## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains hov	v to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages f	-
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR Mr.	FIRST Mo	MI	1	USEONLY
NAME	NICKNAME	LAST Nehad	SUFFIX	· Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BO) 8718 Grassy Richmond T	wren Rd	CITY; STATE; ZIP CODE		JAN 12202
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 449-1448	EXTENSION		d or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR Mr.	FIRST Joe	MI	- Receipt #	Amount \$
NAME	NICKNAME	LAST Walz	SUFFIX	Date Processed	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS 1115 Honey Richmond T		BUITE #; CITY;	STATE;	ZIP CODE
B CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
B REPORT TYPE	January 15	30th day before e		treasurer a (Officeholde	er Only)
	July 15	8th day before ele	Reporting Limit	Final Repo	rt (Attach C/OH - FR)
0 PERIOD COVERED	Month	Day Year	THROUGH 12	Day Yea	
1 ELECTION	ELECTION DA Month Day 3 5	Year Primary 23 General	ELECTION TYPE Runoff Other Description Special	E	
2 OFFICE	OFFICE HELD (if any) $N/A$	, ,	13 OFFICE SOUGHT (if know Fort Bend Cour		
4 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITURES	ACCEPTED OR POLITICAL EXPENDITURES I S MAY HAVE BEEN MADE WITHOUT THE CAN RED TO REPORT THIS INFORMATION ONLY IF	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME		
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS		
	1	GO TO	en e		

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME Mo Nehad	16	Filer ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	<ol> <li>TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</li> </ol>	\$			
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,725.00			
EXPENDITURE TOTALS					
	4. TOTAL POLITICAL EXPENDITURES	\$ 44,257.08			
CONTRIBUTION BALANCE	<ol> <li>TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D/ OF REPORTING PERIOD</li> </ol>	<sup>AY</sup> \$ 17,023.26			
OUTSTANDING LOAN TOTALS	<ol> <li>TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</li> </ol>	E \$			
	wear, or affirm, under penalty of perjury, that the accompanying report is true and uired to be reported by me under Title 15, Election Code.	d correct and includes all information			
	Signature of Candid	ate or Officeholder			
	Please complete either option below:				
	r lease complete ethici option selon.				
(1) Affidavit	STEFAN WONG Notary Public, State of Texas Comm. Expires 06-02-2024 Notary ID 132502022				
NOTARY STAMP/SEAL	_				
Sworn to and subscribed	before me by MO NEHAD ABOULHAMED this the 7	day of JAN			
	which, witness my hand and seal of office. Stefan Wony	Notary Public			
Signature of officer administe	ing oath Printed name of officer administering oath	Title of officer administering oath			
	OR				
(2) Unsworn Declaratio	on				
My name is	, and my date of birth is				
My address is					
	(street) (city) (state	) (zip code) (country)			
Executed in	County, State of, on the day of	, 20 (year)			
		Officeholder (Declarant)			
Forms provided by Texas Et	hics Commission www.ethics.state.tx.us	Revised 8/17/2020			

# SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

	FILER NAME 20 D Nehad	Filer ID (Ethics Commi	ssion Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	5,725.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS \$	20,991.65
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONT	RIBUTIONS \$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	21,315.43
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	23,265.43
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUS	INESS OF C/OH \$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS \$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED \$	

<sup>2</sup> FILER NAME Mo Nehac	Instruction Guide explains how to complete t	this form	1 Total pages Schedule A1:
Mo Nehao			3 Filer ID (Ethics Commission Filers)
ino incliac			
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Charles Ryan Moffitt		7 Amount of contribution (\$)
09/14/2023	6 Contributor address; City; 2002 Montezuma Ln League		200.00
8 Principal occur Businessman	pation / Job title (See Instructions)	9 Employer (See Instruct Self Employed	tions)
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$)
09/11/2023	Contributor address; City; Sugar Land TX 7747	State; Zip Code <b>'9</b>	100.00
Principal occupa Businessman	ation / Job title (See Instructions)	Employer (See Instruct Self Employed	ions)
Date	Full name of contributor out-of-state Abraham Madha	PAC (ID#:)	Amount of contribution (\$)
09/14/2023		State; Zip Code TX 77471	100.00
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruct US Military	ions)
Date	Full name of contributor out-of-state	PAC (ID#:)	Amount of contribution (\$)
09/14/2023 <sup> </sup>	Contributor address; City; 16723 Village View trl Sugar I	State; Zip Code	250.00
Dringing	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Principal occupa			

