue Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$15,600.00	11700 Plaza America Drive Ste 1000
	1	
		Reston, VA 20190
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Ad Placements
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	4
	Date	Payee name
	03/01/2024	Strategic Blue Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,060.00	11700 Plaza America Drive Ste 1000
		Reston, VA 20190
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense  Ad Placements
		Ad I Modificity
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	al Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 26/27 Rpt: 39/40	Javed, Abrahim
4	Date	5 Payee name
	03/01/2024	Thomas, Ketravia
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$330.00	4814 Carmen St.
	!	Apt 3
		Houston, TX 77033
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff payroll/pay
		Stan payrollipay
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	Н
	Date	Payee name
	03/03/2024	Tovar, Sarita
	Amount (\$)	Payee address; City; State; Zip Code
	\$240.00	3451 Jangle Brush Dr
		Apt 80c
		The Woodlands, TX 77381
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Polling and TV Ads
		Tolling and TV Add
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	-
	Date	Payee name
	02/26/2024	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.64	345 Highway 6
		Sugar Land, TX 77478
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Staff Meal
		G.a.i. iii.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment  The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 27/27 Rpt: 40/40	Javed, Abrahim	
4	Date	5 Payee name	
	02/27/2024	Walmart	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$45.03	345 Highway 6	
		Sugar Land, TX 77478	
8	PURPOSE		(b) Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Staff Meal
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
	expenditure to benefit C/OI		