CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

I	FORM	C/OH
COVER	SHEE	T PG 1

Th	e C/OH Instruction (Guide explains how to com	ommission Filers) 882	2 Total pages filed: 67														
3	CANDIDATE /	MS / MRS / MR	FIRST			MI		JSE ONLY										
	OFFICEHOLDER	The Honorable	Suleman															
	NAME		Culoman				Date Received											
							ELECTRONICA	ALLY FILED										
		NICKNAME	LAST			SUFFIX	07/17/2023											
			Lalani			001100												
			Lalain															
4	CANDIDATE /	ADDRESS / PO BOX; AF	T / SUITE #; CIT	ΓY;		ZIP CODE	Date Hand-delivered of	r Date Postmarked										
	OFFICEHOLDER MAILING	PO Box 6514																
	ADDRESS						Receipt #	Amount										
	Change of Address																	
	Change of Address	Houston, TX 77265					Date Processed											
							Date Imaged											
5	CAMPAIGN	MS / MRS / MR	FIRST			MI												
	TREASURER	Mr.	Gordon Jinpoi	ina														
	NAME		Condon ompo	ing														
		NICKNAME	LAST			SUFFIX												
			Quan															
6	CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);		APT / SUITE #	; CITY;	STA	ATE; ZIP CODE										
	TREASURER	5444 Westheimer Rd. S																
	ADDRESS																	
	(Residence or Business)																	
		Houston, TX 77056																
Ļ-	CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSIO														
Ľ	TREASURER		INE NUMBER	EXTENSIO	N													
	PHONE	(713) 625-9200																
8	REPORT		_	-			-											
	TYPE	January 15	30th day before	e election	Runoff		15th day after car appointment (offic											
		X July 15	8th day before		Exceeded r	modified	Final Report (Atta											
			our day before		reporting lir		Г паптероп (Аца											
9	PERIOD COVERED	Month Day Year			Mor		Year											
	COVERED	01/01/2023	11	HROUGH		06/30/2023	3											
10	ELECTION	ELECTION DATE			ELECT	ION TYPE												
		Month Day Year	XF	Primary	Runo	off	Other											
		03/05/2024		General	Spec	rial												
				Scheral		Sidi												
L																		
11	OFFICE	OFFICE HELD (if any)				CE SOUGHT												
		State Representative Dis	strict 76		State	e Representa	tive District 76											
1																		
⊢					I													
1																		
1			GO -	TO PAGE	2													
Fo	rms provided by Te	xas Ethics Commission	www.e	thics.state.	tx.us		Versio	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.a18ea2ca										

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 67

13 C / OH NAME	Lalani, Suleman (The	Honorable)	14 Filer ID (E 00083882	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditu These expenditures may have been made without to officeholders are required to report this information	he candidate's or officel	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS 'LEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMI		\$ 63.80	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 22,188.86
CONTRIBUTION BALANCE	5. TOTAL POLITICA REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	AST DAY OF THE	\$ 29,297.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 135,000.00
17 AFFIDAVIT	•			•
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		The Hono	rable Suleman Lalan	i
		Signature of	Candidate or Officehold	ler
AFFIX NOT	TARY STAMP / SEAL ABO	DVE		
Sworn to and subsc	ribed before me, by the sa	aid	, this the	day
		rtify which, witness my hand and seal of office.		
Signature of offic	er administering	Printed name of officer administering	Title of officer	administering oath
Forms provided by Tex	kas Ethics Commission	www.ethics.state.tx.us	v	/ersion V3.5.1.a18ea2ca

SUBTOTALS - C/OH	FORM C/OH OVER SHEET PG 3 3 of 67	
18 FILER NAME Lalani, Suleman (The Honorable)	19 Filer ID 00083882	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. SCHEDULE E: LOANS	\$	
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 22,188.86
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
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	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

			EXPENDITURE CATEGO	RIES FOF	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 1/61 Rpt: 4/67		Lalani, Suleman (The Honorable)				00083882
4	Date	5	Payee name			<u> </u>	
	03/09/2023		Access Valet Parking				
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de		
	\$15.00		P.O. Box 41983				
			Austin, TX 78704				
8	PURPOSE	(a)			(b) Description		
ľ	OF	(4)	Category (See Categories listed at the top of this sch Travel Out of District	iedule)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin	, TX	, officeholder living expense
					Valet Event F	Parl	king
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	02/14/2023		Aga's Restaurant				
	Amount (\$)		Payee address; City; State;	; Zip Co	de		
	\$94.79		11842 Wilcrest Dr				
			Houston, TX 77031				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	(elube)	(b) Description		
	OF EXPENDITURE		Food/Beverage Expense	icuaic)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITORE						, officeholder living expense
					Supporters M	1ea	1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
		_					
	Date		Payee name				
	06/14/2023		Agha Juice & Cafe				
	Amount (\$)		Payee address; City; State;	; Zip Co	de		
	\$29.07		11920 S Texas 6				
			# 800				
			Sugar Land, TX 77498				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	iedule)	(b) Description		
	OF EXPENDITURE		Food/Beverage Expense	ŗ			ide of Texas. Complete Schedule T.
							, officeholder living expense
					Meeting Refr	esr	iments
	0				1.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	p						

			EXPENDITURE CATEGO	RIES FO	R BC	DX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead kpense xpens Wages	e /Contract Labor	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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 2/61 Rpt: 5/67		Lalani, Suleman (The Honorable)					00083882	
4	Date 01/20/2023	5	Payee name Aiden By Best Western Austin						
6	Amount (\$) \$80.00		Payee address; City; State 2200 S I-35 Frontage Rd Austin, TX 78704	e; Zip Co	ode				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	hedule)	(b)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense slative Purposes	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	01/30/2023		Aiden By Best Western Austin						
	Amount (\$) \$240.00		Payee address; City; State 2200 S I-35 Frontage Rd Austin, TX 78704	e; Zip Co	ode				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	hedule)	(b)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense Slative Purposes	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held	
	Date		Payee name						
	02/10/2023		Aiden By Best Western Austin						
	Amount (\$) \$160.00		Payee address; City; State 2200 S I-35 Frontage Rd	e; Zip Co	ode				
			Austin, TX 78704						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Office Overhead/Rental Expense	hedule)	(b)	X Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense slative Purposes	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıght			Office held	

			EXPENDITURE CATEGO	ORIES FOR	R BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Sch: 3/61 Rpt: 6/67		alani, Suleman (The Honorable)				00083882		
4	Date 02/17/2023		Payee name Aiden By Best Western Austin						
6	Amount (\$) \$80.00	:	Payee address; City; Stat 2200 S I-35 Frontage Rd Austin, TX 78704	e; Zip Cc	ode				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense slative Purposes		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held		
	Date		Payee name						
	02/27/2023		Aiden By Best Western Austin						
	Amount (\$) \$160.00		Payee address; City; Stat 2200 S I-35 Frontage Rd Austin, TX 78704	e; Zip Cc	ode				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this see Office Overhead/Rental Expense	chedule)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense slative Purposes		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held		
	Date		Payee name						
	03/03/2023		Aiden By Best Western Austin						
	Amount (\$) \$80.00		Payee address; City; Stat 2200 S I-35 Frontage Rd	e; Zip Cc	ode				
			Austin, TX 78704		1				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Office Overhead/Rental Expense	chedule)	X Check if Austin	, TX,	de of Texas. Complete Schedule T. officeholder living expense slative Purposes		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held		

			EXPENDITURE CA	ATEGOR	IES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Offi Food/Beverage Expense Poll - Gift/Awards/Memorials Expense Prin				ment/Reinbursement nead/Rental Expense ense iges/Contract Labor oplete this form.		Travel in District Travel Out of Dist	uipment & Related Expense
1	Total pages Schedule F1:	2 FII	ER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 4/61 Rpt: 7/67		lani, Suleman (The Honorable	e)				00083882	
4	Date 03/13/2023		yee name den By Best Western Austin						
6	Amount (\$) \$240.00	22	yee address; City; 00 S I-35 Frontage Rd Istin, TX 78704	State;	Zip Coo	e			
8	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top fice Overhead/Rental Expens		dule)	b) Description	n, TX,		expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	Ot	ffice soug	ht		Office he	ld
	Date	Pa	yee name						
	03/20/2023	Ai	den By Best Western Austin						
	Amount (\$) \$240.00	22	yee address; City; 00 S I-35 Frontage Rd Istin, TX 78704	State;	Zip Coo	e			
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top fice Overhead/Rental Expens		dule)	b) Description	n, TX,		expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		didate/Officeholder name	Of	ffice soug	ht		Office he	ld
	Date	Pa	yee name						
	03/27/2023	Ai	den By Best Western Austin						
	Amount (\$) \$240.00		yee address; City; 00 S I-35 Frontage Rd	State;	Zip Coo	e			
		Αι	stin, TX 78704						
	PURPOSE OF EXPENDITURE		tegory (See Categories listed at the top fice Overhead/Rental Expens		dule)	b) Description	n, TX,		expense
	Complete ONLY if direct expenditure to benefit C/OF		didate/Officeholder name	Of	ffice soug	ht		Office he	ld

			EXPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expen mittee Legal Services The Instruction Guide (Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		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:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 5/61 Rpt: 8/67		Lalani, Suleman (The Honorabl	e)				00083882		
4	Date 04/03/2023		Payee name Aiden By Best Western Austin							
6	Amount (\$) \$240.00		Payee address; City; 2200 S I-35 Frontage Rd Austin, TX 78704	State;	Zip Co	le				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		edule)		n, TX	ide of Texas. Compl , officeholder living e islative Purpo	expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office hel	d	
	Date		Payee name							
	04/10/2023		Aiden By Best Western Austin							
	Amount (\$) \$320.00		Payee address; City; 2200 S I-35 Frontage Rd Austin, TX 78704	State;	Zip Co	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		edule)		n, TX,	ide of Texas. Compl , officeholder living e islative Purpo	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office hel	d	
	Date		Payee name							
	04/17/2023	.	Aiden By Best Western Austin							
	Amount (\$) \$320.00		Payee address; City; 2200 S I-35 Frontage Rd	State;	Zip Co	le				
			Austin, TX 78704							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Office Overhead/Rental Expens		edule)	(b) Description Check if travel Check if Austir Lodging for L	n, TX		expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office hel	d	