	ARY POLITICAL CONTRIBU		SCHEDULE A1
The	Instruction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: 4
<sup>2</sup> FILER NAME Mo Nehad			3 Filer ID (Ethics Commission Filers)
4 Date 09/15/2023	<ul> <li>Full name of contributor out-of-state PA</li> <li>Khalid Malik</li> <li>Contributor address; City;</li> <li>11414 Rock Bridge lane Sugar Land</li> </ul>	7 Amount of contribution (\$) 400.00	
8 Principal occu Scientist	pation / Job title (See Instructions)	9 Employer (See Instruct Texas Medical Cent	
Date 09/15/2023	Full name of contributor       out-of-state PA         Beverly Stricker       Contributor address;         Contributor address;       City;         14323 Buffalo St. Needville TX		Amount of contribution (\$)
Principal occup Retired	bation / Job title (See Instructions)	Employer (See Instruct Political Activist	ions)
Date 09/14/2023	Guy LaRose	c (ID#:) State; Zip Code nd TX 77469	Amount of contribution (\$)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct	ions)
Date 09/14/2023	Full name of contributor       out-of-state PAG         Cindy Adkins       Contributor address;         Contributor address;       City;         2118 S. Shadow Grove lane Richmoder	c (ID#:) State; Zip Code ond TX 77406	Amount of contribution (\$)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES If contributor is out-of-state PAC, please see Instr		

The	Instruction Guide explains how to complete this for	orm.	1 Total pages Schedule A1: 4
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Mo Nehad			
4 Date	5 Full name of contributor out-of-state PAC (II William Graham	7 Amount of contribution (\$)	
09/15/2023	6 Contributor address; City;	State; Zip Code	50.00
	2123 Spanish Forest Lane Richmond	TX 77406	50.00
8 Principal occu Retired	pation / Job title (See Instructions) 9	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
09/14/2023	Leah Hagan		
00/11/2020		State; Zip Code	200.00
	2111 Canyon Crest Dr. Sugar La	and IX //4/9	
Principal occup Political Cons	bation / Job title (See Instructions) Sultant	Employer (See Instructi	ons)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
09/14/2023	Anna Nicole Finberg	200 00	
		State; Zip Code	200.00
	3314 Hampton Dr. Missouri City		
Principal occup nvestment A	dvisor	Employer (See Instructi Vells Fargo	ons)
Date	Full name of contributor out-of-state PAC (II	D#:)	Amount of contribution (\$)
07/25/2023	Michael Russell		
0772572025	Contributor address; City;	State; Zip Code	25.00
	5 Otter Pond Place Spring TX 77		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ions)

The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1: 4	
2 FILER NAME	4		3 Filer ID (Ethics Commission Filers)	
Mo Nehad				
	Khurram Khwaja	C (ID#:)	<b>7</b> Amount of contribution (\$)	
11/01/2023	6 Contributor address; City;	State; Zip Code	2,000.00	
	8222 Silverspot Dr. Missouri Ci	ty TX 77459	-,000.00	
	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)	
T Director		Intellegens Inc		
Date		C (ID#:)	Amount of contribution (\$)	
09/14/2023	Eric Sanchez			
		State; Zip Code	200.00	
	4011 Wimberly Hollow Lane Houston	n TX 77053		
Principal occup Deputy	ation / Job title (See Instructions)	Employer (See Instruct Harris County Sheri		
Date		(ID#:)	Amount of contribution (\$)	
)9/14/2023			400.00	
	Contributor address; City;	State; Zip Code	400.00	
	15718 Hwy 288 South Pearland			
Principal occup Deputy	ation / Job title (See Instructions)	Employer (See Instruct Harris County Sheri		
Date	Full name of contributor out-of-state PAC	C (ID#:)	Amount of contribution (\$)	
10/01/0000	Mir Ali Khan			
10/01/2023	Contributor address; City;	State; Zip Code	1,000.00	
	24206 Falcon Point Dr Katy TX	77494	,	
ingeneration and an and a second s	bation / Job title (See Instructions)	Employer (See Instruct	ions)	
Principal occup T Director		Self Employed		

	EXPENDITURES MADE		SCHEDULE F1	
If the requested in	formation is not applicable, DO NOT inclu	de this page in the r	eport.	
	EXPENDITURE CATEGOR	ES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credit Card Payment	Fees Offic Food/Beverage Expense Polli By Gift/Awards/Memorials Expense Print	Repayment/Reimbursement e Overhead/Rental Expense ng Expense ries/Wages/Contract Labor <b>/ to complete this form.</b>	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1 4	2 FILER NAME Mo Nehad		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Payee name			
12/01/2023	Reachout Houston			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
4,000.00	15000 W. Airport Blvd #424 Sugar Land TX 77498			
8	(a) Category (See Categories listed at the top of this schedu	e) (b) Description		
PURPOSE OF EXPENDITURE	of video Ads Froduction Folitical Adventising			
	(C) Check if travel outside of Texas. Complete Schedule	T. Check if Austi	n, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Fort Bend County Sheri	Office held ff Office N/A	
Date	Payee name			
11/01/2023	Eric Ramirez			
Amount (\$)	Payee address;	City;	State; Zip Code	
675.00	1019 Vera Cruz Dr. Rosenberg TX 77471			
	Category (See Categories listed at the top of this schedule	) Description		
PURPOSE OF EXPENDITURE	Advertising	Yard Sign Sta	kes	
	Check if travel outside of Texas. Complete Schedule	Check if Austi	n, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/OI	<sup>+</sup> Mo Nehad	Fort Bend County Sheri	ff Office N/A	
Date	Payee name			
10/01/2023	Burley Gunter			
Amount (\$)	Payee address;	City;	State; Zip Code	
150.00	3310 Needville Ave Needville TX 77461			
	Category (See Categories listed at the top of this schedule	Description		
PURPOSE OF EXPENDITURE	Tickets	Charity Event		
	Check if travel outside of Texas. Complete Schedule	Check if Austir	n, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held	
expenditure to benefit C/Oł	<sup>+</sup> Mo Nehad	Fort Bend County Sherif	Office N/A	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

