CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.	1 Filer ID	2 Total pages filed: 12

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR	FIRST SHAH	MI
NICKNAME	LAST HALEEM	SUFFIX

OFFICE USE ONLY

Date Received

FEB 23 2026 RCVD

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE
7514 San Clemente Point Ct

Katy , TX 77494

Date Hand-delivered or Date Postmarked

Receipt #	Amount

Date Processed

Date Imaged

5 CAMPAIGN TREASURER NAME

MS / MRS / MR	FIRST	MI
NICKNAME	LAST	SUFFIX

6 CAMPAIGN TREASURER ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

7 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

8 REPORT TYPE

☐ January 15
☐ July 15
☐ 30th day before election
☒ 8th day before election
☐ Runoff
☐ Exceeded modified reporting limit
☐ 15th day after campaign treasurer appointment (officeholder only)
☐ Final Report (Attach C/OH-FR)

9 PERIOD COVERED

Month Day Year
01/23/2026 THROUGH

Month Day Year
02/21/2026

10 ELECTION

ELECTION DATE
Month Day Year
03/03/2026

ELECTION TYPE
☒ Primary
☐ General
☐ Runoff
☐ Special
☐ Other

11 OFFICE

OFFICE HELD (if any)
None Place NONE District None Fort Bend

12 OFFICE SOUGHT (if known)
COUNTY CLERK Place n/a District n/a

GO TO PAGE 2

13 C / OH NAME	HALEEM, SHAH	14 Filer ID

15 NOTICE FROM POLITICAL COMMITTEE(S)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

☐ Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	
	COMMITTEE ADDRESS
☐ SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$	0.00
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	5,600.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	$	0.00
	4.	**TOTAL POLITICAL EXPENDITURES**	$	15,499.74
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$	851.44
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$	0.00

17 AFFIDAVIT

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

_____
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day

of_____, 20_____, to certify which, witness my hand and seal of office.

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

18 FILER NAME

HALEEM, SHAH

19 Filer ID

20 SCHEDULE SUBTOTALS

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. [X] SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$	5,600.00
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	$	14,029.74
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	$	1,470.00
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	$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

1 Total pages Schedule A1:

Sch: 1/1 Rpt: 4/12

2 FILER NAME

HALEEM, SHAH

3 Filer ID

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
01/23/2026	DEVARAKOND, MARUTHI (Mr.)	$25.00
	6 Contributor address; City; State; Zip Code 3315 RESTON LANDING LN KATY, TX 77494	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
ENGINEER	BAKER HUGHES

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/27/2026	DEVARAKOND, MARUTHI (Mr.)	$25.00
	Contributor address; City; State; Zip Code 3315 RESTON LANDING LN KATY, TX 77494	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
ENGINEER	BAKER HUGHES

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/25/2026	MEAH, NIZAM (Dr.)	$50.00
	Contributor address; City; State; Zip Code 3523 CORAL SPRINGS DR MANVEL, TX 77578	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PHYSICIAN	DIGESTIVE & LIVE CENTER

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/23/2026	WASIM, ZAJAR (Mr.)	$500.00
	Contributor address; City; State; Zip Code 12006 NATURAL BRIDGES LN SUGAR LAND, TX 77498	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
BANKER	ZION

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
01/28/2026	WELCH, JOSH (Mr.)	$5,000.00
	Contributor address; City; State; Zip Code 18710 N. FRIO RIVER CIRCLE CYPRESS , TX 77433	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PROPERTY MANAGER	GREEN LINE MGMNT

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule B: Sch: 1/1 Rpt: 5/12
2 FILER NAME HALEEM, SHAH	**3** Filer ID shaleem@yahoo.com
4 TOTAL OF UNITEMIZED PLEDGES	**$** 0.00

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____)	**8** Amount of pledge ($)	**9** In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)	**11** Employer (See Instructions)

LOANS

SCHEDULE E

2 FILER NAME
HALEEM, SHAH

3 Filer ID

4 TOTAL OF UNITEMIZED 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 occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral
☐ None

