

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00087369	<b>2 Total pages filed:</b> 191	
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Mr.	FIRST Karthik	MI	<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 01/17/2024
	NICKNAME	LAST Soora	SUFFIX	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2809 Sherwin Street  Houston, TX 77007		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt #      Amount
				Date Processed
				Date Imaged
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mr.	FIRST Rakshith	MI	
	NICKNAME Rocky	LAST Saligram	SUFFIX	
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 16819 Colony Terrace Drive  Sugarland, TX 77479		APT / SUITE #;	CITY; STATE; ZIP CODE
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE (713)	PHONE NUMBER 294-6619	EXTENSION	
<b>8 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
<b>9 PERIOD COVERED</b>	Month    Day    Year 07/01/2023	THROUGH	Month    Day    Year 12/31/2023	
<b>10 ELECTION</b>	ELECTION DATE Month    Day    Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>11 OFFICE</b>	OFFICE HELD (if any)		<b>12 OFFICE SOUGHT (if known)</b> State Senator Place Houston District 15	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Soora, Karthik (Mr.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00087369
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	
	<input type="checkbox"/> SPECIFIC		
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>		

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	93,464.19
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	119,966.00
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	113,910.66
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,000.00

**17 AFFIDAVIT**

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

Mr. Karthik Soora  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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<b>18 FILER NAME</b> Soora, Karthik (Mr.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00087369
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 93,464.19
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 10,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 119,566.00
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 400.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/84 Rpt: 4/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abby, Anderson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Aubrey, TX 76227	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) Liftoff Campaigns
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abby, Anderson <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Liftoff Campaigns
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adaya, Amina <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90064	Amount of Contribution (\$) \$2,800.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adrianna, Chrestopoulos <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) BloomBoard
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Adrianna, Chrestopoulos <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) BloomBoard

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/84 Rpt: 5/191
2 FILER NAME Soora, Karthik (Mr.)		3 Filer ID (Ethics Commission Filers) 00087369
4 Date 10/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aggarwal, Juhi	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Sugar Land, TX 77479	
8 Principal occupation / Job title (See Instructions) Data analyst		9 Employer (See Instructions) Shell
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aggarwal, Juhi	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Sugar Land, TX 77479	
Principal occupation / Job title (See Instructions) Data analyst		Employer (See Instructions) Shell
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aghi, Mukesh	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Washington, DC 20007	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) USISPF
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguirre, Yvonne	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Houston, TX 77009	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AguirreArtsGroup
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alauna, Curry	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Cypress, TX 77433	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/84 Rpt: 6/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alauna, Curry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cypress, TX 77433	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alband, Linda <hr/> Contributor address; City; State; Zip Code  Portland, OR 97220	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Nonprofit professional		Employer (See Instructions) HCAO
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alband, Linda <hr/> Contributor address; City; State; Zip Code  Portland, OR 97220	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Nonprofit professional		Employer (See Instructions) HCAO
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alison, Garahan <hr/> Contributor address; City; State; Zip Code  Addison, TX 75001	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Johnson and Johnson insurance
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alison, Garahan <hr/> Contributor address; City; State; Zip Code  Addison, TX 75001	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Johnson and Johnson insurance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/84 Rpt: 7/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amatulla, Contractor	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77449		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amatulla, Contractor	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Katy, TX 77449		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ambur, Manjula	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Yorktown, VA 23693		
Principal occupation / Job title (See Instructions) Information Tevhnology Manager		Employer (See Instructions) NASA
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ambur, Manjula	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Yorktown, VA 23693		
Principal occupation / Job title (See Instructions) Information Tevhnology Manager		Employer (See Instructions) NASA
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ameer, Ahmed	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Plano, TX 75024		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/84 Rpt: 8/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ameer, Ahmed <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	<b>7</b> Amount of Contribution (\$) <span style="float:right">\$10.00</span>
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) State
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Abby <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$) <span style="float:right">\$50.00</span>
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Liftoff Campaigns
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Abby <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$) <span style="float:right">\$50.00</span>
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Liftoff Campaigns
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ariana, Engles <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$) <span style="float:right">\$20.00</span>
Principal occupation / Job title (See Instructions) Healthcare Internal Consultant		Employer (See Instructions) Kelsey-Seybold
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ariana, Engles <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$) <span style="float:right">\$20.00</span>
Principal occupation / Job title (See Instructions) Healthcare Internal Consultant		Employer (See Instructions) Kelsey-Seybold



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/84 Rpt: 9/191
2 FILER NAME Soora, Karthik (Mr.)		3 Filer ID (Ethics Commission Filers) 00087369
4 Date 11/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashraf, Munib	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77005	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashraf, Munib	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77005	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asif, Saira	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Plano, TX 75025-4230	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aspandiar, Shiroy	Amount of Contribution (\$)  \$175.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94108	
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) NA
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aspandiar, Shiroy	Amount of Contribution (\$)  \$175.00
	Contributor address; City; State; Zip Code  San Francisco, CA 94108	
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/84 Rpt: 10/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aspandiar, Shiroy <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94108	<b>7</b> Amount of Contribution (\$)  \$175.00
<b>8</b> Principal occupation / Job title (See Instructions) Business owner		<b>9</b> Employer (See Instructions) NA
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aspandiar, Shiroy <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94108	Amount of Contribution (\$)  \$175.00
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) NA
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Awais, Sheikh <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-2625	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Star Team Intensive Care and Hospitalist
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Awais, Sheikh <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78230-2625	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Star Team Intensive Care and Hospitalist
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baker, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Inventure

