CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this form.	2 Total pages filed: 11	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Abrahim	MI OFFICE USE ONLY Date Received	
	NICKNAME LAST Javed	SUFFIX JAN 15 202	25 RCU
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; 2 Stadium Dr, 5205	ZIP CODE Date Hand-delivered or Date Postmarked Receipt # Amount	
X Change of Address	Sugar Land , TX 77498	Date Processed Date Imaged	
		but mages	
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MR. DMAR	MI	
		SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUITE:		CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 888 - 2339		
8 REPORT TYPE	X January 15 30th day before election Runoff July 15 8th day before election Exceeded reporting line		
9 PERIOD COVERED	Month Day Year Month 07/01/2024 THROUGH	nth Day Year 12/31/2024	
10 ELECTION	ELECTION DATE Month Day Year Primary Run 03 05 2024 General Spe		
11 OFFICE	The state of the s	CE SOUGHT (if known) mmissioner . Precinct 3 FORT BE	END
	GO TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 11

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 officeh	holder's k	nowledge or
candidate / officeholder. consent. Candidates and COMMITTEE TYPE	These expenditures may have been made without difficeholders are required to report this information	the candidate's or officeh	holder's k	nowledge or
	COMMITTEE NAME			in expenditures.
GENERAL				
	COMMITTEE ADDRESS		-	
SPECIFIC				
	COMMITTEE CAMPAIGN TREASURER NAME			
	COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
			\$	0.00
		S)	\$	0.00
3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00	
4. TOTAL POLITIC	AL EXPENDITURES		\$	1,092.94
		AST DAY OF THE	\$	2,929.80
		OF THE LAST DAY	\$	211,900.00
SAHAR JIWANI ptary ID #132954089 y Commission Expires March 3, 2025	true and correct and includes a under Title 15, Election Code. Ougling Signature of	all information required to	be repor	
ribed before me, by the sa	aid Abrahim Javed	, this the	m	day
er administering	Clare To aci	Jotany Cant	10F'(Tefferson
2 3 2 5 6 First	OR GUARANTEE 2. TOTAL POLITIC (OTHER THAN P) 3. TOTAL UNITEME 4. TOTAL POLITIC REPORTING PE 6. TOTAL PRINCIP OF THE REPOR SAHAR JIWANI tary ID #132954089 Commission Expires March 3, 2025 ARY STAMP / SEAL ABO ibed before me, by the sa , 20 25 , to ce	COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELE 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE L REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD 1 swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code. SAHAR JIWANI tary ID #132954089 Commission Expires March 3, 2025 ARY STAMP / SEAL ABOVE Sibed before me, by the said Abrain Taved	COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR GUARANTEES OF LOANS) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD 1 Swear, or affirm, under penalty of perjury, that the accuture and correct and includes all information required to under Title 15, Election Code. SAHAR JIWANI Lary ID #132954089 Commission Express March 3, 2025 ARY STAMP / SEAL ABOVE Signature of Candidate or Officehold and Seal of Office. SALAR TIWANI TOWARD AND	COMMITTEE CAMPAIGN TREASURER ADDRESS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$ 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 3. TOTAL POLITICAL CONTRIBUTIONS 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD 1 swear, or affirm, under penalty of perjury, that the accompanyir true and correct and includes all information required to be report under Title 15, Election Code. SAHAR JIWANI Lary 1D #132954089 Commission Expires March 3, 2025 March 3, 2025 ABY STAMP / SEAL ABOVE The debetore me, by the said Abrahim Taved, this the Type of Candidate or Officeholder and the control of the control

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 11

18 FILER NA Javed, A	The state of the s		
	E SUBTOTALS SCHEDULE	SUBTO	DTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4. X	SCHEDULE E: LOANS	\$	0.00
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	1,092.94
6. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	0.00
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

AARE Abrahim 3 Filer ID info@javedforcommissioner.com L OF UNITEMIZED PLEDGES \$ Amount of pledgor Out-of-state PAC (ID#: Pledgor Address; City, State; Zip Code T Pledgor Address; City, State; Zip Code Check if travel outside of Texas. Complete S all occupation / Job title (See Instructions) 11 Employer (See Instructions)	The Instruction Guide explains how to complete this form.			1 Total pages Schedule B:		
Abrahim info@javedforcommissioner.com L OF UNITEMIZED PLEDGES \$ 6 Full name of pledgor	II ED NA	AME			Sch: 1/1 Rpt: 4/11	
\$ \$ \$ Amount of pledgor out-of-state PAC (ID#:) \$ Amount of pledge (\$) In-kind description (If applicable) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete S						ioner.com
6 Full name of pledgor out-of-state PAC (ID#:) 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete S			CEC .			0.
7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete S			3E3			
7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete S	ate	6 Full name of pledgor	out-of-state PAC (ID#:_		B Amount of 9 In-legel (\$) (kind description (If applicable)
Check if travel outside of Texas. Complete S		7 Pledgor Address:	City: State: Zip Code			
		, in the same of t	5.5), 5.00.5, <u>2.</u> p 5.22			
al occupation / Job title (See Instructions) 11 Employer (See Instructions)						xas. Complete Schedu
	rincipal	occupation / Job title (See Instru	uctions)	11 Employer (See In:	structions)	