			EXPENDITURE CATE	GORIES F	OR B	OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl	Office (Polling Printing Salarie	Overhea Expens J Expen s/Wage	se s/Contract Labor		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:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 6/61 Rpt: 9/67		alani, Suleman (The Honorable)					00083882		
4	Date 04/24/2023		Payee name Niden By Best Western Austin							
6	Amount (\$) \$320.00	2	Payee address; City; S 200 S I-35 Frontage Rd Austin, TX 78704	State; Zip (Code					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of the Diffice Overhead/Rental Expense	is schedule)	(b)	Description Check if travel Check if Austin Check if Austin Lodging for L	ı, TX,		expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office he	ld	
	Date	F	Payee name							
	05/01/2023	ļ	viden By Best Western Austin							
	Amount (\$) \$320.00	2	vayee address; City; S 200 S I-35 Frontage Rd Austin, TX 78704	State; Zip (Code					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of the Diffice Overhead/Rental Expense	is schedule)	(b)	Description Check if travel Check if Austin Check if Austin Lodging for L	ı, TX,		expense	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office he	ld	
	Date	F	ayee name							
	05/15/2023		viden By Best Western Austin							
	Amount (\$) \$938.00		Payee address; City; S 200 S I-35 Frontage Rd	State; Zip (Code					
		4	ustin, TX 78704							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of the office Overhead/Rental Expense	is schedule)	(b)	Description Check if travel Check if Austin Check if Austin Lodging for L	I, TX,		expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	Office s	ought			Office he	ld	

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense mittee Legal Services The Instruction Guide expl	O Pi Pi Sa	ffice Overh olling Expe rinting Exp alaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Rela Travel in District Travel Out of District OTHER (enter a category not liste			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Comr	nission Filers)		
	Sch: 7/61 Rpt: 10/67		Lalani, Suleman (The Honorable)					00083882	ŕ		
4	Date	5	Payee name								
	05/22/2023		Aiden By Best Western Austin								
6	Amount (\$)	7	Payee address; City; S	State; Z	Zip Cod	e					
	\$400.00		2200 S I-35 Frontage Rd								
			Austin, TX 78704								
8	PURPOSE OF		Category (See Categories listed at the top of th	nis schedul	le) (I	b) Description					
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
								islative Purposes			
							.09				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name	Offic	ce sougl	nt		Office held			
	Date		Payee name								
	05/24/2023		Aiden By Best Western Austin								
	Amount (\$)		Payee address; City; S	State; Z	Zip Cod	9					
	\$429.00		2200 S I-35 Frontage Rd								
			5								
			Austin, TX 78704								
	PURPOSE	(a)	Category (See Categories listed at the top of th	nis schedul	le) (I	b) Description					
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T			
	-							, officeholder living expense			
							.eg	Islative Purposes			
	Complete ONLY if direct		andidate/Officeholder name	Offi	ce sougl	nt		Office held			
	expenditure to benefit C/OI			Onic	cc sougi	it i		Office field			
	Date		Payee name								
	05/30/2023		Aiden By Best Western Austin								
	Amount (\$)		Payee address; City; S	State; Z	Zip Cod	9					
	\$189.00		2200 S I-35 Frontage Rd								
			-								
			Austin, TX 78704								
	PURPOSE OF		Category (See Categories listed at the top of th	nis schedul	le) (I	Description					
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T			
								, officeholder living expense islative Purposes			
							.cy	onanyo i uipuses			
-	Complete ONLY if direct		andidate/Officeholder name	∩ffi∕	ce sougl	nt		Office held			
	expenditure to benefit C/OI			Onit	ce sougi						
-											

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services 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)								
1	Total pages Schedule F1:	P FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 8/61 Rpt: 11/67	Lalani, Suleman (The Honorable)	00083882								
4	Date 04/25/2023	Payee name Aki Steak & Sushi									
6	Amount (\$) \$115.60	7 Payee address; City; State; Zip Code 510 Hwy 6 #180 Sugar Land, TX 77479									
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supporter Meals									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	06/13/2023	Alings Chinese Bistro									
	Amount (\$) \$231.23	Payee address; City; State; Zip Code 6542 US-90 ALT Sugar Land, TX 77498									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 1eal								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/23/2023	All Bengal Sweets									
	Amount (\$) \$22.95	Payee address; City; State; Zip Code 5901 Hillcroft St									
		Houston, TX 77036									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Constituents								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

			EXPENDITURE CATEG	ORIES FO	R BC	DX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Rep Office Ove Polling Ex Printing E Salaries/V	ayme erhea kpense xpens Xpens Wages	nt/Reimbursement d/Rental Expense e se s/Contract Labor		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:	2					3	Filer ID (Ethics Commission Filers)				
	Sch: 9/61 Rpt: 12/67		Lalani, Suleman (The Honorable)					00083882				
4	Date 01/09/2023	5	Payee name Alpha Desserts Juice Cafe									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
ľ	\$52.27 1531 Hwy 6											
	\$02.21		#140									
			Sugar Land, TX 77478									
			_		<u>[a</u>							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description	outoi	de of Texas. Complete Schedule T.				
	EXPENDITURE		Food/Beverage Expense					officeholder living expense				
						Supporter Me						
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name office sought Office held												
	Date		Payee name									
	01/11/2023		Angeethi Flame Fine Indian Restaura	ant								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode							
	\$198.88		2301 S Lakeline Blvd									
			#800									
			Cedar Park, TX 78613									
	PURPOSE	(a)	Category (See Categories listed at the top of this	aabadula)	(b)	Description						
	OF		Food/Beverage Expense	schedule)	()		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE							K, officeholder living expense				
						Supporter Di	nne	er				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held				
	Date		Payee name									
	03/24/2023		Angeethi Flame Fine Indian Restaura	ant								
	Amount (\$)		-	te; Zip Co	nde							
	\$25.94		2301 S Lakeline Blvd	iiie, 2ip ee	Juc							
	φ20.34		#800									
			Cedar Park, TX 78613		-							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description						
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T. , officeholder living expense				
						Travel Meal	, 17,					
	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	l Jaht			Office held				
	expenditure to benefit C/Oł			2	.g. n							
-												

			EXPENDITURE CATEGOR	IES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 10/61 Rpt: 13/67		Lalani, Suleman (The Honorable)				00083882	
4	Date	5	Payee name			I		
	06/07/2023		Ashars Kitchen					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le			
	\$30.27		11920 S Texas 6					
			Sugar Land, TX 77498					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.	
							, officeholder living expense	
					Supporters M	iea	1	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								
	Date		Payee name					
	06/13/2023		Ashars Kitchen					
	Amount (\$)			Zip Co	le			
	\$62.18		11920 S Texas 6	Zip Cot				
	Φ02.10		11920 3 Texas 0					
			Sugar Land, TX 77498					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schere Food/Beverage Expense	dule)	(b) Description	outsi	ide of Texas. Complete Schedule T.	
					Check if Austin Supporters M		, officeholder living expense I	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice souç	ht		Office held	
	Date		Payee name					
	01/17/2023		Bamboo Biryani's Bowl and Grill					
	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$250.00		130 Sundance Pkwy					
			Suite 100					
			Round Rock, TX 78681					
	PURPOSE				(b) Decorintion			
	OF		Category (See Categories listed at the top of this schere Food/Beverage Expense	dule)	(b) Description	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Food/Develage Expense				, officeholder living expense	
					Catering for S	Swe	earing In Guests	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Pri	ffice Overh olling Expe rinting Exp alaries/Wa	ense ges/Contract Labor		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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 11/61 Rpt: 14/67		Lalani, Suleman (The Honorable)				00083882				
4	Date	5	ayee name								
	03/22/2023		Boar's Head								
6	Amount (\$)	7	Payee address; City; State; Zi	zip Cod	9						
	\$13.75 Ronald Reagan Washington National Airport Access Rd,										
	Arlington, VA 22202										
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule	le) (I	b) Description						
	OF EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T.				
					Travel Meal	I, I A,	, officeholder living expense				
					navermea						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ce sougl	nt		Office held				
	Date		Payee name								
	05/22/2023		Bohanan's Prime Steaks and Seafood								
	Amount (\$)		Payee address; City; State; Zi	Zip Cod	9						
	\$307.28		219 E Houston St #275								
	\$001.20										
			San Antonio, TX 78205								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule	le) (I	Description	outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Food/Beverage Expense				, officeholder living expense				
					Supporters N	/lea	1				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ce sougl	nt		Office held				
	Date		Payee name								
	06/16/2023		Brandanis Restaurant								
	Amount (\$)		Payee address; City; State; Zi	zip Cod	9						
	\$68.46		3340 FM 1092 Rd								
	+00110		#160								
			Missouri City, TX 77459								
	PURPOSE OF		Category (See Categories listed at the top of this schedule	le) (I	b) Description		ide of Towar, Complete Ochestiche T				
	EXPENDITURE		Food/Beverage Expense				ide of Texas. Complete Schedule T. , officeholder living expense				
					Supporters N						
-	Complete ONLY if direct	<u></u>	Candidate/Officeholder name Offic	ce sougl	nt		Office held				
	expenditure to benefit C/OI			se sougi							

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Glft/Awards/Memorials Expense Printing Expense Legal Services 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)									
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)									
	Sch: 12/61 Rpt: 15/67	Lalani, Suleman (The Honorable)	00083882									
4	Date	Payee name										
	01/25/2023	Buc-ee's - Bastrop										
6	Amount (\$) \$54.23											
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Gas for Session Commute												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	06/27/2023	Buc-ee's - Bastrop										
	Amount (\$)Payee address;City;State;Zip Code\$47.091700 State Hwy 71 East											
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DN Commute									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	05/23/2023	Buc-ee's - Katy										
	Amount (\$) \$53.23	Payee address; City; State; Zip Code 27700 Katy Fwy										
		Katy, TX 77494										
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense On Commute									
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									

		EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services End Services Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:		3 Filer ID (Ethics Commission Filers)									
	Sch: 13/61 Rpt: 16/67	Lalani, Suleman (The Honorable)	00083882									
4	Date 05/23/2023	Payee name Buc-ee's - Katy										
6	Amount (\$) \$26.72	7 Payee address; City; State; Zip Code \$26.72 27700 Katy Fwy Katy, TX 77494										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	01/09/2023	Bundu Khan Kabab House Sugar Land										
	Amount (\$) \$55.08	Payee address; City; State; Zip Code 11929 University Blvd Suite #1M Sugar Land, TX 77479										
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supporter Meals 										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	02/13/2023	Bundu Khan Kabab House Sugar Land										
	Amount (\$) \$93.56	Payee address; City; State; Zip Code 11929 University Blvd Suite #1M Sugar Land, TX 77479										
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Aeal									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held									