cs.s

Forms provided by Texas Ethics Com

Reset Form

Revised 8/17/2020

		DITURES MADE CONTRIBUTIONS			SCI	HEDULE <b>F1</b>
If the requested inf	formation is	not applicable, DO NOT in	clude	this page in the re	port.	
		EXPENDITURE CATEG	ORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor	Travel In District Travel Out Of District	ipment & Related Expense
1 Total pages Schedule F1: 4	2 FILER N				3 Filer ID (Ethi	cs Commission Filers)
4 Date 09/25/2023	5 Payee na Cynthia	<sup>me</sup> Rodriguez				
6 Amount (\$)	7 Payee ac	ldress;		City;	State;	Zip Code
25.00		mpsons Rd nd TX 77469				
8	(a) Categor	y (See Categories listed at the top of this se	chedule)	(b) Description		
PURPOSE OF EXPENDITURE	Charity	Event		Sewing Class		
	(c)	Check if travel outside of Texas. Complete Sch	nedule T.	Check if Austin	, TX, officeholder livir	ng expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name had	F	Office sought Fort Bend County Sheriff Office		Office held
Date	Payee na	me		*		
09/13/2023	All Glory	Honor Guard				
Amount (\$)	Payee ad	ldress;		City;	State;	Zip Code
200.00		and park Dr. City TX 77459				
		(See Categories listed at the top of this sch	nedule)	Description		
PURPOSE	Advertis	sing		Saluting the Fla	ag	
OF EXPENDITURE						
		Check if travel outside of Texas. Complete Sch	edule T.	Check if Austin	, TX, officeholder livir	ng expense
Complete ONLY if direct	Candid	ate / Officeholder name		Office sought		Office held
expenditure to benefit C/O⊦	Mo Ne	ehad	F	Fort Bend County Sheriff Office	N/A	۱
Date	Payee na	ame				
09/01/2023	Ad Critte	er				
Amount (\$)	Payee ad			City;	State;	Zip Code
100.00	Nashville					
	Category	(See Categories listed at the top of this sch	edule)	Description		
PURPOSE	Advertis	ing		Membership		
EXPENDITURE						
		Check if travel outside of Texas. Complete Sch	edule T.	Check if Austin,	, TX, officeholder livin	ng expense
Complete ONLY if direct	Candid	ate / Officeholder name		Office sought		Office held
expenditure to benefit C/OF	Mo Ne	had	F	ort Bend County Sh	neriff N/A	
	AT	FACH ADDITIONAL COPIES C	OF THIS	SCHEDULE AS NEE	DED	

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

EYDENDITI	IDECA	TECODIES	FOR BOX 8(a)
LAFLINDIN		IEGORIES	FUR DUA 0121

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Rep Office Ov Polling Ex Printing E Salaries/V	ayment/Reimbursement erhead/Rental Expense xpense xpense Vages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a categ	oment & Related Expense
1 Total pages Schedule F1: 480	2 FILER N				3 Filer ID (Ethic	s Commission Filers)
4 Date	5 Payee na	-			· · · · · · · · · · · · · · · · · · ·	an a
12/28/2023	Pressler Inc					
6 Amount (\$)	7 Payee ac	ldress;		City;	State;	Zip Code
1,140.00		oss Trail Dr. and TX 77479				
8	(a) Categor	y (See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising			Stakes for Sigr	าร	
	(c)	Check if travel outside of Texas. Complete S	Schedule T.	Check if Austin	n, TX, officeholder living	expense
9 Complete <u>ONLY</u> if direct		ate / Officeholder name		Office sought		Office held
expenditure to benefit C/OI	H Mo Ne	had	F	Fort Bend County Sheriff Office	N/A	
Date	Payee na	me				
12/15/2023	Pressler	Inc				
Amount (\$) 9,000.00		<sup>dress;</sup> oss Trail Dr. and TX 77479		City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category Consult	(See Categories listed at the top of this s ing	schedule)	Description Political Camp	aign Manage	er
		Check if travel outside of Texas. Complete S	chedule T.	Check if Austin	, TX, officeholder living	expense
Complete ONLY if direct	Candida	ate / Officeholder name		Office sought		Office held
expenditure to benefit C/OF	1 Mo Ne	ehad	F	Fort Bend County Sheriff Office	N/A	Star Star
Date	Payee na	ime				
12/01/2023	Tauseef	Ashraf				
Amount (\$)	Payee ad	dress;	and the state of the second	City;	State;	Zip Code
1,534.00		echser Lane d TX 77407				
	Category	(See Categories listed at the top of this s	chedule)	Description	and a second	
PURPOSE OF EXPENDITURE	Advertis	ing		T Shirts, Shirts,	Table cover	s and Vests
		Check if travel outside of Texas. Complete S	chedule T.	Check if Austin	, TX, officeholder living	expense
Complete ONLY if direct		ate / Officeholder name		Office sought		Office held
expenditure to benefit C/OF	<sup>+</sup> Mo Ne	had	Fo	ort Bend County Sheriff Office	N/A	
	AT	ACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEE	DED	

## POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

EXPENDITI	IPEC	ATECODIES	FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain	Loan Repa Office Ove Polling Ex Printing E: Salaries/V	ayment/Reimbursement rrhead/Rental Expense pense xpense Vages/Contract Labor	Solicitation/Fundrais Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	oment & Related Expense
1 Total pages Schedule F1:		AME.			3 Filer ID (Ethic	s Commission Filers)
4	Mo Neha					
4 Date 08/28/2023	5 Payee na Chelsea					
6 Amount (\$)	7 Payee ad	dress;	an a	City;	State;	Zip Code
250.00		rton River Ct d TX 77469				
8	(a) Category	/ (See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertis	ing		Banners		
	(c)	Check if travel outside of Texas. Complete Se	chedule T.	Check if Austin	, TX, officeholder living	expense
9 Complete ONLY if direct		ate / Officeholder name		Office sought		Office held
expenditure to benefit C/OI	Mo Neł	nad	F	ort Bend County Sheriff Office	N/A	
Date	Payee nar	ne				
08/22/2023	Brazos F	River Sportsman Club				
Amount (\$)	Payee add	dress;		City;	State;	Zip Code
766.65	3525 Bov Fulshear	wser Rd TX 77441				
PURPOSE OF EXPENDITURE	Category Advertis	(See Categories listed at the top of this so ing	chedule)	Description Guns purchased f	or auctioning a	t Non Profit events
	(	Check if travel outside of Texas. Complete Sc	chedule T.	Check if Austin,	, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		te / Officeholder name	F	Office sought ort Bend County Sheriff Office	N/A	Office held
Date	Payee na	me				
07/24/2023		od Festival				
Amount (\$) 500.00	Payee add Constellatior 1 Stadium D Sugar Land	n Field r.		City;	State;	Zip Code
	Category	(See Categories listed at the top of this so	chedule)	Description	99999999999999999999999999999999999999	
PURPOSE OF EXPENDITURE	Advertisi	ng		Food Festival S	tall	
	C	Check if travel outside of Texas. Complete Sc	hedule T.	Check if Austin,	TX, officeholder living	expense
Complete <u>ONLY</u> if direct	Candida	te / Officeholder name		Office sought		Office held
expenditure to benefit C/OF	Mo Nel	had	For	t Bend County Sheriff Office	N/A	
	ATT	ACH ADDITIONAL COPIES	OF THIS	SCHEDULE AS NEED	DED	

		DITURES MADE			SCH	IEDULE F1
If the requested in	formation is	not applicable, <b>DO NO</b>	include t	this page in the re	eport.	
		EXPENDITURE CAT	EGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Ove Polling Ex Printing Ex Salaries/M	kpense Vages/Contract Labor	Travel In District Travel Out Of Distri	pment & Related Expense
1 Total pages Schedule F1: 5	2 FILER N Mo Neha				3 Filer ID (Ethic	cs Commission Filers)
4 Date 12/01/2023	5 Payee na US Bani	me ner and Sign				
6 Amount (\$)	7 Payee ac	dress;		City;	State;	Zip Code
2,651.00		rwin Dr. Suite E TX 77036				
8	(a) Categor	(See Categories listed at the top of the second	is schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertis	sing		Stickers, Magr	nets and Ban	ners
	(C)	Check if travel outside of Texas. Complete	Schedule T.	Check if Austin	n, TX, officeholder livin	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name had	Fo	Office sought ort Bend County Sheriff Office	N/A	Office held
Date	Payee na	me				
Amount (\$)	Payee ad	dress;		City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category	(See Categories listed at the top of this	schedule)	Description		
		Check if travel outside of Texas. Complete	Schedule T.	Check if Austin	, TX, officeholder living	) expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ite / Officeholder name		Office sought		Office held
Date	Payee na	me				
Amount (\$)	Payee ad	dress;		City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Category	(See Categories listed at the top of this	schedule)	Description		
		Check if travel outside of Texas. Complete	Schedule T.	Check if Austin	, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		te / Officeholder name		Office sought		Office held
	ATT	ACH ADDITIONAL COPIES	S OF THIS S	CHEDULE AS NEE	DED	