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

16 GUARANTOR INFORMATION
☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 7/12	2 FILER NAME HALEEM, SHAH	3 Filer ID

4 Date 02/03/2026	5 Payee name ADVANTAGE SIGNS

6 Amount ($) $707.82	7 Payee address; City; State; Zip Code 1810 AFTON ST HOUSTON, TX 77055

8 **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 LARGE SIGNS

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

Date 02/03/2026	Payee name ALING'S CHINESE BISTRO

Amount ($) $500.00	Payee address; City; State; Zip Code 6542 HIGHWAY 90 SUGAR LAND, TX 77498

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense MEET & GREET

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

Date 01/30/2026	Payee name AMEGY BANK

Amount ($) $2.00	Payee address; City; State; Zip Code 3026 SOUTH MASON RD KATY, TX 77494

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense BANK FEES

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 8/12	2 FILER NAME HALEEM, SHAH	3 Filer ID

4 Date 01/23/2026	5 Payee name MOMENTUM PRINTING

6 Amount ($) $1,177.06	7 Payee address; City; State; Zip Code 15018 MINTZ LANE HOUSTON, TX 77014

8 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
BROCHURES

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

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Date 02/06/2026	Payee name MOMENTUM PRINTING

Amount ($) $645.17	Payee address; City; State; Zip Code 15018 MINTZ LANE HOUSTON, TX 77014

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
BROCHURES

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

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Date 02/03/2026	Payee name PEERLY

Amount ($) $1,232.12	Payee address; City; State; Zip Code N. PINE ISLAND RD SUITE 300 PLANTATION, FL 33324

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
TEXTING

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 9/12	2 FILER NAME HALEEM, SHAH	3 Filer ID

4 Date 01/26/2026	5 Payee name TGM PRINTING

6 Amount ($) $324.75	7 Payee address; City; State; Zip Code 13910 MURPHY RD STAFFORD, TX 77477

8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule) Printing Expense	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense SIGNS

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

Date 01/26/2026	Payee name TGM PRINTING

Amount ($) $1,299.00	Payee address; City; State; Zip Code 13910 MURPHY RD STAFFORD, TX 77477

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 LARGE SIGNS

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

Date 01/28/2026	Payee name TGM PRINTING

Amount ($) $7,000.00	Payee address; City; State; Zip Code 13910 MURPHY RD STAFFORD, TX 77477

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 MAIL OUT

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 4/4 Rpt: 10/12	HALEEM, SHAH	

4 Date	5 Payee name
02/06/2026	TGM PRINTING

6 Amount ($)	7 Payee address; City; State; Zip Code
$1,141.82	13910 MURPHY RD STAFFORD, TX 77477

8 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 SIGNS

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

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME	3 Filer ID
Sch: 1/2 Rpt: 11/12	HALEEM, SHAH	

4 Date	5 Payee name
01/30/2026	ADVANTAGE SIGNS

6 Amount ($)	7 Payee address; City; State; Zip Code
$800.00	1810 AFTON ST
☐ Reimbursement from political contributions intended	HOUSTON, TX 77055

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense SMALL AND LARGE SIGNS

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

Date	Payee name
02/06/2026	CAREY'S FROZEN DELIGHTS

Amount ($)	Payee address; City; State; Zip Code
$180.00	2603 CARTWRIGHT RD
☐ Reimbursement from political contributions intended	MISSOURI CITY, TX 77459

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense FOOD FOR MEET AND GREEN EVENT

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

Date	Payee name
02/06/2026	DOUBLE DAVE'S PIZZA

Amount ($)	Payee address; City; State; Zip Code
$140.00	4875 HWY 6
☐ Reimbursement from political contributions intended	MISSOURI CITY, TX 77459

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense MEET & GREET - FOOD

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

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/2 Rpt: 12/12	2 FILER NAME HALEEM, SHAH	3 Filer ID

4 Date 02/06/2026	5 Payee name MO CITY RADIO

6 Amount ($) $350.00 ☐ Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2440 TEXAS PARKWAY SUITE 220 MISSOURI CITY, TX 77489

8 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 DJ AND RADIO ADVERTISING

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