			EXPENDITURE CATEGOR	RIES FOF	BO	X 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment rhead/ bense pense ages/0	t/Reimbursement /Rental Expense Contract Labor		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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 14/61 Rpt: 17/67		Lalani, Suleman (The Honorable)					00083882				
4	Date	5	Payee name									
	03/20/2023		Bundu Khan Kabab House Sugar Land									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
		\$64.05 11929 University Blvd Suite										
			#1M									
			Sugar Land, TX 77479									
8	PURPOSE	(2)	_		(b)	Description						
0	OF	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	(0) 	Description Check if travel of	outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE		r oou/Deverage Expense		İ	Check if Austin,	, тх,	, officeholder living expense				
						Supporters M	lea	ls				
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name									
	05/16/2023		Bundu Khan Kabab House Sugar Land	I								
	Amount (\$)		Payee address; City; State;	Zip Co	de							
	\$138.69		11929 University Blvd Suite									
			#1M									
			Sugar Land, TX 77479									
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(alube	(b)	Description						
	OF EXPENDITURE		Food/Beverage Expense	ouulo)	[outsi	ide of Texas. Complete Schedule T.				
	EXPENDITORE				Ι			, officeholder living expense				
						Supporters M	lea	1				
	-											
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	gnt			Office held				
-	Date		Pavee name									
	06/16/2023		Bundu Khan Kabab House Sugar Land	1								
	Amount (\$)			Zip Co								
	\$110.16		11929 University Blvd Suite	Ζιρ Ου	ue							
	φ110.10		#1M									
			Sugar Land, TX 77479									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) ו	Description	outei	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Food/Beverage Expense		ļ			, officeholder living expense				
					1	 Supporters M						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held				
┣	-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tra Food/Beverage Expense Polling Expense Tra By - Gift/Awards/Memorials Expense Printing Expense Tra						Travel in District Travel Out of Dis	quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 15/61 Rpt: 18/67		Lalani, Suleman (The Hono	rable)				00083882				
4	Date	5	Payee name									
	03/22/2023		CMT Houston									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
-	. ,	\$98.66 16702 Lee Rd										
			Humble , TX 77396									
8	PURPOSE	(a)				(b) Description						
Ŭ	OF	[^(u)	Category (See Categories listed at the Travel In District	ie top of this sch	iedule)		outsi	ide of Texas. Com	plete Schedule T.			
	EXPENDITURE					Check if Austin	, тх	, officeholder living	expense			
						Car Service						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Office sou	ght		Office he	eld			
	Date		Payee name									
	06/05/2023		CVS									
	Amount (\$)		Payee address; City;	State;	; Zip Co	de						
	\$200.00		1250 Hwy 6									
			Sugar Land, TX 77478									
	PURPOSE OF	(a)	Category (See Categories listed at th		edule)	(b) Description						
	EXPENDITURE		Contributions/Donations Ma Candidate/Officeholder/Poli		ittee			ide of Texas. Comp , officeholder living				
			Canuluale/Onicenoluer/Poli		iiilee	Gift Cards for		-	expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	ן Dffice sou	ght		Office he	ld			
	Date		Payee name									
	05/15/2023		Cheesecake Factory									
	Amount (\$)		Payee address; City;	State;	; Zip Co	de						
	\$176.25		16535 Southwest Fwy									
			#2000									
			Sugar Land, TX 77479									
	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	iedule)	(b) Description						
	OF EXPENDITURE		Food/Beverage Expense		ŕ			ide of Texas. Com				
								, officeholder living	expense			
						Supporters N	iea	1				
	Operation ON States	L			245			011	14			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	jnt		Office he	210			

			EXPENDITURE CATEGO	RIES FOF	BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contract Labor		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:	2	FILER NAME	Filer ID (Ethics Commission Filers)								
	Sch: 16/61 Rpt: 19/67		Lalani, Suleman (The Honorable)				00083882					
4	Date	5	Payee name									
	01/17/2023		Chevron - Austin									
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de							
	\$88.15 601 N Interstate Hwy 35											
		Austin, TX 78702										
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description							
	EXPENDITURE		Travel Out of District				de of Texas. Complete Schedule T.					
					Gas for Sess		officeholder living expense					
						1011	Commute					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	Jht		Office held					
	Date		Payee name									
	04/11/2023		Chevron - Austin									
	Amount (\$)		Payee address; City; State	; Zip Co	de							
	\$65.35		601 N Interstate Hwy 35									
			,									
			Austin, TX 78702									
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description							
	OF EXPENDITURE		Travel Out of District				de of Texas. Complete Schedule T.					
					Gas for Sess		officeholder living expense					
					Gas 101 3633	1011	Commute					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	0					Office held					
	Date											
	02/09/2023		Payee name Chevron - Del Valle									
	Amount (\$)	-		; Zip Co	10							
	\$53.99		5200 Ross Rd	, zip co	le							
	400.99		5200 R055 Ru									
			Del Valle, TX 78617	i								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description							
	EXPENDITURE		Travel Out of District				de of Texas. Complete Schedule T. officeholder living expense					
					Gas for Sess							
-	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder name	Office sou	aht		Office held					
	expenditure to benefit C/Oł				,							
-												

			EXPENDITURE CATEGO	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitf/Awards/Memorials Expense nittee Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		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:	2 F				3	Filer ID (Ethics Commission Filers)				
	Sch: 17/61 Rpt: 20/67		alani, Suleman (The Honorable)				00083882				
4	Date 06/13/2023		Payee name Chevron - Sugar Land								
6	Amount (\$) \$77.37	7 Payee address; City; State; Zip Code 5823 New Territory Blvd Sugar Land, TX 77479									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Gas for District Travel											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held				
	Date	F	Payee name								
	06/15/2023	0	Chevron - Sugar Land								
	Amount (\$) \$68.25	Ę	5823 New Territory Blvd	; Zip Co	le						
	PURPOSE OF EXPENDITURE	(a) (Sugar Land, TX 77479 Category (See Categories listed at the top of this sch Fravel In District	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense Fravel				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ht		Office held				
	Date	F	Payee name								
	01/24/2023		Chevron Ellinger								
	Amount (\$) \$22.97		Payee address; City; State; L09 State Hwy 71	; Zip Co	le						
		E	Ellinger, TX 78938								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		, TX,	de of Texas. Complete Schedule T. . officeholder living expense On Commute				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name C	Dffice sou	ht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)									
	Sch: 18/61 Rpt: 21/67	Lalani, Suleman (The Honorable)	00083882									
4	Date	5 Payee name										
	04/10/2023	Chevron Ellinger										
6	Amount (\$) \$20.07	\$20.07 109 State Hwy 71 Ellinger, TX 78938										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description 												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	06/29/2023	Chevron Ellinger										
Amount (\$) Payee address; City; State; Zip Code \$13.63 109 State Hwy 71 Ellinger, TX 78938												
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense hments									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									
	Date	Payee name										
	04/24/2023	Child Advocates of Fort Bend										
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 5403 Avenue N										
		Rosenberg, TX 77471										
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I f									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		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:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 19/61 Rpt: 22/67		Lalani, Suleman (The Honora	ble)				00083882			
4	Date	5	Payee name								
	01/03/2023		Churrascos Sugar Land								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de					
	\$612.80		1520 Lake Pointe Pkwy								
			#500								
			Sugar Land, TX 77478								
_			-								
8	PURPOSE OF	(a)	Category (See Categories listed at the	op of this sch	edule)	(b) Description					
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Com			
						Staff Dinner	, 1	, officeholder living	expense		
						Stall Diffier					
_								011			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
	Date		Payee name								
	04/17/2023		Circle K								
	Amount (\$)	Payee address; City;	Zip Co	de							
\$58.01 13445 W Airport Blvd											
	+00.01										
			Sugar Land, TX 77478								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Travel Out of District			Check if travel	outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITORE							, officeholder living	expense		
						Gas for Sess	ion	Commute			
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	jht	Office held				
	expenditure to benefit C/OI	-									
	Date		Payee name								
	06/30/2023		Citgo - Austin								
	Amount (\$)		Payee address; City;	State:	; Zip Co	10					
	\$58.05		717 E 7th St	State,	, zip co						
	ψ50.05										
			Austin, TX 78701								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	edule)	(b) Description					
	OF EXPENDITURE		Travel Out of District					ide of Texas. Com			
	EXIENDITORE							, officeholder living	expense		
						Gas for Sess	ion	Commute			
	Complete ONLY if direct		Candidate/Officeholder name	C	Office sou	jht		Office he	ld		
	expenditure to benefit C/OI	H									

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis				
1	Total pages Schedule F1:	FILER NA	FILER NAME 3 Filer ID (Ethics Commis									
	Sch: 20/61 Rpt: 23/67		uleman (The Honor	able)				00083882				
4	Date 01/09/2023	Payee na Clay Pit	ne									
6	Amount (\$) \$227.01	7 Payee address; City; State; Zip Code \$227.01 1601 Guadalupe St Austin, TX 78701										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supporter Dinner												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Office sou	ht		Office he	eld			
	Date	Payee na	ne									
	01/17/2023	Clay Pit										
	Amount (\$) \$93.62	Payee add 1601 Gu Austin, T	adalupe St	State;	Zip Co	le						
	PURPOSE OF EXPENDITURE	a) Category	(See Categories listed at the /erage Expense	e top of this sch	edule)		η, TX,	ide of Texas. Com , officeholder living ?f				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Dffice sou	ht		Office he	eld			
	Date	Payee na	ne									
	01/25/2023	Clay Pit										
	Amount (\$) \$85.04	Payee add 1601 Gu	dress; City; adalupe St	State;	Zip Co	le						
		Austin, T	X 78701									
	PURPOSE OF EXPENDITURE		(See Categories listed at the verage Expense	e top of this sche	edule)		η, TX,	, officeholder living	plete Schedule T. J expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/	Officeholder name	C	Dffice sou	ht		Office he	eld			