If the requested infor	mation is n	ot applicabl	e, <b>DO NOT</b>	include	e this	page in the rej	oort.		
		EXPEN	DITURE CA	TEGORI	ES FO	OR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic		Legal Services	e Expense emorials Expense	Offic Polli Prin Sala	ting Exp ing Exp ing Exp inies/Wa		Transp Travel Travel	In District Out Of Distric	ment & Related Expen
1 Total pages Schedule F4: 5	2 FILER Mo Neha	NAME					3 Filer	ID (Ethics	Commission Filers)
4 TOTAL OF UNITEM	IZED EXF	ENDITURE	ES CHARG	EDTOA		EDIT CARD	\$	<b>1999 - 1999 - 1999 - 1999 - 1999 - 1999</b> - 1999 - 1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1	
<b>5</b> Date 09/14/2023	6 <sub>Payee</sub> Shahi D						1		
7 Amount (\$) 3,600.00		<sup>address;</sup> Iniversity I and TX 77				City;		State;	Zip Code
9 TYPE OF EXPENDITURE		Political		N	on-Poli	tical			
10 PURPOSE OF EXPENDITURE	(a) Categor Adverti	y (See Categories sing	listed at the top of	f this schedu		(b) Description Kick Off Party	/		
	(c)	Check if travel out	side of Texas. Comp	lete Schedule	eT.	Check if Au	stin, TX, off	iceholder living	ı expense
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		didate / Office				ice sought		Office he	eld
Date 12/01/2023	Payee Text By								
Amount (\$) 5,203.00	325 Fair	<sup>address;</sup> pointe Pla e GA - 30				City;		State;	Zip Code
TYPE OF EXPENDITURE		Political			on-Poli	itical	5 		
PURPOSE OF EXPENDITURE	Categor Advertis	y (See Categories Sing	is listed at the top o	f this schedu	le)	Description Text Messag	ing		
		Check if travel out	side of Texas. Comp	plete Schedule	e T.	Check if Au	stin, TX, off	iceholder living	) expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		didate / Office	holder name			ice sought		Office he	eld

	RES MADE BY CRE				DULE <b>F4</b>
	EXPENDITURE CA		R BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens	Loan Repaym Office Overhe Polling Exper Printing Expe Salaries/Wag	nent/Reimbursement ad/Rental Expense ise inse ies/Contract Labor	Solicitation/Fundraisi Transportation Equip Travel In District Travel Out Of District Other (enter a catego	ment & Related Expense
1 Total pages Schedule F4: 5	2 FILER NAME Mo Nehad			3 Filer ID (Ethics (	Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARG	EDTOACRE	DITCARD	\$	
5 Date 12/01/2023	<sup>6</sup> Payee name Texas GOP Store				
7 Amount (\$) 3,129.43	8 Payee address; 404 Interstate 45 Hunstville TX 77340		City;	State;	Zip Code
9 TYPE OF EXPENDITURE	Political	Non-Politi	cal		800 million ann an Aonaichtean ann
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Advertising	1	(b) Description (ard Signs ar	nd Road Signs	
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) Check if travel outside of Texas. Com Candidate / Officeholder name Mo Nehad	e Offic	ce sought	officeholder living Office he N/A	
Date	Payee name				
09/01/2023 Amount (\$) <b>1,000.00</b>	US Mail Payee address; 225 Matlage Way Sugar Land TX 77478		City;	State;	Zip Code
TYPE OF EXPENDITURE	Political	Non-Politi	cal		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Mailing		Description Stamps		
	Check if travel outside of Texas. Con	nplete Schedule T.	Check if Au	stin, TX, officeholder living	expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Mo Nehad		ce sought nd County Sheriff C	Office he	eld
	ATTACH ADDITIONAL COPIE	S OF THIS SCI	HEDULE AS NEI		Povicod 8/17/2020