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/84 Rpt: 11/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bakhtiari, Shadroo <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pleasanton, CA 94566	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batiste, Grace <hr/> Contributor address; City; State; Zip Code  New York, NY 11102	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Google, LLC
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batiste, Grace <hr/> Contributor address; City; State; Zip Code  New York, NY 11102	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Google, LLC
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Batiste, Grace <hr/> Contributor address; City; State; Zip Code  New York, NY 11102	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Google, LLC
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beck, Deborah <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77478	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/84 Rpt: 12/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beck, Deborah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77478	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bedi, Ranjana <hr/> Contributor address; City; State; Zip Code  Belliare, TX 77401	Amount of Contribution (\$)  \$51.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ben, Bovarnick <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ben, Bovarnick <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$149.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/84 Rpt: 13/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94115	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Product Manager		<b>9</b> Employer (See Instructions) PG&E
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$149.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) PG&E

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/84 Rpt: 14/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bovarnick, Ben	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94115		
<b>8</b> Principal occupation / Job title (See Instructions) Product Manager		<b>9</b> Employer (See Instructions) PG&E
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bratic, Catherine	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hogan Lovells
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bremer, Beth	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Strata Clean Energy
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bremer, Beth	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Chandler, AZ 85224		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Strata Clean Energy
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brogden, William	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Leander, TX 78641		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/84 Rpt: 15/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brooks, Trisha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Humble, TX 77346	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Admin		<b>9</b> Employer (See Instructions) Self
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullen, Levi <hr/> Contributor address; City; State; Zip Code  Willis, TX 77378	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullen, Levi <hr/> Contributor address; City; State; Zip Code  Willis, TX 77378	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bullen, Levi <hr/> Contributor address; City; State; Zip Code  Willis, TX 77378	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bush, Kevin <hr/> Contributor address; City; State; Zip Code  New Caney, TX 77357	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Kevin Bush

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/84 Rpt: 16/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/26/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cahill, Diana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Columbus, OH 43212	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) IT		<b>9</b> Employer (See Instructions) Leantaas
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cahill, Diana <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43212	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Leantaas
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cahill, Diana <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43212	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Leantaas
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cameron, Brad <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cameron, Brad <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/84 Rpt: 17/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Castro, Moira <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77080	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Educator		<b>9</b> Employer (See Instructions) CFISD
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Castro, Moira <hr/> Contributor address; City; State; Zip Code  Houston, TX 77080	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) CFISD
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cerino, Timothy <hr/> Contributor address; City; State; Zip Code  Hastings-On-Hudson, NY 10706	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) KPMG
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cerino, Timothy <hr/> Contributor address; City; State; Zip Code  Hastings-On-Hudson, NY 10706	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) KPMG
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chakrabarty, Anirban <hr/> Contributor address; City; State; Zip Code  League City, TX 77573	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/84 Rpt: 18/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chandna, Neha <hr/> <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapin, J. Alison <hr/> Contributor address; City; State; Zip Code  Houston, TX 77044	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Shalini <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94610	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Sutter Health
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Shivani <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$3,500.00
Principal occupation / Job title (See Instructions) Development		Employer (See Instructions) Kiva.org
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Shivani <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions) Development		Employer (See Instructions) Kiva.org

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/84 Rpt: 19/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/28/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Shivani <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$3,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Development		<b>9</b> Employer (See Instructions) Kiva.org
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Sumitra <hr/> Contributor address; City; State; Zip Code  Minneapolis, MN 55401	Amount of Contribution (\$)  \$45.00
Principal occupation / Job title (See Instructions) Research		Employer (See Instructions) Food Company
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Sutapa <hr/> Contributor address; City; State; Zip Code  Friendswood, TX 77546	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Circulation Clerk		Employer (See Instructions) City of Friendswood
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Sutapa <hr/> Contributor address; City; State; Zip Code  Friendswood, TX 77546	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Circulation Clerk		Employer (See Instructions) City of Friendswood
Date 08/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chatterjee, Sutapa <hr/> Contributor address; City; State; Zip Code  Friendswood, TX 77546	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Circulation Clerk		Employer (See Instructions) City of Friendswood

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/84 Rpt: 20/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cheena, Parvesh <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lakewood, CA 90712	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Actor		<b>9</b> Employer (See Instructions) Self
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cheena, Parvesh <hr/> Contributor address; City; State; Zip Code  Lakewood, CA 90712	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Self
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Childs, Staci Danielle <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sunnyside Legal
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Childs, Staci Danielle <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sunnyside Legal
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Childs, Staci Danielle <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sunnyside Legal

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/84 Rpt: 21/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chrestopoulos, Adrianna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Project manager		<b>9</b> Employer (See Instructions) BloomBoard
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chrestopoulos, Adrianna <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) BloomBoard
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chrestopoulos, Adrianna <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions) BloomBoard
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Harry <hr/> Contributor address; City; State; Zip Code  Boulder Creek, CA 95006	Amount of Contribution (\$)  \$4.17
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clark, Harry <hr/> Contributor address; City; State; Zip Code  Boulder Creek, CA 95006	Amount of Contribution (\$)  \$4.17
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/84 Rpt: 22/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Clarke, Theresa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions) Wright Abshire
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland, Harold <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Copeland, Harold <hr/> Contributor address; City; State; Zip Code  Houston, TX 77263	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Criss, Susan <hr/> Contributor address; City; State; Zip Code  Salado, TX 76571	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Criss & Rousseau Law Firm.L.L.P.
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dakshinamoorthy, Subramanyan <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Nexperia GmbH