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 21/61 Rpt: 24/67	Lalani, Suleman (The Honorable)	00083882		
4	Date 02/27/2023	Payee name Clay Pit			
6	Amount (\$) \$57.72	Payee address; City; State; Zip Code 1601 Guadalupe St Austin, TX 78701			
8	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense I NE		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/05/2023	Clay Pit			
	Amount (\$) \$95.32	Payee address; City; State; Zip Code 1601 Guadalupe St			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense I NE		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/12/2023	Clay Pit			
	Amount (\$) \$48.03	Payee address; City; State; Zip Code 1601 Guadalupe St			
		Austin, TX 78701			
	PURPOSE OF EXPENDITURE		uutside of Texas. Complete Schedule T. TX, officeholder living expense E r		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp ttee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of District	uipment & Related Expense
1	Total pages Schedule F1:	2 FI	LER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 22/61 Rpt: 25/67		alani, Suleman (The Honoral	ole)				00083882	
4	Date 04/19/2023		ayee name ay Pit						
6	Amount (\$) \$85.84	16	ayee address; City; 601 Guadalupe St ustin, TX 78701	State;	Zip Co	le			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	op of this sch	edule)		ι, TX,	de of Texas. Comp , officeholder living e	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ıht		Office hel	d
	Date	Pa	ayee name						
	05/22/2023	С	ay Pit						
	Amount (\$) \$82.88	16	ayee address; City; 601 Guadalupe St ustin, TX 78701	State;	Zip Co	le			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	op of this sch	edule)		n, TX,	de of Texas. Compi officeholder living e	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	Iht		Office hel	d
	Date	Pá	ayee name						
	05/30/2023		ay Pit						
	Amount (\$) \$34.63		ayee address; City; 601 Guadalupe St	State;	Zip Co	le			
		A	ustin, TX 78701						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the to bod/Beverage Expense	op of this sch	edule)		n, TX,	de of Texas. Compl , officeholder living e	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ıht		Office hel	d