200.00       5710 Emmett Creek Lane Sugar Land TX 77479         Image: Straight of Expenditure       Political         Image: Purpose of Expenditure       Political         Image: Purpose of Expenditure       (a) Category (See Categories listed at the top of this schedule) Advertising       (b) Description Banners and Signs display at event         Image: Purpose of Expenditure       (c) Check if traveloutside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Image: Purpose of Expenditure to benefit C/OH       Candidate / Officeholder name       Office sought       Office held         Image: Payee name 12/01/2023       Payee name Republican Women's Club of Katy       Fort Bend County Sheriff Office       N/A		RES MADE BY CREDIT				EDULE <b>F4</b>
Advantage Expense Commutation Expense Commutation Control Media Participants Commutation Control Media Participants Commutation Control Media Commutation Control Media Participants Commutation Control Media Commutation Control Media Control Media Commutation Control Media Control Media Contro		nation is not applicable, DO NOT inclu	ude this	s page in the rep	oort.	
Accounting Banking Consultation Streamed Consultation Str		EXPENDITURE CATEGO	ORIES F	OR BOX 10(a)		
1       Total pages Schedule F4:       2       FILER NAME Mo Nehad       3       Fiter ID (Ethics Commission         4       TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD       \$       \$         5       Date 08/01/2023       6       Payee name Elite Productions Inc       \$         7       Amount (\$)       8       Payee address; 5710 Emmett Creek Lane Sugar Land TX 77479       City; State; Zip Cod         9       TYPE OF EXPENDITURE       Political       Non-Political       (b) Description Banners and Signs display at event         10       PURPOSE EXPENDITURE       Category (Bee Categories listed at the top of this schedule) (c) Check if fuel outside of Texas. Complete Schedule T. Condictate / Office hold       (b) Description Banners and Signs display at event         11       Complete QNLY if direct expenditure to benefit G/OH       Candidate / Officeholder name MO Nehad       Office sought       Office held         12/01/2023       Payee name Republican Women's Club of Katy       Port Bend County Sheriff Office       N/A         Date 12/01/2023       Payee address; Category (Bee Categories listed at the top of this schedule) OFfice held       Description Political         TYPE OF EXPENDITURE       Political       Non-Political       Description         Payee address; Category (Bee Categories listed at the top of this schedule) Office held       Description Political Event <t< td=""><td>Accounting/Banking Consulting Expense Contributions/Donations Made E</td><td>Fees Food/Beverage Expense By Gift/Awards/Memorials Expense al Committee Legal Services</td><td>Office Over Polling Exp Printing Ex Salaries/W</td><td>rhead/Rental Expense pense pense ages/Contract Labor</td><td>Transportation Equip Travel In District Travel Out Of Distric</td><td>ment &amp; Related Expense t</td></t<>	Accounting/Banking Consulting Expense Contributions/Donations Made E	Fees Food/Beverage Expense By Gift/Awards/Memorials Expense al Committee Legal Services	Office Over Polling Exp Printing Ex Salaries/W	rhead/Rental Expense pense pense ages/Contract Labor	Transportation Equip Travel In District Travel Out Of Distric	ment & Related Expense t
4       TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD       \$         5       Date       6       Payee name       Elite Productions Inc         7       Amount (\$)       8       Payee address:       City:       State:       Zip Cod         200.00       5710 Emmett Creek Lane       sugar Land TX 77479       State:       Zip Cod         9       TYPE OF       Political       Non-Political       (b) Description         10       Purpose       Advertising       (b) Description         Advertising       Category (See Categories listed at the top of this schedule)       (b) Description         8       Payee name       Office Sought       Office holder Iwing expense         11       Candidate / Officeholder name       Office sought       Office holder Iwing expense         11       Candidate / Officeholder name       Office sought       Office holder N/A         Date       Payee name       Republican Women's Club of Katy       N/A         Amount (\$)       Payee address;       City;       State;       Zip Code         75.00       Expenditure       Payee address;       City;       State;       Zip Code         Purpose       Office Category (See Categories listed at the top of this schedule)       Description       Po		2 FILER NAME			3 Filer ID (Ethics (	Commission Filers)
5 Date       6 Payee name         08/01/2023       Elite Productions Inc         7 Amount (\$)       8 Payee address;       City:       State;       Zip Cod         2000.00       5710 Emmett Creek Lane Sugar Land TX 77479       Image: City:       State;       Zip Cod         9       TYPE of EXPENDITURE       Image: City:       State;       Zip Cod         10       Purpose EXPENDITURE       Image: City:       State;       Zip Cod         10       Purpose EXPENDITURE       Image: City:       State;       Zip Cod         10       Purpose Expenditure to benefit Cicit       Advertising       Image: City:       Banners and Signs display at event         11       Condidate / Officeholder name       Office sought       Office holder Iving expense         11       Condidate / Officeholder name       Office sought       Office held         12/01/2023       Payee name       Payee name       Non-Political         12/01/2023       Payee name       Republican Women's Club of Katy       N/A         75.00       Fategory (see Categories listed at the top of this schedule)       Description         Purpose Condicte Office Coll Science Schedule 1       City:       State;       Zip Code         6       Payee address;       City:       Sta				an di Gran ana ang kanang k		
08/01/2023       Elite Productions Inc         7 Amount (\$)       8 Payee address;       City;       State;       Zip Cod         200.00       5710 Emmett Creek Lane Sugar Land TX 77479       Immett Creek Lane Sugar Land TX 77479       Immett Creek Lane         9       TYPE OF EXPENDITURE       Immett Creek Lane       Non-Political         10       Immett Creek Lane       Non-Political         10       Immett Creek Lane       Non-Political         10       Immett Creek Lane       Immett Creek Lane         200.00       Immett Creek Lane       Immett Creek Lane         10       Immett Creek Lane       Immett Creek Lane         11       Category (See Categories listed at the top of this schedule)       Immett Creek If Austin, TX, officeholder living expense         11       Candidate / Officeholder name       Office sought       Office held         12/01/2023       Payee name       Payee name       Non-Political         12/01/2023       Payee address;       City;       State;       Zip Code         75.00       Katy TX       Payee address;       City;       State;       Zip Code         PURPOSE       F       Political       Categories listed at the top of this schedule)       Description       Dolitical Event       Category (See Categories	4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED T	OACR	EDITCARD	\$	