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/84 Rpt: 23/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Susan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Little Rock, AR 72223	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) teacher		<b>9</b> Employer (See Instructions) Lrsd
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Delaney, Susan <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Lrsd
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denesh, Khullar <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72211	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Dentalways
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denesh, Khullar <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72211	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Dentalways
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Desai, Anand <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Anand Desai

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/84 Rpt: 24/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deshpande, Parag <hr/> <b>6</b> Contributor address; City; State; Zip Code  Conway, AR 72034	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) IT		<b>9</b> Employer (See Instructions) Acxiom
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deshpande, Parag <hr/> Contributor address; City; State; Zip Code  Conway, AR 72034	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Acxiom
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diana, Cahill <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43212	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Leantaas
Date 11/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diana, Cahill <hr/> Contributor address; City; State; Zip Code  Columbus, OH 43212	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Leantaas
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elizabeth, Ihde <hr/> Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) United



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/84 Rpt: 25/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Elizabeth, Ihde <hr/> <b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77388	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Pilot		<b>9</b> Employer (See Instructions) United
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellen, Brantley <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72205	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellen, Brantley <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72205	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellen, Kuo <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Self
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellen, Kuo <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/84 Rpt: 26/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Enav, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096	<b>7</b> Amount of Contribution (\$)  \$70.00
<b>8</b> Principal occupation / Job title (See Instructions) Service Coordinator		<b>9</b> Employer (See Instructions) Group 1 Automotive
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Enav, David <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Service Coordinator		Employer (See Instructions) Group 1 Automotive
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Engles, Ariana <hr/> Contributor address; City; State; Zip Code  Leander, TX 78641	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Healthcare Internal Consultant		Employer (See Instructions) Kelsey-Seybold
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) FROST <hr/> Contributor address; City; State; Zip Code  BELLAIRE, TX 77401	Amount of Contribution (\$)  \$7.17
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fernanda, Pierre <hr/> Contributor address; City; State; Zip Code  Houston, TX 77041	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Spring Branch ISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/84 Rpt: 27/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fernanda, Pierre	<b>7</b> Amount of Contribution (\$) \$200.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77041		
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Spring Branch ISD
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) French, Chitra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Pleasanton, CA 94566		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Chitra French
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) French, Chitra	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Pleasanton, CA 94566		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) Chitra French
Date 11/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost	Amount of Contribution (\$) \$5.14
Contributor address; City; State; Zip Code  Bellaire, TX 77401		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost	Amount of Contribution (\$) \$8.81
Contributor address; City; State; Zip Code  Bellaire, TX 77401		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/84 Rpt: 28/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/14/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Bank <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bellaire, TX 77401	<b>7</b> Amount of Contribution (\$)  \$4.64
<b>8</b> Principal occupation / Job title (See Instructions) company		<b>9</b> Employer (See Instructions) company
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Bank <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$6.12
Principal occupation / Job title (See Instructions) company		Employer (See Instructions) FROST
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frost, Bank <hr/> Contributor address; City; State; Zip Code  Belliare, TX 77401	Amount of Contribution (\$)  \$7.40
Principal occupation / Job title (See Instructions) company		Employer (See Instructions) FROST
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Funderberg, Margaret <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Velma <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78541	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/84 Rpt: 29/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garza, Velma <hr/> <b>6</b> Contributor address; City; State; Zip Code  Edinburg, TX 78541	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ghafoor, Sara <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gopalan, Partha <hr/> Contributor address; City; State; Zip Code  Flower Mound, TX 75022	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Principal Owner of Adyan Consulting llc		Employer (See Instructions) Self employed
Date 10/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gopalan, Partha <hr/> Contributor address; City; State; Zip Code  Flower Mound, TX 75022	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Principal Owner of Adyan Consulting llc		Employer (See Instructions) Self employed
Date 11/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grace, Batiste <hr/> Contributor address; City; State; Zip Code  New York, NY 11102	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Marketing Manager		Employer (See Instructions) Google, LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/84 Rpt: 30/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace, Batiste	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  New York, NY 11102		
<b>8</b> Principal occupation / Job title (See Instructions) Marketing Manager		<b>9</b> Employer (See Instructions) Google, LLC
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, John Weldon	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jones Granger Lawfirm
Date 10/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, John Weldon	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jones Granger Lawfirm
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guha, Sushovan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Gastroenterologist		Employer (See Instructions) UT Health Science Center, Houston
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gunasekaran, Aarthi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Sugar Land, TX 77479		
Principal occupation / Job title (See Instructions) Legal Department Manager		Employer (See Instructions) Acacia Center for Justice

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/84 Rpt: 31/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gupta, Kavita <hr/> <b>6</b> Contributor address; City; State; Zip Code  SUGARLAND, TX 77479	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Texas Children's Pediatrics
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gupta, Kriti <hr/> Contributor address; City; State; Zip Code  Washington DC, DC 20010	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Memorial Hermann Health
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gusto <hr/> Contributor address; City; State; Zip Code  SAN FRancisco, CA 94107	Amount of Contribution (\$)  \$1,207.02
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HEB <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$7.96
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Han, Harry <hr/> Contributor address; City; State; Zip Code  Boston, MA 02215	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Beth Israel Deaconess Medical Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/84 Rpt: 32/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Han, Harry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boston, MA 12345	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Beth Israel Deaconess Medical Center
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hardy, Keith <hr/> Contributor address; City; State; Zip Code  Pensacola, FL 32526	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Campaign Profesional		Employer (See Instructions) Karthik for Texas
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris County DEMOCRATIC PARTY <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hart, Andrey <hr/> Contributor address; City; State; Zip Code  Herndon, VA 20171	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Na
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hart, Andrey <hr/> Contributor address; City; State; Zip Code  Herndon, VA 20171	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Na