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 23/61 Rpt: 26/67	Lalani, Suleman (The Honorable)	00083882			
4	Date 04/03/2023	5 Payee name Country Cleaners				
6	Amount (\$) \$31.44	7 Payee address; City; State; Zip Code 1478 Hwy 6 Sugar Land, TX 77478				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense for Session Attire			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	03/22/2023	Custom Burger				
	Amount (\$) \$13.48	Payee address; City; State; Zip Code Ronald Reagan Washington National Airport Access Rd				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	04/24/2023	Dilpasand Sweets & Snacks				
	Amount (\$) \$78.98	Payee address; City; State; Zip Code 14621 Beechnut St				
		Houston, TX 77083				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Constituents			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursem Fees Office Overhead/Rental Expens Food/Beverage Expense Poliing Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labo The Instruction Guide explains how to complete this form	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 24/61 Rpt: 27/67	Lalani, Suleman (The Honorable)	00083882		
4	Date 05/31/2023	Payee name Dirty Martin's Place			
6	Amount (\$) \$88.04	Payee address; City; State; Zip Code 2808 Guadalupe St Austin, TX 78705			
8	PURPOSE OF EXPENDITURE		ravel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/27/2023	Dirty Martin's Place			
	Amount (\$) \$83.57	Payee address; City; State; Zip Code 2808 Guadalupe St Austin, TX 78705			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Description	ravel outside of Texas. Complete Schedule T. austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/26/2023	Dunkin' Donuts - Bastrop			
	Amount (\$) \$15.51	Payee address; City; State; Zip Code 551 State Hwy 71			
		Bastrop, TX 78602			
	PURPOSE OF EXPENDITURE		n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense ffreshments		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement 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.	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:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 25/61 Rpt: 28/67	Lalani, Suleman (The Honorable)	00083882		
4	Date 05/03/2023	Payee name Dunkin' Donuts			
6	Amount (\$) \$7.28	Payee address; City; State; Zip Code Ronald Reagan Airport Arlington, TX 22202			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/20/2023	Elite Indo-Pak Restaurant			
	Amount (\$) \$196.63	Payee address; City; State; Zip Code 11941 S Texas 6			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense Jeal		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/26/2023	Elite Indo-Pak Restaurant			
	Amount (\$) \$23.99	Payee address;City;State;Zip Code11941 S Texas 6			
		Sugar Land, TX 77498			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense /leal		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services 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)	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)	
-	Sch: 26/61 Rpt: 29/67	Lalani, Suleman (The Honorable)	00083882	
4	Date 06/28/2023	Payee name Elite Indo-Pak Restaurant		
6	Amount (\$) \$165.50	⁷ Payee address; City; State; Zip Code 11941 S Texas 6 Sugar Land, TX 77498		
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eal	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	01/20/2023	Exxon - Bastrop		
	Amount (\$) \$42.39	Payee address; City; State; Zip Code 865 State Hwy 71		
	PURPOSE	Bastrop, TX 78602		
	OF		outside of Texas. Complete Schedule T. TX, officeholder living expense ion Commute	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	03/10/2023	Exxon - Bastrop		
	Amount (\$) \$79.66	Payee address;City;State; Zip Code865 State Hwy 71		
		Bastrop, TX 78602		
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. .TX, officeholder living expense ion Commute	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	xpense Vages/Contract Labor	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:	ILER NAME		3 Filer ID (Ethics Commission Filers)	
	Sch: 27/61 Rpt: 30/67	alani, Suleman (The Honorable)		00083882	
4	Date	ayee name			
	05/01/2023	xxon - Bastrop			
6	Amount (\$) \$58.29	ayee address; City; State; Zip Co 65 State Hwy 71 astrop, TX 78602	ode		
•	DUDDOCE	-			
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ion Commute	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ight	Office held	
	Date	ayee name			
	02/01/2023	xxon - Cedar Creek			
	Amount (\$)	ayee address; City; State; Zip Co	ode		
	\$81.67	061 State Hwy 71 Cedar Creek, TX 78612			
	PURPOSE OF EXPENDITURE	category (See Categories listed at the top of this schedule)	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ion Commute	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ight	Office held	
	Date	ayee name			
	03/15/2023	xxon - Cedar Creek			
	Amount (\$) \$79.03	ayee address; City; State; Zip Co 061 State Hwy 71	ode		
		Cedar Creek, TX 78612			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) ravel Out of District	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense ion Commute	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ight	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Lat The Instruction Guide explains how to complete this form	ense Transportation Equipment & Related Expense Travel in District Travel Out of District oor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 28/61 Rpt: 31/67	Lalani, Suleman (The Honorable)	00083882	
4	Date 06/12/2023	Payee name Fadi's Mediterranean Grill - Sugar Land		
6	Amount (\$) \$52.13	Payee address; City; State; Zip Code 716 Hwy 6 Sugar Land, TX 77478		
8	PURPOSE OF EXPENDITURE		on f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense ers Meal	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	06/12/2023	Filli Cafe		
	Amount (\$) \$22.73	Payee address; City; State; Zip Code 11920 S Texas 6 # 600 Sugar Land, TX 77498		
	PURPOSE OF EXPENDITURE		on f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense ers Meal	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	04/03/2023	Five Guys -Sugar Land		
	Amount (\$) \$33.89	Payee address; City; State; Zip Code 15810 Southwest Fwy #100 Sugar Land, TX 77479		
	PURPOSE OF EXPENDITURE		DN f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense ers Meal	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	-	3 Filer ID (Ethics Commission Filers)		
-	Sch: 29/61 Rpt: 32/67	Lalani, Suleman (The Honorable)	00083882		
4	Date 06/05/2023	5 Payee name Freshii			
6	Amount (\$) \$4.32	 Payee address; City; State; Zip Code 3100 N Terminal Rd Houston, TX 77032 			
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense hments		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	02/21/2023	Go Fund Me			
	Amount (\$) \$400.00	Payee address; City; State; Zip Code 855 Jefferson Ave			
		Redwood City, CA 94063			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense nation		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	03/31/2023	HEB - Bastrop			
	Amount (\$) \$47.12	Payee address; City; State; Zip Code 104 Hasler Blvd			
		Bastrop, TX 78602			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense on Commute		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 30/61 Rpt: 33/67	Lalani, Suleman (The Honorable)	00083882		
4	Date	5 Payee name			
	04/04/2023	HEB - Sugar Land			
6	Amount (\$) \$55.85	7 Payee address; City; State; Zip Code 530 Hwy 6 Sugar Land, TX 77478			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense on Commute		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	06/26/2023	Haraz Coffee House			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$25.21	13582 University Blvd			
		Suite 100			
		Sugar Land, TX 77479			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eshments		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	03/22/2023	Holiday Inn - VA			
	Amount (\$) \$14.00	Payee address;City;State;Zip Code2650 Richmond Hwy			
		Arlington, TX 22202			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense =CeS		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 31/61 Rpt: 34/67	Lalani, Suleman (The Honorable)	00083882		
4	Date 06/22/2023	5 Payee name Holiday Inn - VA			
6	Amount (\$) \$207.67	7 Payee address; City; State; Zip Code 2650 Richmond Hwy Arlington, TX 22202			
8	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense ip to Pakistani Embassy in Washington		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/05/2023	Hope For Three Autism Advocates			
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 1650 Hwy 6 Suite 150 Sugar Land, TX 77478			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	utside of Texas. Complete Schedule T. TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		
	Date	Pavee name			
	01/31/2023	Houston Parking			
	Amount (\$) \$72.00	Payee address; City; State; Zip Code 2020 McKinney			
		Houston, TX 77003			
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense g for Legislative Trip		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Glft/Awards/Memorials Expense Printing Expense Legal Services 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)		
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 32/61 Rpt: 35/67	Lalani, Suleman (The Honorable)	00083882		
4	Date	Payee name			
	06/05/2023	Houston Parking			
6	Amount (\$) \$25.00	Payee address; City; State; Zip Code 2020 McKinney Houston, TX 77003			
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense 1 G		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	04/14/2023	In N Out - Austin			
	Amount (\$) \$12.94	Payee address; City; State; Zip Code 4515 Airport Blvd			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	05/10/2023	In N Out - Austin			
	Amount (\$) \$9.09	Payee address; City; State; Zip Code 4515 Airport Blvd			
		Austin, TX 78751			
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/Contract Labor			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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 33/61 Rpt: 36/67		Lalani, Suleman (The Honorable)					00083882	
4	Date	5 Payee name							
	05/18/2023	In N Out - Austin							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$12.94		4515 Airport Blvd						
		Austin, TX 78751							
8	PURPOSE		Category (See Categories listed at the top of this so	chedule)	(b)	Description			
	OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense Session Meal							
						36331011 10164	1		
9	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Vertical State Vertical State								
	Date		Payee name						
04/10/2023			Javed Nihari Restaurant						
	Amount (\$) Payee address; City; State; Zip Code								
	\$146.51 14631 Beechnut St								
	Φ140.51								
			STE A						
			Houston, TX 77083						
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.						
			Supporters Meal						
							iou		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			Candidate/Officeholder name Office sought					Office held	
	Date		Payee name						
	03/13/2023		Karahi Boys						
Amount (\$) Payee address; City; State; Zip Code									
\$92.16 16535 Lexington Blvd									
	Suite 100								
	Sugar Land, TX 77479								
-	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description			
OF Ecod/Beverage Expense				outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE	EXPENDITURE Check if Austin, TX, officeholder living expense				, officeholder living expense			
						Supporters M	leal	I	
L									
Complete <u>ONLY</u> if direct expenditure to benefit C/OF			andidate/Officeholder name	Office sou	ight			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fee Foo Gift umittee Leg	nt Expense is id/Beverage Expense /Awards/Memorials Expen al Services e Instruction Guide e	Office Pollir se Printi Salar	e Overhe ng Expen ng Expen ries/Wage	nse es/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 34/61 Rpt: 37/67		an (The Honorable	e)				00083882	· · ·		
4	Date 06/07/2023	Payee name Karahi Boys									
6	Amount (\$)	Payee address;	City;	State; Zip	Code						
	\$187.09	16535 Lexingto		· ·							
	+=0.100	Suite 100									
		Sugar Land, T	X 77479								
8	PURPOSE OF EXPENDITURE	Category _{(See C} . Food/Beverage	ategories listed at the top e Expense	of this schedule)	(b		n, TX,	de of Texas. Com officeholder living 			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeh	older name	Office	sough	t		Office he	eld		
	Date	Payee name									
	06/29/2023	Karahi Boys									
	Amount (\$)	Payee address;	City;	State; Zip	Code						
	\$213.81	16535 Lexingto		· •							
	\$210101	Suite 100	on biva								
		Sugar Land, T	X 77479								
	PURPOSE OF EXPENDITURE	Category _{(See C} Food/Beverage	ategories listed at the top e Expense	of this schedule)	(b		n, TX,	de of Texas. Com officeholder living 			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeh	older name	Office	sough	t		Office he	eld		
	Date	Payee name									
	06/16/2023	Kroger									
-	Amount (\$)	Payee address;	City;	State; Zip	Code						
	\$53.78	4825 Sweetwa	-		Couc						
		Sugar Land, T	X 77479								
	PURPOSE OF EXPENDITURE	Category _{(See C} Travel In Distri	ategories listed at the top Ct	of this schedule)	(b		n, TX,	de of Texas. Com officeholder living ct Travel			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeh	older name	Office	sough	t		Office he	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens	Loan Offica Pollir se Printi Salar	Repayr e Overh Ig Exper ng Expe ies/Wag	nent/Reimbursement ead/Rental Expense nse ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 35/61 Rpt: 38/67		Lalani, Suleman (The Honorable	00083882							
4	Date	5	Payee name								
	06/20/2023	Kura Revolving Sushi									
6	Amount (\$)	7	Payee address; City;	State; Zip	Code	9					
	\$94.76		13513 University Blvd								
			Suite B500								
			Sugar Land, TX 77479								
8	PURPOSE	(a)	-		0) Description					
Ŭ	OF	[^(u)	Category (See Categories listed at the top of Food/Beverage Expense	of this schedule)	(`		outs	ide of Texas. Com	plete Schedule T.		
	EXPENDITURE		r oou/beverage Expense			Check if Austin	n, TX	, officeholder living	expense		
						Supporters M	/lea	l			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office	sough	it		Office he	eld		
	Date		Payee name								
	04/04/2023		Kwality Ice Cream								
	Amount (\$)		Payee address; City;	State; Zip	Code	9					
	\$29.84		13425 University Blvd								
			Suite 450								
			Sugar Land, TX 77479								
			-		- 1.0						
	PURPOSE OF	(a)	Category (See Categories listed at the top of	of this schedule)	(k	Description	outo	ide of Texas. Com	nlata Cabadula T		
	EXPENDITURE		Food/Beverage Expense					, officeholder living			
							porters Meal				
	Complete ONLY if direct		Candidate/Officeholder name	Office	souah	nt		Office he	eld		
	expenditure to benefit C/OI										
_	Date	<u> </u>	Davias name								
	02/21/2023		Payee name L&L Valet Parking Services								
			_	<u></u>	<u> </u>						
	Amount (\$)		Payee address; City;	State; Zip	Code	2					
	\$20.00		21 Waterway Ave								
			Woodlands , TX 77380								
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)	(k) Description					
	OF EXPENDITURE		Travel Out of District					ide of Texas. Com			
								, officeholder living	expense		
						Valet Parking	J 10				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	sough	nt		Office he	eld		
				<u> </u>							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explai	Office Ov Polling E Printing I Salaries/	verhea xpense Expense Wages	se s/Contract Labor		Travel in District Travel Out of District	uipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 36/61 Rpt: 39/67		Lalani, Suleman (The Honorable)					00083882			
4	Date	5	Payee name								
	05/23/2023	D23 La Mansión del Rio									
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode						
	\$106.08		112 College St								
			San Antonio, TX 78205		_						
8	PURPOSE OF		Category (See Categories listed at the top of this	schedule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comp officeholder living e			
						Travel Meal	, 17,		expense		
						Traver Mear					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office hel	d		
	Data	<u> </u>									
	Date		Payee name								
	03/07/2023		Legislative Study Group								
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode						
	\$500.00		P.O. Box 12943								
			Austin, TX 78711								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Comp			
	-		Candidate/Officeholder/Political Cor	nmittee				officeholder living	expense		
						Annual Dues					
_	Complete ONLY if direct		andidate/Officeholder name	Office so				Office hel	d		
	expenditure to benefit C/OI			Office 30	ugin			Office field	u		
	Date		Payee name								
	01/05/2023		Mahesh's Kitchen								
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode						
	\$102.61		16019 City Walk	· •							
			Sugar Land, TX 77479		-						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					de of Texas. Comp			
						Supporter Me		officeholder living e	expense		
						Supporter Mit	Juis	,			
-	Complete ONLY if direct		andidate/Officeholder name	Office so	lught			Office hel	d		
	expenditure to benefit C/OI			Cince 30	agin				~		
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		3 Filer ID (Ethics Commission Filers)							
-	Sch: 37/61 Rpt: 40/67	Lalani, Suleman (The Honorable)	00083882							
4	Date 02/21/2023	 Payee name Mahesh's Kitchen 								
6	Amount (\$) \$189.17	7 Payee address; City; State; Zip Code 16019 City Walk Sugar Land, TX 77479								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense leal							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/09/2023	Mai Colachi Restaurant & Catering								
	Amount (\$) \$82.54	Payee address; City; State; Zip Code 15425 Southwest Fwy								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Ieal							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/28/2023	Main Bird Hot Chicken								
	Amount (\$) \$54.12	Payee address; City; State; Zip Code 13513 University Blvd #300 Sugar Land, TX 77479								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Ieal							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains f	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense (ages/	e Contract Labor		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:	2	FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 38/61 Rpt: 41/67		Lalani, Suleman (The Honorable)					00083882			
4	Date	5	Payee name								
	03/06/2023	/06/2023 Marriott Sugar Land									
6	Amount (\$)										
	\$12.99		16090 City Walk								
			Sugar Land, TX 77479								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	OF EXPENDITURE		Food/Beverage Expense		ļ			ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Refreshment	5 10	or meeting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	Office sou	ght			Office held			
	Date		Payee name								
	05/01/2023		Marriott Sugar Land								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$12.99		16090 City Walk								
			Sugar Land, TX 77479								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.			
						Meeting Refr		, officeholder living expense			
						Meeting Rein	51	iments			
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	aht			Office held			
	expenditure to benefit C/OI				gin						
	Date		Payee name								
	03/13/2023		Minuti Coffee								
	Amount (\$)		Payee address; City; State;	Zip Co	de						
	\$10.11		1535 Hwy 6	•							
			-								
			Sugar Land, TX 77478								
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense			
					I	Refreshment					
-	Complete ONLY if direct	L	Candidate/Officeholder name C	Office sou	aht			Office held			
	expenditure to benefit C/Oł				9			2			
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense (ages/	Contract Labor		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:	2	FILER NAME				3	Filer ID (Ethics Commission Filer	s)	
	Sch: 39/61 Rpt: 42/67		Lalani, Suleman (The Honorable)					00083882		
4	Date	5	Payee name							
	06/07/2023		Minuti Coffee							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$9.79		1535 Hwy 6							
			Sugar Land, TX 77478							
8	PURPOSE		Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.		
					I	Meeting Refre		, officeholder living expense		
						incoming item	0011			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C)ffice sou	ght			Office held		
	Date		Payee name							
	01/06/2023		Nation Builder							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$69.00		520 S Grand Ave	•						
			2nd floor							
			Los Angeles, CA 90071							
	PURPOSE		Category (See Categories listed at the top of this sche	odulo)	(b)	Description				
	OF		Office Overhead/Rental Expense	edule)	Ì		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE				ĺ			, officeholder living expense		
						Website and	Em	nail Platform		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	office sou	gnt			Office held		
	Date		Payee name							
	02/06/2023		Nation Builder							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$69.00		520 S Grand Ave							
			2nd floor							
			Los Angeles, CA 90071							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense	,				ide of Texas. Complete Schedule T.		
	EXPENDITORE				ļ			, officeholder living expense		
						Website and	ьm	nall Platform		
		Ĺ	andidate (Office la Islam - Is	Aff:	ou le +					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	office sou	gnt			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 40/61 Rpt: 43/67	Lalani, Suleman (The Honorable)	00083882							
4	Date 03/06/2023	Payee name Nation Builder								
6	Amount (\$) \$69.00	 Payee address; City; State; Zip Code 520 S Grand Ave 2nd floor Los Angeles, CA 90071 								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense Email Platform							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/06/2023	Nation Builder								
	Amount (\$) \$69.00	Payee address;City;State;Zip Code520 S Grand Ave2nd floorLos Angeles, CA 90071								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. h, TX, officeholder living expense Email Platform							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/06/2023	Nation Builder								
	Amount (\$) \$95.00	Payee address;City;State; Zip Code520 S Grand Ave2nd floorLos Angeles, CA 90071								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense Email Platform							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Mittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	- Expense Wages/Contract Labor		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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 41/61 Rpt: 44/67		alani, Suleman (The Honorable).				00083882				
4	Date 06/06/2023		Payee name Nation Builder								
6	Amount (\$) \$95.00	!	Payee address; City; State 520 S Grand Ave 2nd floor Los Angeles, CA 90071	e; Zip Co	ode						
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 Website and Email Platform 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held				
	Date	ŀ	Payee name								
	05/08/2023	(Dpal Divine's Austin Grill								
	Amount (\$) \$31.52	2	Payee address; City; State 2200 S I-35 Frontage Rd Austin, TX 78704	e; Zip Co	ode						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Food/Beverage Expense	hedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held				
	Date	I	Payee name								
	04/18/2023		P. Terry's Burger Stand								
	Amount (\$) \$9.42		Payee address; City; State L800 E Oltorf St	e; Zip Co	ode						
			Austin, TX 78741								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sc Food/Beverage Expense	hedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide exp	lains I	Office Ove Polling Exp Printing Ex Salaries/W	rheac pense pense ages	e /Contract Labor		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:	2						3	Filer ID (Ethics Commission Filers)	
1	Sch: 42/61 Rpt: 45/67		Lalani, Suleman (The Honorable)					3	00083882	
4	Date	5	Payee name							
	01/03/2023		PNC Bank							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de				
	\$3.00		2520 Hwy 6							
			Sugar Land, TX 77478							
8	PURPOSE	(a)	Category (See Categories listed at the top of	his sche	edule)	(b)	Description			
	OF EXPENDITURE		Accounting/Banking						de of Texas. Complete Schedule T.	
									officeholder living expense	
							Service Char	ge		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held	
	Date		Payee name							
	02/01/2023		PNC Bank							
	Amount (\$)		Payee address; City;	State;	Zip Co	de				
	\$3.00		2520 Hwy 6							
			Sugar Land, TX 77478							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Accounting/Banking	his sche	edule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C)ffice sou	ght			Office held	
	Date		Payee name							
	03/01/2023		PNC Bank							
	Amount (\$)		Payee address; City;	State:	Zip Co	de				
	\$3.00		2520 Hwy 6	,						
	+0.00									
			Sugar Land, TX 77478							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Accounting/Banking	his sche	edule)	(b)		, тх,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C)ffice sou	ght			Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees G Food/Beverage Expense G Gift/Awards/Memorials Expense F	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		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:	2				3	Filer ID (Ethics Commission Filers)			
T	Sch: 43/61 Rpt: 46/67		Lalani, Suleman (The Honorable)			3	00083882			
4	Date	5	Payee name							
	04/03/2023		PNC Bank							
6	Amount (\$) \$3.00	7	Payee address; City; State; 2520 Hwy 6 Sugar Land, TX 77478	Zip Coc	le					
8	PURPOSE	(a)	Catagony		b) Description					
0	OF	(a)	Category (See Categories listed at the top of this sched Accounting/Banking	dule)	Check if travel	, TX,	de of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held			
	Date		Payee name							
	05/01/2023		PNC Bank							
	Amount (\$)		Payee address; City; State;	Zip Coo	le					
	\$3.00	<u> </u>	2520 Hwy 6 Sugar Land, TX 77478							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Accounting/Banking	dule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held			
	Date		Payee name							
	06/01/2023		PNC Bank							
	Amount (\$) \$3.00		Payee address; City; State; 2520 Hwy 6	Zip Coo	le					
			Sugar Land, TX 77478							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schede Accounting/Banking	dule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Off	fice soug	ht		Office held			