200.00       5710 Emmett Creek Lane Sugar Land TX 77479         9       TYPE OF EXPENDITURE       Political         10       PURPOSE OF EXPENDITURE       Political         (a) Category (See Categories listed at the top of this schedule)       (b) Description         Advertising       (a) Category (See Categories listed at the top of this schedule)       (b) Description         Banners and Signs display at event       (c) Check if traveloutside of Texes. Complete Schedule T. Check if Austin, TX, officeholder living expense         11       Candidate / Officeholder name       Office sought       Office held         Date       Payee name       Republican Women's Club of Katy       N/A         Date       Payee address;       City;       State;       Zip Code         TYPE OF EXPENDITURE       Payee address;       City;       State;       Zip Code         Monunt (\$)       Payee address;       City;       State;       Zip Code         TYPE OF EXPENDITURE       Political       Non-Political       Description         PURPOSE ESPENDITURE       Political       Description       Political Event       Category (See Categories listed at the top of this schedule)       Description         PURPOSE ESPENDITURE       Category (See Categories listed at the top of this schedule)       Description       Political Event						
Implete OF EXPENDITURE       Political       Non-Political         10       (a) Category (See Categories listed at the top of this schedule) Advertising       (b) Description Banners and Signs display at event         11       Advertising       (b) Description         10       Advertising       Banners and Signs display at event         11       Candidate / Officeholder name       Office sought       Office held         12       Candidate / Officeholder name       Office sought       Office held         12       Payee name       Republican Women's Club of Katy         Date       Payee address;       City:       State;       Zip Code         12/01/2023       Payee address;       City:       State;       Zip Code         TYPE OF       Payee address;       City:       State;       Zip Code         TYPE OF       Political       Non-Political       Description         PURPOSE       Office Secuption Sisted at the top of this schedule)       Description         PURPOSE       Office Admission fee       Political       Description         Political       Category (See Categories listed at the top of this schedule)       Description         Political       Category (See Categories listed at the top of this schedule)       Description         Political Eve		5710 Emmett Creek Lane		City;	State;	Zip Code
PURPOSE OF EXPENDITURE       Advertising       Banners and Signs display at event         (e)       Check if ravel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         11       Candidate / Officeholder name       Office sought       Office held         Monount (s)       Payee name       Fort Bend County Sheriff Office       N/A         Date       Payee name       Republican Women's Club of Katy       State;       Zip Code         Amount (s)       Payee address;       City;       State;       Zip Code         TYPE OF       Political       Non-Political       Vertical       Vertical is schedule)         Purpose       Category (See Categories listed at the top of this schedule)       Description       Political Event         Purpose       Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense       Office sought       Office held         Complete ONLY if direct       Candidate / Officeholder name       Office sought       Office held       Office held	I TYPE OF	Political	Non-Po	litical		
11 Complete QNLY if direct expenditure to benefit C/OH       Candidate / Officeholder name       Office sought       Office held         MO Nehad       Fort Bend County Sheriff Office       N/A         Date       Payee name       Payee name         12/01/2023       Republican Women's Club of Katy       Vital         Amount (\$)       Payee address;       City;       State;       Zip Code         755.00       Image: Political       Non-Political       Vital       Vital         PURPOSE       Office Office Outside of Texes. Complete Schedule)       Description       Political Event         PURPOSE       Check if ravel outside of Texes. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Complete ONLY if direct       Candidate / Officeholder name       Office sought       Office held	PURPOSE OF		hedule)		Signs display	at events
Complete QNLY if direct expenditure to benefit C/OH       Mo Nehad       Fort Bend County Sheriff Office       N/A         Date       Payee name         12/01/2023       Payee address;       City;       State;       Zip Code         Amount (\$)       Payee address;       City;       State;       Zip Code         75.00       Political       Non-Political       Poscription         PURPOSE       Political       Category (See Categories listed at the top of this schedule)       Description         PURPOSE       Category (See Categories listed at the top of this schedule)       Description       Political Event         Check if fuered       Check if Austin, TX, officeholder living expense       Candidate / Officeholder name       Office sought       Office held		(C) Check if travel outside of Texas. Complete Sch	hedule T.	Check if Au	stin, TX, officeholder living	expense
12/01/2023       Republican Women's Club of Katy         Amount (\$)       Payee address;       City;       State;       Zip Code         75.00       Katy TX       Non-Political         TYPE OF EXPENDITURE       Political       Description         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule)       Description         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Candidate / Officeholder name       Office sought       Office held	Complete ONLY if direct					eld
75.00       Katy TX         Image: style of expenditure       Political       Non-Political         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule)       Description         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule)       Description         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Category (See Categories listed at the top of this schedule)       Description         Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Candidate / Officeholder name       Office sought       Office held			aty			
EXPENDITURE       Political       Non-Political         PURPOSE OF EXPENDITURE       Category (See Categories listed at the top of this schedule) Admission fee       Description Political Event         Check if travel outside of Texas. Complete Schedule T.       Check if Austin, TX, officeholder living expense         Candidate / Officeholder name       Office sought       Office held				City;	State;	Zip Code
PURPOSE OF EXPENDITURE     Admission fee     Political Event       Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense       Candidate / Officeholder name     Office sought     Office held		Political	Non-Po	litical		
Candidate / Officeholder name Office sought Office held	OF		chedule)		nt	
Complete ONLY if direct		Check if travel outside of Texas. Complete Sch	hedule T.	Check if Au	istin, TX, officeholder living	) expense
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		ATTACH ADDITIONAL COPIES OF	THIS SO	CHEDULE AS NE	EDED	