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/84 Rpt: 33/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harvey, Lonnie	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007		
<b>8</b> Principal occupation / Job title (See Instructions) Compliance Director		<b>9</b> Employer (See Instructions) WM
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hasan, Kulsoom	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77018		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Oil and Gas
Date 12/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hassin, Bryan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Boulder, CO 80304		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Dexmat
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hetrick, Brad	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Cottage Grove, WI 53527		
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Exact Sciences
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hetrick, Brad	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Cottage Grove, WI 53527		
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Exact Sciences

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/84 Rpt: 34/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himansu, Vyas	<b>7</b> Amount of Contribution (\$)  \$151.00
<b>6</b> Contributor address; City; State; Zip Code  Little Rock, AR 72212		
<b>8</b> Principal occupation / Job title (See Instructions) Lab Manager		<b>9</b> Employer (See Instructions) FDA
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himansu, Vyas	Amount of Contribution (\$)  \$151.00
Contributor address; City; State; Zip Code  Little Rock, AR 72212		
Principal occupation / Job title (See Instructions) Lab Manager		Employer (See Instructions) FDA
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffer, Alex	Amount of Contribution (\$)  \$248.00
Contributor address; City; State; Zip Code  San Francisco, CA 94111		
Principal occupation / Job title (See Instructions) Renewable Energy Developer		Employer (See Instructions) Pattern Energy
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffer, Alex	Amount of Contribution (\$)  \$248.00
Contributor address; City; State; Zip Code  San Francisco, CA 94111		
Principal occupation / Job title (See Instructions) Renewable Energy Developer		Employer (See Instructions) Pattern Energy
Date 11/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holly, Andrews	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Ferndale, WA 98248		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/84 Rpt: 35/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Holly, Andrews <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ferndale, WA 98248	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Husain, Athar <hr/> Contributor address; City; State; Zip Code  Oak Brook, IL 60523	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Husain, Athar <hr/> Contributor address; City; State; Zip Code  Oak Brook, IL 60523	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Indo American IMPACT <hr/> Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ishaq, Amina <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77469	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Licensed Clinical Social Worker		Employer (See Instructions) Self Employed/ Jannah Therapy & Healing Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/84 Rpt: 36/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Istiak, Ahmed <hr/> <b>6</b> Contributor address; City; State; Zip Code  THE COLONY, TX 75056	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Bank of America
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Istiak, Ahmed <hr/> Contributor address; City; State; Zip Code  THE COLONY, TX 75056	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Bank of America
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaber, Noor <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Emergency Physician		Employer (See Instructions) Jaber Medical
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jacilet, Griffin <hr/> Contributor address; City; State; Zip Code  Missouri city, TX 77459	Amount of Contribution (\$)  \$451.25
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaruhar, Shrimant <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94102	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Tech		Employer (See Instructions) Hitachi Vantara

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/84 Rpt: 37/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaruhar, Shrimant ..... <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94102	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Tech		<b>9</b> Employer (See Instructions) Hitachi Vantara
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jindal, Ashutosh ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Genentech
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jindal, Ashutosh ..... Contributor address; City; State; Zip Code  San Francisco, CA 94103	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Genentech
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jyothi, Kaliki ..... Contributor address; City; State; Zip Code  Encinitas, CA 92024	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jyothi, Kaliki ..... Contributor address; City; State; Zip Code  Encinitas, CA 92024	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/84 Rpt: 38/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaliki, Jyothi	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Encinitas, CA 92024		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaliki, Jyothi	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Encinitas, CA 92024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaliki, Jyothi	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Encinitas, CA 92024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kamran, Alam	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Katy, TX 77494		
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) self
Date 11/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kamran, Alam	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Katy, TX 77494		
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 36/84 Rpt: 39/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaplan, Lee	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77019		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Kaplan & Associates
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katragadda, Ramakrishna	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Belton, TX 76513		
Principal occupation / Job title (See Instructions) Senior Consultant		Employer (See Instructions) CGI
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Katragadda, Ramakrishna	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Belton, TX 76513		
Principal occupation / Job title (See Instructions) Senior Consultant		Employer (See Instructions) CGI
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerr, Garland	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Blackburn & Carter, PC
Date 10/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kerr, Garland	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Blackburn & Carter, PC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 37/84 Rpt: 40/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kevin, McGregor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94602	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Client success manager		<b>9</b> Employer (See Instructions) Oracle
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kevin, McGregor <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94602	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Client success manager		Employer (See Instructions) Oracle
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khan, Niloufer <hr/> Contributor address; City; State; Zip Code  South Pasadena, CA 91030	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) City of Hope
Date 10/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khan, Niloufer <hr/> Contributor address; City; State; Zip Code  South Pasadena, CA 91030	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) City of Hope
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khan, Zafir <hr/> Contributor address; City; State; Zip Code  Houston, TX 77077	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) product manager		Employer (See Instructions) meta