				EXPENDIT	URE CATEGO	RIES FOR	BC	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee	Event Expense Fees Food/Beverage Ex Gift/Awards/Memol Legal Services The Instructior		Office Over Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Travel in District Travel Out of Dis	quipment	xpense t & Related Expense r not listed above)
1	Total pages Schedule F1:	ן ס ד							3	Filer ID	(Ethic	s Commission Filers)
-	Sch: 44/61 Rpt: 47/67			man (The Ho	norable)				5	00083882		
4	Date	5 F	Payee name									
	02/16/2023	F	PNC Bank									
6	Amount (\$) \$65.84	2	Payee addres 2520 Hwy 6 Gugar Land		State	; Zip Coo	de					
8	PURPOSE						(h)	Description				
o	OF EXPENDITURE		Category (Se Accounting/		at the top of this sch	nedule)			, TX,	de of Texas. Com officeholder living	•	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offic	eholder name	· (Office sou	ght			Office he	eld	
	Date	F	Payee name									
	03/20/2023	F	Priceline.co	n LLC								
	Amount (\$)	F	Payee addres	s; City;	State	; Zip Co	de					
	\$199.96		300 Connec Norwalk, CT	ticut Avenue 06854								
	PURPOSE OF EXPENDITURE		Category _{(Se} Fravel Out c		at the top of this sch	nedule)			, TX,	de of Texas. Com officeholder living Dtel Room R	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	· (Office sou	ght			Office he	eld	
	Date	F	Payee name									
	03/22/2023	F	Priceline.com	n LLC								
	Amount (\$) \$197.96		Payee addres 300 Connec	s; City; ticut Avenue		; Zip Coo	de					
		1	Norwalk, CT	06854								
	PURPOSE OF EXPENDITURE		Category _{(Se} Fravel Out c		at the top of this sch	nedule)			, тх,	de of Texas. Com officeholder living onal Airport		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offic	eholder name	. (Office sou	ght			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 45/61 Rpt: 48/67	Lalani, Suleman (The Honorable)	00083882								
4	Date	Payee name									
	04/28/2023										
6	Amount (\$) \$291.98	7 Payee address; City; State; Zip Code 800 Connecticut Avenue Norwalk, CT 06854									
8	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Lodging for White House Visit								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	05/22/2023	Priceline.com LLC									
	Amount (\$) \$275.16	Payee address; City; State; Zip Code 800 Connecticut Avenue Norwalk, CT 06854									
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Travel Out of District Check if travel o Check if Austin, Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense el Rio Lodging								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	03/13/2023	Saravanaa Bhavan									
	Amount (\$) \$73.84	Payee address; City; State; Zip Code 11929 University Blvd #1a Sugar Land, TX 77479									
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eal								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)						
	Sch: 46/61 Rpt: 49/67	Lalani, Suleman (The Honorable)	00083882						
4	Date 01/13/2023	Payee name Shell -Austin							
6	Amount (\$) \$54.55	Payee address; City; State; Zip Code 3828 N Interstate 35 Austin, TX 78751 Austin, TX 78751							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Gas for Session Commute									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/16/2023	Shell							
	Amount (\$) \$58.99	Payee address; City; State; Zip Code 11750 Old Addicks-Howell Rd Sugar Land, TX 77498							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense DN Commute						
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	02/22/2023	Shell							
	Amount (\$) \$68.39	Payee address; City; State; Zip Code 11750 Old Addicks-Howell Rd							
		Sugar Land, TX 77498							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense On Commute						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Od/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 47/61 Rpt: 50/67	Lalani, Suleman (The Honorable)	00083882						
4	Date 03/06/2023	Payee name Shell							
6	Amount (\$) \$75.00	Payee address; City; State; Zip Code 11750 Old Addicks-Howell Rd <							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Gas for Session Commute									
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/20/2023	Shell							
	Amount (\$)Payee address;City;State;Zip Code\$57.2011750 Old Addicks-Howell Rd								
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense sion Commute						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/27/2023	Shell							
	Amount (\$) \$75.00	Payee address; City; State; Zip Code 11750 Old Addicks-Howell Rd							
		Sugar Land, TX 77498							
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense sion Commute						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 48/61 Rpt: 51/67	Lalani, Suleman (The Honorable)	00083882							
4	Date 04/10/2023	5 Payee name Shell								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$51.71									
8	PURPOSE	(a) Cotagon () Description								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for Session Commute										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	04/24/2023	Shell								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$61.75	11750 Old Addicks-Howell Rd Sugar Land, TX 77498								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense On Commute							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/17/2023	Shell								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$57.79	11750 Old Addicks-Howell Rd								
		Sugar Land, TX 77498								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense on Commute							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 49/61 Rpt: 52/67	Lalani, Suleman (The Honorable)	00083882						
4	Date 06/12/2023	5 Payee name Shell							
6	Amount (\$) \$52.13	7 Payee address; City; State; Zip Code 11750 Old Addicks-Howell Rd Sugar Land, TX 77498							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Image: Check if Austin, TX, officeholder living expense Gas for District Travel Check if Austin, TX, officeholder living expense Gas for District Travel									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	06/13/2023	South Shore Harbour							
	Amount (\$) \$157.07	Payee address; City; State; Zip Code 2500 South Shore Blvd							
		League City, TX 77573							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eal						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	03/20/2023	Southwest Airlines							
	Amount (\$) \$715.95	Payee address; City; State; Zip Code 2702 Love Field Drive HDQ-1PR Dallas , TX 75235							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense hington DC						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Fees Office Overhaed/Rental Expense Trans Food/Beverage Expense Polling Expense Trave - Gift/Awards/Memorials Expense Printing Expense Trave				Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 50/61 Rpt: 53/67		Lalani, Suleman (The Honoral	ble)				00083882		
4	Date	5	Payee name							
	03/20/2023		Southwest Airlines							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le				
	\$786.97		2702 Love Field Drive							
			HDQ-1PR							
			Dallas , TX 75235							
_										
8	PURPOSE OF	(a)	Category (See Categories listed at the t	op of this sche	edule)	(b) Description	outoi	de of Toylog, Com	nlata Cabadula T	
	EXPENDITURE		Travel Out of District			Check if travel		officeholder living		
						Flight to Was		-	, oxponed	
						i light to Trac		91011 2 0		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C)ffice souç	ht		Office he	eld	
	Date		Payee name							
04/26/2023 Southwest Airlines										
Amount (\$) Payee address; City; State; Zip Code										
	\$462.98		2702 Love Field Drive	,						
	\$+0 <u>2</u> .00									
			HDQ-1PR							
			Dallas , TX 75235							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the t Travel Out of District	op of this sche	edule)	(b) Description Check if travel Check if Austin Flight To Whi	, тх	officeholder living	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office sou	ht		Office he	eld	
╞	Date		Payee name							
	04/26/2023		Southwest Airlines							
-	Amount (\$)	-	Payee address; City;	Ctoto:	Zip Co	le				
	\$176.98		2702 Love Field Drive	Siale,	ZIP CO	ie				
	\$170.98									
			HDQ-1PR							
			Dallas , TX 75235							
	PURPOSE	(a)	Category (See Categories listed at the t	op of this sche	edule)	(b) Description				
	OF EXPENDITURE		Travel Out of District			X Check if travel				
Check if Austin, 1X, officeholder living expense										
						Return Flight	Fre	om White Ho	ouse for Eid Event	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office he	eld	
-										