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ADE BY CREDIT				EDULE F4
EXPENDITURE CATEG	ORIES F	OR BOX 10(a)		
Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor	Solicitation/Fundraisi Transportation Equip Travel In District Travel Out Of Distric Other (enter a catego	ment & Related Expense
NAME			3 Filer ID (Ethics	Commission Filers)
PENDITURES CHARGED	FOACR	EDIT CARD	\$	
name			1	
address;		City;	State;	Zip Code
nphitheatre parkway inview CA - 94043				
Political	Non-Pol	itical		
ry (See Categories listed at the top of this so ising	chedule)	(b) Description Ads		
Check if travel outside of Texas. Complete Sc ndidate / Officeholder name	Of	Check if Au fice sought Bend County Sł	officeholder living Office he neriff N/A	
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address;		City;	State:	Zip Code
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Political	Non-Pol	litical		
ry (See Categories listed at the top of this so Sing	chedule)	Description Political Ads		
Check if travel outside of Texas. Complete Sc	chedule T.	Check if Au	ustin, TX, officeholder living	g expense
ndidate / Officeholder name		fice sought nd County Sheriff Office	Office h	eld
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				CH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

	EXPENDITURE CATEG	ORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made Candidate/Officeholder/Politi Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule G:	1		2 51 15 (51) 2 1 1 5
1 Iotal pages Schedule G.	Mo Nehad		3 Filer ID (Ethics Commission Filers)
4 Date	5 Pavee name		
10/01/2023	Reachout Houston		
<ul> <li>6 Amount (\$)</li> <li>✓ Reimbursement from political contributions intended</li> </ul>	7 Payee address; 15000 W.Airport Blvd #424 Sugar Land TX 77498	City;	State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Advertising	edule) (b) Description Video Ads Pro	duction
	(c) Check if travel outside of Texas. Complete Scher	dule T. Check if Austir	n, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Fort Bend County Sheriff Office	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch	edule) Description	
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austin	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$) Reimbursement from political contributions intended	Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this school	edule) Description	
	Check if travel outside of Texas. Complete Scheo	dule T. Check if Austir	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED	DED

If the requested infor	mation is no	ot applicable,	DO NOT inc	lude this	page in the rep	port.	
		EXPENDI	TURE CATEC	GORIES F	OR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic		Event Expense Fees Food/Beverage Ex Gift/Awards/Memo Legal Services	rials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor	Solicitation/Fundraisi Transportation Equipi Travel In District Travel Out Of District Other (enter a catego	ment & Related Exper
1 Total pages Schedule F4:	2 FILER		n Guide explair	is how to co	omplete this form.	3 Filer ID (Ethics (	Commission Filers)
5	Mo Neha						Johnnission Filers)
4 TOTAL OF UNITEM	IZED EXP	ENDITURES	CHARGED	TOACR	EDIT CARD	\$	
<b>5</b> Date 12/01/2023	6 Payee						
7 Amount (\$) 2,770.00	8 Payee 1 Hacker Menio Pa		025		City;	State;	Zip Code
9 TYPE OF EXPENDITURE	F	Political		Non-Pol	itical		
10 PURPOSE OF EXPENDITURE	(a) Category Advertis	V (See Categories list Sing	ed at the top of this	schedule)	(b) Description Social Media		
	(c)	Check if travel outside	of Texas. Complete S	Schedule T.	Check if Au	istin, TX, officeholder living	expense
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		didate / Officeho	lder name		fice sought and County Sheriff Office	Office he	əld
Date 12/01/2023	Payee Visaprin						
Amount (\$) 2,140.00	Payee 275 Wyma Waltham M	address; n St IA 02451			City;	State;	Zip Code
TYPE OF EXPENDITURE	F	Political	L	] Non-Po	litical		
PURPOSE OF EXPENDITURE	Categor Advertis	y (See Categories list sing	ed at the top of this	schedule)	Description Push Cards	and Post Cards	3
		Check if travel outside	of Texas. Complete	Schedule T.	Check if Au	ustin, TX, officeholder living	a expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		didate / Officeho	lder name		fice sought nd Counnty Sheriff Office	Office he N/A	eld

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