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 38/84 Rpt: 41/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Khawaja, Omar <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Law office of Omar khawaja
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kim, Minkyung <hr/> Contributor address; City; State; Zip Code  Berkeley Heights, NJ 07922	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Product Marketing Manager		Employer (See Instructions) Verizon
Date 10/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kim, Minkyung <hr/> Contributor address; City; State; Zip Code  Berkeley Heights, NJ 12345	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Product Marketing Manager		Employer (See Instructions) Verizon
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kneebone, Ron <hr/> Contributor address; City; State; Zip Code  Albuquerque, NM 87114	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kneebone, Ron <hr/> Contributor address; City; State; Zip Code  Albuquerque, NM 87114	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 39/84 Rpt: 42/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/09/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Konduru, Nikil <hr/> <b>6</b> Contributor address; City; State; Zip Code  Philadelphia, PA 19103	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) GM		<b>9</b> Employer (See Instructions) Startup
Date 10/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Konduru, Nikil <hr/> Contributor address; City; State; Zip Code  Philadelphia, PA 19103	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Startup
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kragie, Alex <hr/> Contributor address; City; State; Zip Code  Washington, DC 20007	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Sunstone Credit
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kragie, Alex <hr/> Contributor address; City; State; Zip Code  Washington, DC 20007	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Sunstone Credit
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuns, Karoli <hr/> Contributor address; City; State; Zip Code  Camarillo, CA 93010	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 40/84 Rpt: 43/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuns, Karoli	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Camarillo, CA 93010		
<b>8</b> Principal occupation / Job title (See Instructions) Editor		<b>9</b> Employer (See Instructions) Self
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kurani, Shrina	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Riverside, CA 92503		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) SNØCAP
Date 10/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kurani, Shrina	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code  Riverside, CA 92503		
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) SNØCAP
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Patrick	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Santa Clara, CA 95050		
Principal occupation / Job title (See Instructions) truck driver		Employer (See Instructions) Republic Services
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lamb, Patrick	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Santa Clara, CA 95050		
Principal occupation / Job title (See Instructions) truck driver		Employer (See Instructions) Republic Services

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 41/84 Rpt: 44/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lazaro, Mohamed <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78258	<b>7</b> Amount of Contribution (\$)  \$3.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Hispanic Food Distributors
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lazaro, Mohamed <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78258	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Hispanic Food Distributors
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levi, Bullen <hr/> Contributor address; City; State; Zip Code  Willis, TX 77378	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levi, Bullen <hr/> Contributor address; City; State; Zip Code  Willis, TX 77378	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 42/84 Rpt: 45/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94612	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Associate Partner		<b>9</b> Employer (See Instructions) Promise Venture Studio
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio
Date 07/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio
Date 10/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 43/84 Rpt: 46/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lewis, Vance <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94612	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Associate Partner		<b>9</b> Employer (See Instructions) Promise Venture Studio
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lyons, Phillip <hr/> Contributor address; City; State; Zip Code  Conroe, TX 77302	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Academic Dean		Employer (See Instructions) Sam Houston State University
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacDougall, Karen <hr/> Contributor address; City; State; Zip Code  KELSEYVILLE, CA 95451	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) MacDougall, Karen <hr/> Contributor address; City; State; Zip Code  KELSEYVILLE, CA 95451	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Manisundaram, Arvind <hr/> Contributor address; City; State; Zip Code  Ridgeland, MS 39157	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) UT

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 44/84 Rpt: 47/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Manisundaram, Arvind	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Ridgeland, MS 39157		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) UT
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martha, Brantley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  New York, NY 10014		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Kiva
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martha, Brantley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  New York, NY 10014		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Kiva
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maruthy, Sudha	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Little Rock, AR 72211		
Principal occupation / Job title (See Instructions) BA		Employer (See Instructions) Centene
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maruthy, Sudha	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Little Rock, AR 72211		
Principal occupation / Job title (See Instructions) BA		Employer (See Instructions) Centene

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 45/84 Rpt: 48/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mauter, Melissa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Chicago, IL 60610	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Director of Product Management		<b>9</b> Employer (See Instructions) Granicus
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mauter, Melissa <hr/> Contributor address; City; State; Zip Code  Chicago, IL 60610	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Director of Product Management		Employer (See Instructions) Granicus
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCollum, William <hr/> Contributor address; City; State; Zip Code  Sherwood, AR 72120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administrative Specialist		Employer (See Instructions) McLarty Companies
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCollum, William <hr/> Contributor address; City; State; Zip Code  Sherwood, AR 72120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administrative Specialist		Employer (See Instructions) McLarty Companies
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McCollum, William <hr/> Contributor address; City; State; Zip Code  Sherwood, AR 72120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administrative Specialist		Employer (See Instructions) McLarty Companies



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 46/84 Rpt: 49/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehra, Maneesh <hr/> <b>6</b> Contributor address; City; State; Zip Code  Bellaire, TX 77401	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Owner		<b>9</b> Employer (See Instructions) bumblebee logistics
Date 10/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehra, Maneesh <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) bumblebee logistics
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehta, Sunil <hr/> Contributor address; City; State; Zip Code  Saratoga, CA 95070	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehta, Sunil <hr/> Contributor address; City; State; Zip Code  Saratoga, CA 95070	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 07/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehtani, Nicky <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94107	Amount of Contribution (\$)  \$149.00
Principal occupation / Job title (See Instructions) Postdoc		Employer (See Instructions) UCSF