			EXPENDITURE CATEGO	RIES FOF	RBC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 51/61 Rpt: 54/67		Lalani, Suleman (The Honorable)					00083882		
4	Date	5	Payee name							
	06/23/2023		Southwest Airlines							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$759.96		2702 Love Field Drive							
			HDQ-1PR							
			Dallas , TX 75235							
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	iedule)	(b)	Description				
	EXPENDITURE		Travel Out of District			Check if Austin		officeholder living	•	
									in Washington DC	
						i ligiti to i cili	0101		in the state of th	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght			Office he	eld	
	Date		Payee name							
	06/23/2023		Southwest Airlines							
	Amount (\$)		Payee address; City; State;	; Zip Co	de					
\$759.96 2702 Love Field Drive										
	+		HDQ-1PR							
			Dallas , TX 75235							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Travel Out of District			Check if travel of Check if Austin		officeholder living		
								-	in Washington DC	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name C	Dffice sou	ght			Office he	eld	
	Date		Payee name							
	06/26/2023		Southwest Airlines							
	Amount (\$)		Payee address; City; State;	; Zip Co	de					
	\$398.96		2702 Love Field Drive							
			HDQ-1PR							
			Dallas , TX 75235							
	51155005				(1)					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(a)	Description	outsid	de of Texas. Com	nlete Schedule T	
	EXPENDITURE		Travel Out of District					officeholder living		
						Flight to Was				
						0				
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name C	Office sou	aht			Office he	eld	
	expenditure to benefit C/Oł				ə			Childe He		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overh Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	ense Travel Out of District es/Contract Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 52/61 Rpt: 55/67	alani, Suleman (The Honorable)	00083882							
4	Date	Payee name								
	04/14/2023	Starbucks - Austin								
6	Amount (\$)	Payee address; City; State; Zip Code								
	\$18.84	720 Red River St								
		Austin, TX 78701								
8	PURPOSE OF) Description							
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
			Meeting Refreshments							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	andidate/Officeholder name Office sough	It Office held							
	Date	Payee name								
	05/04/2023	Starbucks -Atlanta								
	Amount (\$)	Payee address; City; State; Zip Code)							
	\$27.16 460 Airways Ave									
		Savannah, GA 31408								
	PURPOSE OF	6) (D) Description							
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
			Travel Refreshments							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sough	t Office held							
	Date	Payee name								
	06/05/2023	Starbucks -IAH								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$9.80	3100 N Terminal Rd								
		Houston, TX 77032								
	PURPOSE OF		Description							
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
			Travel Refreshments							
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	andidate/Officeholder name Office sough	t Office held							

			E	XPENDITURE C	ATEGOR	RIES FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Fooc Gift/A nmittee Lega	t Expense /Beverage Expense wards/Memorials Expe Services		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
	-			Instruction Guide	explains h	how to cor	nplete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 53/61 Rpt: 56/67		Lalani, Sulemai	n (The Honorabl	le)				00083882		
4	Date	5	Payee name								
	03/20/2023		Starbucks								
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de				
	\$14.07		6502 US-90 AL	т							
			Sugar Land, TX	77478							
8	PURPOSE	(a)	Category (See Ca		of this ash	e dule)	(b) Description				
	OF		Salaries/Wages			edule)		outsi	ide of Texas. Comp	plete Schedule T.	
	EXPENDITURE		g				Check if Austir	η, TX,	, officeholder living	expense	
							Refreshmen	ts fo	or Travel		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	C	Office sou	ght		Office he	ld	
	Date		Payee name								
	04/03/2023		Starbucks								
	Amount (\$)		Payee address;	City;	State;	Zip Co	de				
	\$5.90		6502 US-90 AL	т							
			Sugar Land, TX	77478							
	PURPOSE OF	(a)	Category (See Ca		o of this sche	edule)	(b) Description				
	EXPENDITURE		Food/Beverage	Expense					ide of Texas. Comp , officeholder living		
							Refreshment			experied	
	Complete ONLY if direct		Candidate/Officeho	lder name	C) Office sou	aht		Office he	ld	
	expenditure to benefit C/OI										
-	Date	—	Payee name								
	04/17/2023		Starbucks								
				City."	Ctoto	Zin Co					
	Amount (\$) \$14.34		Payee address; 6502 US-90 AL	City; T	Siale;	Zip Co					
	φ14.34		0302 03-90 AL	1							
			Sugar Land, TX	77478							
	PURPOSE	(a)	Category (See Ca	enories listed at the tor	of this sche	edule)	(b) Description				
	OF		Food/Beverage			- 1410)		outsi	ide of Texas. Comp	plete Schedule T.	
	EXPENDITURE		5	·					, officeholder living	expense	
							Travel Refre	shm	nents		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	lder name	C	Office sou	ght		Office he	ld	
	corpenditure to beliefit C/Of										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					Solicitation/Fundraising Expense Transportation Equipment & Relate Travel in District Travel Out of District OTHER (enter a category not listed				
1	Total pages Schedule F1:					3 Filer ID (Ethics Comm	ission Eilers)			
1	Sch: 54/61 Rpt: 57/67	Lalani, Suleman (The Honorable)00083882								
4	Date 06/08/2023	Payee name Starbucks				•				
			O'thur Ottata	71.0.0.1.0						
6	Amount (\$) 7 Payee address; City; State; Zip Code \$11.28 6502 US-90 ALT Sugar Land, TX 77478									
8	PURPOSE	Cotogon		(h)	Decoription					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting Refreshments										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	Office sought		Office held				
	Date	Payee name								
	06/16/2023	Starbucks								
	Amount (\$)	Payee address;	City; State;	Zip Code						
	\$11.80	6502 US-90 ALT Sugar Land, TX 77	478							
	PURPOSE OF EXPENDITURE	Category _{(See Categor} Food/Beverage Ex	ries listed at the top of this scho pense	_{edule)} (b)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense reshments				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	Office sought		Office held				
	Date	Payee name								
	06/21/2023	Steak 48								
	Amount (\$) \$26.00	Payee address; 4444 Westheimer		Zip Code						
		Houston, TX 7702 [°]	7							
	PURPOSE OF EXPENDITURE	Category _{(See Categor} Travel Out of Distri	ries listed at the top of this scho ICT	edule) (b)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholde	r name C	Office sought		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
1	Sch: 55/61 Rpt: 58/67	Lalani, Suleman (The Honorable)	00083882							
4	Date 06/21/2023	5 Payee name Steak 48								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
•	\$397.48	4444 Westheimer Rd Houston, TX 77027								
8	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 Supporters Meal										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	05/24/2023	Sweetwaters Coffee								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$26.96	316 W 12th St Austin, TX 78701								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense eshments							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	01/31/2023	Tailwind Concessions								
-	Amount (\$)	Payee address; City; State; Zip Code								
	\$40.00	3002 Heritage Way								
		Harlingen, TX 78550								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense slative Travel							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense L Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P Legal Services S The Instruction Guide explains hor	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:	2				2	Filer ID (Ethics Commission Filers)			
1	Sch: 56/61 Rpt: 59/67		2 FILER NAME 3 Filer ID (Ethics Commis Lalani, Suleman (The Honorable) 00083882							
4	Date	5	Payee name							
	03/22/2023		Taxi Driver Washington							
6	Amount (\$)	7	Payee address; City; State; 2	Zip Cod	e					
	\$33.00		1636 Bladensburg Rd NE							
			Washington, DC 20002							
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu		b) Description					
Ū	OF	,	Travel Out of District	uie)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austir	I, TX	, officeholder living expense			
						n I	n Washington DC for White House			
					Event					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offi	ice soug	ht		Office held			
	Date		Payee name							
	03/17/2023		Texaco - Brookshire							
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e					
	\$80.93		35123 Katy Fwy							
			Brookshire, TX 77423							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	ule) (b) Description					
	EXPENDITURE		Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
					Gas for Sess					
	Complete ONLY if direct	(Candidate/Officeholder name Offi	ice soug	ht		Office held			
	expenditure to benefit C/OI	Н								
⊨	Date		Payee name							
	03/08/2023		Texas Capitol Gift Shop							
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e					
	\$54.13		1400 Congress Ave.							
			Suite E1.006							
			Austin, TX 78701							
	PURPOSE	(0)			b) Decemination					
	OF	(a)	Category (See Categories listed at the top of this schedu Gift/Awards/Memorials Expense	ule)	b) Description Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Gill/Awarus/Merionals Expense				, officeholder living expense			
					Gifts for Con					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offi	ice soug	ht		Office held			
⊢										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				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:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 57/61 Rpt: 60/67		Lalani, Suleman (The Honorable)					00083882		
4	Date	5	Payee name							
	04/28/2023		Texas Capitol Gift Shop							
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode					
	\$84.16		1400 Congress Ave.							
			Suite E1.006							
			Austin, TX 78701							
					1					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description				
	EXPENDITURE		Gift/Awards/Memorials Expense					de of Texas. Com officeholder living		
						Gifts for Cons			l exhense	
							Juic			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	l .ght			Office he	eld	
	Date		Payee name							
	03/20/2023		Texas Monthly News							
Amount (\$) Payee address; City; State; Z										
\$23.57 S Terminal Rd										
	Ψ20.01									
			Terminal A							
			Houston, TX 77032							
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Com		
								officeholder living) expense	
						Refreshment	SIC	or Travel		
				<u> </u>				0111		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ignt			Office he	eiu	
		_								
	Date		Payee name							
	03/16/2023		Thai Cottage							
	Amount (\$)		Payee address; City; State	e; Zip Co	ode					
	\$45.51		4723 Sweetwater Blvd							
			Sugar Land, TX 77479							
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description				
			Food/Beverage Expense	,		Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE							officeholder living) expense	
						Supporters N	lea	I		
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office he	eld	
	expenditure to benefit C/OF	Η								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	erhead pense xpens Vages	e /Contract Labor		Solicitation/Fundraising Expe Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category no	Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics C	Commission Filers)
	Sch: 58/61 Rpt: 61/67		Lalani, Suleman (The Honorable)					00083882	
4	Date	5	Payee name				I		
	02/08/2023		The Capitol Grill						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				
	\$66.01		1400 Congress Ave.						
		<u> </u>	Austin, TX 78701						
8	PURPOSE OF		Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Sched officeholder living expense	ule T.
						Meal for Ses			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	Office sou	ight			Office held	
	Date		Payee name						
	02/09/2023		The Capitol Grill						
	Amount (\$)		Payee address; City; State	e; Zip Co	de				
	\$21.60		1400 Congress Ave.						
			-						
			Austin, TX 78701						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Sched officeholder living expense	ule T.
						Meal for Ses			
	Complete ONLY if direct		andidate/Officeholder name	Office sou	aht			Office held	
	expenditure to benefit C/OI				5				
-	Date		Payee name						
	03/22/2023		The Capitol Grill						
_	Amount (\$)			e; Zip Co	do				
	\$21.78		1400 Congress Ave.	e, zip cu	ue				
	φ21.70		1400 Congress Ave.						
			Austin, TX 78701						
	PURPOSE OF		Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Sched officeholder living expense	ule T.
						Session Mea		uncendider living expense	
						2000111100			
-	Complete ONLY if direct	<u></u>	andidate/Officeholder name	Office sou	l aht			Office held	
	expenditure to benefit C/Oł			21100 000	9.11				
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper Imittee Legal Services The Instruction Guide 6		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of District	ment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (E	thics Commission Filers)
	Sch: 59/61 Rpt: 62/67		Lalani, Suleman (The Honorabl	e)				00083882	
4	Date	5	Payee name				<u> </u>		
	03/23/2023		The Capitol Grill						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Coo	е			
	\$23.03		1400 Congress Ave.						
		<u> </u>	Austin, TX 78701						
8	PURPOSE OF		Category (See Categories listed at the top	of this sch	edule)	b) Description			
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete , officeholder living exp	
						Session Mea		, emeeneder ming exp	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Dffice soug	ht		Office held	
	Date		Payee name						
	05/03/2023		USA HALAL						
	Amount (\$)		Payee address; City;	State:	; Zip Coo	e			
	\$49.78		303 W Martin Luther King Jr Blv						
			Austin, TX 78701						
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sch	edule)	b) Description			
	EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete , officeholder living exp	
						Staff Meal	i, I.A.	, oncentitider hving exp	
						otan moa			
	Complete ONLY if direct		andidate/Officeholder name		Office soug	ht		Office held	
	expenditure to benefit C/Oł							000	
-	Date	<u> </u>							
	06/05/2023		Payee name United Airlines						
				01-1-1	7:- 0	-			
	Amount (\$)		Payee address; City;	State;	; Zip Coo	е			
	\$377.80		233 South Wacker Drive						
			Chicago, IL 60606						
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	b) Description			
	OF EXPENDITURE		Travel Out of District					ide of Texas. Complete	
	-							, officeholder living exp for Meeting with	
						Community	us I		i ivepalese
L		L	andidata/Officabaldar tarta					Office hal-	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	in in the second s		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Ove Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Exp	rheac pense pens ages	e Travel Out of District /Contract Labor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 60/61 Rpt: 63/67		Lalani, Suleman (The Honorable)		00083882				
4	Date 05/02/2023	5	Payee name United Ventures Consortium Inc.						
6	Amount (\$) \$19.03	7	Payee address; City; State; Zip Co 2711 26th St NE Washington, TX 20018	de					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Travel Out of District	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel In Washington DC for White House Event				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ght	Office held				
	Date		Payee name						
	05/08/2023		Walgreens - Austin						
	Amount (\$) \$35.20		Payee address; City; State; Zip Co 5345 N Interstate Hwy 35,	de					
	PURPOSE	(0)	Austin, TX 78723	(h)	Description				
	OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hygiene Supplies				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ght	Office held				
	Date		Payee name						
	02/16/2023		Wendy's - Austin						
	Amount (\$) \$13.20		Payee address; City; State; Zip Co 619 N Interstate Hwy 35	de					
			Austin, TX 78702						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meal for Session				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sou	ght	Office held				