LOANS				SCHEDULE E
	on Guide explains how to complete thi	s form.	Sch: 1	ages Schedule E: /1 Rpt: 5/11
2 FILER NAME Javed, Abrahim			3 Filer ID	
⁴ TOTAL OF UN	NITEMIZED LOANS			\$ 0.00
5 Date of loan	7 Name of lender out-of-state	PAC (ID#:		9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State	; Zip Code		10 Interest Rate
				11 Maturity Date
12 Principal occupati	on / Job title (See Instructions)	13 Employer (See Instruc	tions)	
14 Description of Co	lateral	15 Check if personal fund	s were deposite	d into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
not applicable	18 Guarantor address; City; State			
20 Principal occupati	on	21 Employer (See Instruc	tions)	
(1)				

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)

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: 1/6 Rpt: 6/11 Javed, Abrahim Date Payee name 07/16/2024 Cricket Payee address; Amount (\$) City; State; Zip Code \$148.00 11611 W Airport Blvd Ste G Meadows Place, TX 77477 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. 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 Date Payee name 08/16/2024 Cricket Payee address; City; Amount (\$) State; Zip Code \$148.00 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 Date Payee name 09/16/2024 Cricket Amount (\$) Payee address; City: State: Zip Code \$148.00 11611 W Airport Blvd Meadows Place, TX 77477 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF 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 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 Polifing 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 co	mplete this form.
Total pages Schedule F1: Sch: 2/6 Rpt: 7/11	2 FILER NAME Javed, Abrahim	3 Filer ID
Date 10/17/2024	5 Payee name Cricket	
Amount (\$) \$148.00	7 Payee address; City; State; Zip Co 11611 W Airport Blvd Ste G Meadows Place, TX 77477	de
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/OI	Candidate/Officeholder name Office sou H	ght Office held
Date 11/18/2024	Payee name Cricket	
Amount (\$) \$148.00	Payee address; City; State; Zip Co 11611 W Airport Blvd Ste G Meadows Place, TX 77477	de
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 sou	ght Office held
Date 07/02/2024	Payee name GOOGLE	
Amount (\$) \$13.65	Payee address; City; State; Zip Co 1600 Amphitheatre Parkway Mountain View, TX 94043	de
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gsuite Payment for email

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 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: 3/6 Rpt: 8/11 Javed, Abrahim 4 Date 5 Payee name 07/02/2024 GOOGLE Amount (\$) Payee address; City; State; Zip Code \$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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/02/2024 GOOGLE City; Amount (\$) Payee address; State; Zip Code \$13.72 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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/02/2024 **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 Candidate/Officeholder name Complete ONLY if direct 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 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 comple	ete this form.
1	Total pages Schedule F1: Sch: 4/6 Rpt: 9/11	2 FILER NAME Javed, Abrahim	3 Filer ID
4	Date 09/03/2024	5 Payee name GOOGLE	
6	Amount (\$) \$13.72	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, TX 94043	
8	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 Gsuite Payment for email
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 09/03/2024	Payee name GOOGLE	
	Amount (\$) \$41.13	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, TX 94043	
	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 Gsuite Payment for email
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date 10/02/2024	Payee name GOOGLE	
	Amount (\$) \$13.72	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway	
		Mountain View, TX 94043	
	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 Gsuite Payment for email
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/6 Rpt: 10/11 Javed, Abrahim Date Payee name 10/02/2024 GOOGLE 6 Amount (\$) Payee address; City; State; Zip Code \$41.13 1600 Amphitheatre Parkway Mountain View, TX 94043 **PURPOSE** 8 (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 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/04/2024 GOOGLE Amount (\$) Payee address; City; 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 Check if travel outside of Texas, Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Gsuite Payment for email Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Pavee name 11/04/2024 GOOGLE Amount (\$) Payee address; City: State; Zip Code \$13.77 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 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 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)

_		i ne instruction Guide explains now to con	nplete this form.
1	Total pages Schedule F1:		3 Filer ID
	Sch: 6/6 Rpt: 11/11	Javed, Abrahim	
4	Date	5 Payee name	
	12/02/2024	GOOGLE	
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de
	\$44.94	1600 Amphitheatre Parkway	
		Mountain View, TX 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Gsuite Payment for email
_			A Marin Control of the Control of th
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office soug	ght Office held
	Date	Payee name	
	12/02/2024	GOOGLE	
	Amount (\$)	Payee address; City; State; Zip Cod	le .
	\$13.77	1600 Amphitheatre Parkway	
		Mountain View, TX 94043	
	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.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			Gsuite Payment for email
	Considera CNII V if disease		200-1-11
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	ht Office held
	Date	Payee name	
	10/23/2024	SQUARESPACE INC	
	Amount (\$)	Payee address; City; State; Zip Cod	le
	\$20.00	8 Clarkkson St.	
		New York, TX 10014	
	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.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Web Hosting
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	ht Office held
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