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 47/84 Rpt: 50/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mehtani, Nicky <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94107	<b>7</b> Amount of Contribution (\$)  \$149.00
<b>8</b> Principal occupation / Job title (See Instructions) Postdoc		<b>9</b> Employer (See Instructions) UCSF
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miles, Michael <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005-1314	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mitchell, Mycal <hr/> Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moghazy, Sharief <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Self
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mongia, Mihir <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Postdoc		Employer (See Instructions) Stanford

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 48/84 Rpt: 51/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/12/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monty, Jacob <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77024	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Monty & Ramirez
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulherkar, Andrew <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94610	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Pacific Gas & Electric
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mulherkar, Andrew <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94610	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Pacific Gas & Electric
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mungo, David <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11216	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mungo, David <hr/> Contributor address; City; State; Zip Code  Brooklyn, NY 11216	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Deloitte

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 49/84 Rpt: 52/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Munib, Ashraf <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77005	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Munib, Ashraf <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nag, Abhishek <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030	Amount of Contribution (\$)  \$298.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Google
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nag, Abhishek <hr/> Contributor address; City; State; Zip Code  Houston, TX 77030	Amount of Contribution (\$)  \$298.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Google
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nanavatty, Rushad <hr/> Contributor address; City; State; Zip Code  Dulles, VA 20189	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Environment		Employer (See Instructions) RMI

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 50/84 Rpt: 53/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/17/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nancy, Hampton <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nancy, Hampton <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nannapaneni, Mohan <hr/> Contributor address; City; State; Zip Code  Southborough, MA 12345	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions) Sigma Systems Inc
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Narcisse, Jude <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584-2529	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Narula, Trishna <hr/> Contributor address; City; State; Zip Code  Cupertino, CA 95014	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Resident Psychiatrist		Employer (See Instructions) Stanford Medicine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 51/84 Rpt: 54/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Narula, Trishna <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cupertino, CA 95014	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Resident Psychiatrist		<b>9</b> Employer (See Instructions) Stanford Medicine
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nevill, Charles <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) GE
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patel, Roshni <hr/> Contributor address; City; State; Zip Code  Fort Wayne, IN 46845	Amount of Contribution (\$)  \$101.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) WAE
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patel, Roshni <hr/> Contributor address; City; State; Zip Code  Fort Wayne, IN 46845	Amount of Contribution (\$)  \$101.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) WAE
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peters, Crispin <hr/> Contributor address; City; State; Zip Code  Rochester, NY 14621	Amount of Contribution (\$)  \$1.67
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 52/84 Rpt: 55/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peters, Crispin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Rochester, NY 14621	<b>7</b> Amount of Contribution (\$)  \$1.67
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Daydre <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98225	Amount of Contribution (\$)  \$1.67
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Daydre <hr/> Contributor address; City; State; Zip Code  Bellingham, WA 98225	Amount of Contribution (\$)  \$1.67
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pooja, Khatri <hr/> Contributor address; City; State; Zip Code  Austin, TX 78717-4204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pooja, Khatri <hr/> Contributor address; City; State; Zip Code  Austin, TX 78717-4204	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 53/84 Rpt: 56/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Jenni	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Rockville, MD 20850		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Covington & Burling
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Potter, Jenni	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Rockville, MD 20850		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Covington & Burling
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prasanna, Sandeep	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Washington, DC 20010		
Principal occupation / Job title (See Instructions) Counsel		Employer (See Instructions) US House of Representatives
Date 12/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Price, Melanye	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77021		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Prairie View A&M
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prilliman, Angela	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76107		
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Hella Cool Ventures



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 54/84 Rpt: 57/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prilliman, Angela <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76107	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Partner		<b>9</b> Employer (See Instructions) Hella Cool Ventures
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pruss, James <hr/> Contributor address; City; State; Zip Code  Marietta, GA 30067	Amount of Contribution (\$)  \$8.33
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pruss, James <hr/> Contributor address; City; State; Zip Code  Marietta, GA 30067	Amount of Contribution (\$)  \$8.33
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Qadri, Zohaib <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Austin
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Qureshi, Waqar <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Climate Advocate		Employer (See Instructions) None

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 55/84 Rpt: 58/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/07/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Qureshi, Waqar	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006		
<b>8</b> Principal occupation / Job title (See Instructions) Climate Advocate		<b>9</b> Employer (See Instructions) None
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Qureshi, Waqas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77062		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Houston Methodist
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) REYNOLDS, ANN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) REYNOLDS, ANN	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rahman, Hmmasudur	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retail		Employer (See Instructions) Raymas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 56/84 Rpt: 59/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramaswami, Ashwin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Johns Creek, GA 30022	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramaswami, Ashwin <hr/> Contributor address; City; State; Zip Code  Johns Creek, GA 30022	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Raturi, Anusha <hr/> Contributor address; City; State; Zip Code  Boston, MA 02114	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Accenture
Date 10/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Raturi, Anusha <hr/> Contributor address; City; State; Zip Code  Boston, MA 12345	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Accenture
Date 11/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ravi, Patel <hr/> Contributor address; City; State; Zip Code  Woodmere, NY 11598	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 57/84 Rpt: 60/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/08/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ravi, Patel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Woodmere, NY 11598	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Razi, Asaduddin <hr/> Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) ExxonMobil
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Razi, Asaduddin <hr/> Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) ExxonMobil
Date 11/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Razi, Asaduddin <hr/> Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) ExxonMobil
Date 11/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Razi, Asaduddin <hr/> Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) ExxonMobil