		E	XPENDITURE CATEGO	RIES FOR B	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food - Gift/A I Committee Lega	Expense Beverage Expense wards/Memorials Expense Services	Office Overhe Polling Expen Printing Exper Salaries/Wage	nse es/Contract Labor	Transportation E Travel in District Travel Out of Dis	
	-		Instruction Guide explains	s how to comp	lete this form.		
1	Total pages Schedule F1: Sch: 61/61 Rpt: 64/67		ı (The Honorable)			3 Filer ID 00083882	(Ethics Commission Filers)
4	Date 05/22/2023	5 Payee name Zaviya Grill	<u> </u>				
6	Amount (\$) \$22.86	 Payee address; 1212 W Parmer Unit A Austin, TX 7872 	Ln	e; Zip Code			
8	PURPOSE OF EXPENDITURE	(a) Category _{(See Cat} Food/Beverage	egories listed at the top of this so Expense	chedule) (b		outside of Texas. Com n, TX, officeholder living I	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeho	lder name	Office sought	1	Office he	eld

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Inst	ruction C	Guide explains I	1 Total pages Schedule T: Sch: 1/3 Rpt: 65/67							
2 FILER NAME			3 Filer ID (Ethics Commission Filers)							
Lalani, Suleman	ı (The Hon	iorable)	00083882							
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee										
Southwest Airlines										
5 Contribution / Expenditure reported on:										
Schedule A2		Schedule B	Schedule B(J)	Schedule D X Schedule F1						
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC					
6 Dates of Travel	7 Name	of person(s) traveling	 a							
	Lalani, Zakia									
	8 Depart	ture city or name of d	lenarture location							
06/29/2023	Houst									
		ation city or name of	destination location							
06/29/2023		ington DC	desination location							
		-		afavora anniar a						
10 Means of transpor Commercial Airr			el (including name of co bassy in Washington		other event)					
Name of Contribut	tor / Corpora	ation or Labor Organ	nization / Pledgor /Paye	e						
Southwest Airlin	ies									
Contribution / Exp	enditure rep	ported on:								
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D X Schedule F1					
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC					
Dates of Travel	Name	of person(s) traveling	g							
	Lalani	i, Zakia (Mrs.)								
	Depart	ture city or name of d	leparture location							
03/20/2023	Houst									
	Destin	ation city or name of	destination location							
03/20/2023		ington DC								
Means of transpor		-	el (including name of co	onference seminar or	cother event)					
	lation		e House for Nawruz		outer eventy					
		ation or Labor Organ	nization / Pledgor /Paye	e						
Southwest Airlin	ies									
Contribution / Exp	enditure rep	ported on:								
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D X Schedule F1					
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC					
Dates of Travel	Name	of person(s) traveling	g							
	Lalani	i M.D., Suleman (F	Rep.)							
Departure city or name of departure location										
03/20/2023 Houston										
Destination city or name of destination location										
03/20/2023 Washington DC										
Means of transportationPurpose of travel (including name of conference, seminar, or other event)Commercial AirplaneTravel to White House for Nawruz Event										
	Jane			Lvent						

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contribute Southwest Airline	4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee										
	5 Contribution / Expenditure reported on:										
Schedule A2		Schedule B	Schedule B(J)	Г	Schedule C2	Schedule D	X Schedule F1				
Schedule F2		Schedule F4	Schedule G		Schedule H	Schedule COH-UC					
6 Dates of Travel	7 Name of person(s) traveling										
	Lalani M.D., Suleman (Rep.)										
04/30/2023	8 Departure city or name of departure location Houston										
04/30/2023											
04/30/2023	9 Destination city or name of destination location04/30/2023 Washington										
10 Means of transport		-	ravel (including name of	confor	onco cominar or o	other event)					
Commercial Airp		-	te House Eid Celebrat		ence, seminar, or c						
		ation or Labor Or	ganization / Pledgor /Pay	/ee							
Southwest Airline		orted op:									
Contribution / Expe		Schedule B	Schedule B(J)		Schedule C2	Schedule D	X Schedule F1				
Schedule F2		Schedule F4	Schedule B(3)		Schedule H	Schedule COH-UC	X Schedule F1				
					Schedule II						
Dates of Travel		of person(s) trave									
		M.D., Sulemar									
05/02/2023		ngton DC	of departure location								
03/02/2023		-	- folo - tio - tio - lo tio -								
05/02/2023	Houst		e of destination location								
		-	roval (including name of	oonfor	opoo cominar or (other event					
Means of transport Commercial Airp		-	ravel (including name of District from White Hou								
Name of Contribute Southwest Airline		ation or Labor Or	ganization / Pledgor /Pay	/ee							
		orted op:									
Contribution / Expe		Schedule B	Schedule B(J)	Г	Schedule C2	Schedule D	X Schedule F1				
Schedule F2		Schedule F4	Schedule B(3)		Schedule H	Schedule COH-UC	X Schedule F1				
Dates of Travel		of person(s) trave M.D., Sulemar									
06/29/2023	Houst		of departure location								
00/23/2023			e of destination location								
06/29/2023		ngton DC									
		-	ravel (including name of	confor	ence seminar or o	other event)					
	Means of transportationPurpose of travel (including name of conference, seminar, or other event)Commercial AirplanePakistani Embassy in Washington DC										
Forms provided by T	exas Ethio	cs Commissior	n www.ethio	cs.sta	te.tx.us		/ersion V3.5.1.a18ea2ca				

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4	4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee											
	United Airlines											
5	Contribution / Expe	enditure rep	ported on:									
	Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	X Schedule F1					
	Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC						
6	Dates of Travel	7 Name	of person(s) trave	eling								
		Lalani M.D., Suleman (Rep.)										
		8 Departure city or name of departure location										
	06/05/2023 Houston											
		9 Destina	ation city or name	e of destination location								
	06/05/2023	Dallas	;									
10) Means of transpor	tation	11 Purpose of tr	ravel (including name of	conference, seminar, or o	ther event)						
	Commercial Airp	olane	Nepalese E	Event								