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 58/84 Rpt: 61/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/03/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reddick, Nicholas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Monterey, CA 93940	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Willkie Farr & Gallagher
Date 07/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reddick, Nicholas <hr/> Contributor address; City; State; Zip Code  Monterey, CA 93940	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Willkie Farr & Gallagher
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhem, William <hr/> Contributor address; City; State; Zip Code  New York, NY 11226	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhem, William <hr/> Contributor address; City; State; Zip Code  New York, NY 11226	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rhodes, Joshua <hr/> Contributor address; City; State; Zip Code  Austin, TX 78741	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Research Scientist		Employer (See Instructions) University of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 59/84 Rpt: 62/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, prudencio	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77070		
<b>8</b> Principal occupation / Job title (See Instructions) Ups package handlers		<b>9</b> Employer (See Instructions) U.P.S
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, prudencio	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77070		
Principal occupation / Job title (See Instructions) Ups package handlers		Employer (See Instructions) U.P.S
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rifkin, Jon	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code  Woostock VLY, CT 06282-2703		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rifkin, Jon	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code  Woostock VLY, CT 12345		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roney, Merle	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Laredo, TX 78041		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 60/84 Rpt: 63/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/01/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rufi, Natarajan	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007		
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Investor		<b>9</b> Employer (See Instructions) Mint Homes Inc.
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rufi, Natarajan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) Real Estate Investor		Employer (See Instructions) Mint Homes Inc.
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, Juan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Carlos, CA 94070		
Principal occupation / Job title (See Instructions) Strategy & Operations Manager		Employer (See Instructions) Google
Date 10/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, Juan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Carlos, CA 94070		
Principal occupation / Job title (See Instructions) Strategy & Operations Manager		Employer (See Instructions) Google
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salem, M. Emad	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Euless, TX 76040		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Sellstate Metro Realty

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 61/84 Rpt: 64/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salem, Naimeh <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77096	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Naimeh Salem & associates
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Salhotra, Poonam <hr/> Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Houston-Downtown
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Saligram, Rakshith <hr/> Contributor address; City; State; Zip Code  No City Provided, TX 77479	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Political consultant		Employer (See Instructions) Sean Teare for DA
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanober, Syed <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) LGM
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sanober, Syed <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75240	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) LGM



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 62/84 Rpt: 65/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sarkar, Arindam <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Harris Health
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schmidt, Craig <hr/> Contributor address; City; State; Zip Code  anaconda, MT 59711	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schmidt, Craig <hr/> Contributor address; City; State; Zip Code  anaconda, MT 59711	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Selam, Nicola <hr/> Contributor address; City; State; Zip Code  Manor, TX 78653	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Investment associate		Employer (See Instructions) KFF
Date 11/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Selam, Nicola <hr/> Contributor address; City; State; Zip Code  Manor, TX 78653	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Investment associate		Employer (See Instructions) KFF

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 63/84 Rpt: 66/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shah, Ravi <hr/> <b>6</b> Contributor address; City; State; Zip Code  HOUSTON, TX 77008	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Ophthalmologist		<b>9</b> Employer (See Instructions) Houston Eye Associates
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shah, Vinit <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76244	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaheen, Shahzaib <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Occidental Petroleum
Date 11/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shaheen, Shahzaib <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Occidental Petroleum
Date 12/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharon, McNerney <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) EY

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 64/84 Rpt: 67/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/02/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sharon, McNERNEY <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) EY
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shauk, Zain <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Dream Harvest Farming Company
Date 07/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shauk, Zain <hr/> Contributor address; City; State; Zip Code  Houston, TX 77027	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Dream Harvest Farming Company
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shehabuddin, Elora <hr/> Contributor address; City; State; Zip Code  Berkeley, CA 94707	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UC Berkeley
Date 11/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shelley, Hilton Pace <hr/> Contributor address; City; State; Zip Code  Weatherford, TX 76085	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) writer/designer		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 65/84 Rpt: 68/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/16/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelley, Hilton Pace <hr/> <b>6</b> Contributor address; City; State; Zip Code  Weatherford, TX 76085	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) writer/designer		<b>9</b> Employer (See Instructions) self
<b>Date</b> 07/05/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheng, Kai <hr/> <b>Contributor address; City; State; Zip Code</b>  San Francisco, CA 94105	<b>Amount of Contribution (\$)</b>  \$20.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 07/05/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheng, Kai <hr/> <b>Contributor address; City; State; Zip Code</b>  San Francisco, CA 94105	<b>Amount of Contribution (\$)</b>  \$20.00
<b>Principal occupation / Job title (See Instructions)</b> Not Employed		<b>Employer (See Instructions)</b> Not Employed
<b>Date</b> 12/25/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shewakramani, Aparna <hr/> <b>Contributor address; City; State; Zip Code</b>  Bellaire, TX 77401	<b>Amount of Contribution (\$)</b>  \$10.00
<b>Principal occupation / Job title (See Instructions)</b> Writer		<b>Employer (See Instructions)</b> Aparna shewakramani
<b>Date</b> 12/31/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Shewakramani, Aparna <hr/> <b>Contributor address; City; State; Zip Code</b>  Bellaire, TX 77401	<b>Amount of Contribution (\$)</b>  \$35.00
<b>Principal occupation / Job title (See Instructions)</b> Writer		<b>Employer (See Instructions)</b> Aparna shewakramani

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 66/84 Rpt: 69/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/04/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shiroy, Aspandiar	<b>7</b> Amount of Contribution (\$) \$175.00
<b>6</b> Contributor address; City; State; Zip Code  San Francisco, CA 94108		
<b>8</b> Principal occupation / Job title (See Instructions) Business owner		<b>9</b> Employer (See Instructions) NA
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shiroy, Aspandiar	Amount of Contribution (\$) \$175.00
Contributor address; City; State; Zip Code  San Francisco, CA 94108		
Principal occupation / Job title (See Instructions) Business owner		Employer (See Instructions) NA
Date 11/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sidra, Mahmood	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  Williamstown, MA 01267		
Principal occupation / Job title (See Instructions) Chaplain		Employer (See Instructions) Williams College
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Singh, Pomila	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77059		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Gopaldaswamy	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Cary, NC 27513		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 67/84 Rpt: 70/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Karthik	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007		
<b>8</b> Principal occupation / Job title (See Instructions) Development Manager		<b>9</b> Employer (See Instructions) Pattern Energy
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Karthik	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) Development Manager		Employer (See Instructions) Pattern Energy
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Siva	Amount of Contribution (\$)  \$20,000.00
Contributor address; City; State; Zip Code  Little Rock, AR 72223		
Principal occupation / Job title (See Instructions) Global Systems Manager		Employer (See Instructions) Almatis
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Siva	Amount of Contribution (\$)  \$2,000.00
Contributor address; City; State; Zip Code  Little Rock, AR 72223		
Principal occupation / Job title (See Instructions) Global Systems Manager		Employer (See Instructions) Almatis
Date 12/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Siva	Amount of Contribution (\$)  \$900.00
Contributor address; City; State; Zip Code  Little Rock, AR 72223		
Principal occupation / Job title (See Instructions) Global Systems Manager		Employer (See Instructions) Almatis

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 68/84 Rpt: 71/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/22/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Soora, Siva <hr/> <b>6</b> Contributor address; City; State; Zip Code  Little Rock, AR 72223	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Global Systems Manager		<b>9</b> Employer (See Instructions) Almatis
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staci Danielle, Childs <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sunnyside Legal
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Staci Danielle, Childs <hr/> Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sunnyside Legal
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stratten, Cheryl <hr/> Contributor address; City; State; Zip Code  Denver, CO 80211	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stratten, Cheryl <hr/> Contributor address; City; State; Zip Code  Denver, CO 80211	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 69/84 Rpt: 72/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/11/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Studer, Seth	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008		
<b>8</b> Principal occupation / Job title (See Instructions) Developer		<b>9</b> Employer (See Instructions) Ecoplexus Inc
Date 07/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Studer, Seth	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Houston, TX 77008		
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Ecoplexus Inc
Date 12/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sufi, Hassan	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Seattle, WA 98121		
Principal occupation / Job title (See Instructions) Software Engineer II		Employer (See Instructions) Microsoft
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Summer, Hasan	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Flix Brewhouse
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Summer, Hasan	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Georgetown, TX 78626		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Flix Brewhouse



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 70/84 Rpt: 73/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sundararajan, Miel <hr/> <b>6</b> Contributor address; City; State; Zip Code  Seattle, WA 98118	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) UW
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Surajit, Bose <hr/> Contributor address; City; State; Zip Code  East Palo Alto, CA 94303	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Surajit, Bose <hr/> Contributor address; City; State; Zip Code  East Palo Alto, CA 94303	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suresh, Swetha <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30319	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Center for Victims of Torture
Date 10/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Suresh, Swetha <hr/> Contributor address; City; State; Zip Code  Atlanta, GA 30319	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Center for Victims of Torture

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 71/84 Rpt: 74/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swick, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Entrepreneur		<b>9</b> Employer (See Instructions) Entrepreneur
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Syed Hasnain Haider, Rizvi <hr/> Contributor address; City; State; Zip Code  Katy, TX 77493	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agile Coach		Employer (See Instructions) Apex
Date 12/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Syed Hasnain Haider, Rizvi <hr/> Contributor address; City; State; Zip Code  Katy, TX 77493	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agile Coach		Employer (See Instructions) Apex
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sylwester, Andrew <hr/> Contributor address; City; State; Zip Code  Aloha, OR 97006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) OHSU
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sylwester, Andrew <hr/> Contributor address; City; State; Zip Code  Aloha, OR 97006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) OHSU

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 72/84 Rpt: 75/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Talib, Dhanji <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sugarland, TX 77478-4211	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Accountant		<b>9</b> Employer (See Instructions) Rhythm energy
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Talib, Dhanji <hr/> Contributor address; City; State; Zip Code  Sugarland, TX 77478-4211	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Rhythm energy
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson-Shriver, Mary <hr/> Contributor address; City; State; Zip Code  Madison, WI 53704	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Academic Advisor		Employer (See Instructions) University of Wisconsin
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Toussaint, Webster <hr/> Contributor address; City; State; Zip Code  Washington, DC 20012	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engagement Manager		Employer (See Instructions) DC Public Schools
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Toussaint, Webster <hr/> Contributor address; City; State; Zip Code  Washington, DC 20012	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engagement Manager		Employer (See Instructions) DC Public Schools

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 73/84 Rpt: 76/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tovar, Margarita <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77055	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Education		<b>9</b> Employer (See Instructions) Public school district
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tullo, Debra <hr/> Contributor address; City; State; Zip Code  Gilbert, AZ 85298	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Customer service		Employer (See Instructions) Pylam
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) U-Kiu, Aisha <hr/> Contributor address; City; State; Zip Code  Irving, TX 75039	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Recruiter		Employer (See Instructions) Robert Half
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Umar, Saba <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77407	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Case manager		Employer (See Instructions) FBC
Date 11/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Umar, Saba <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77407	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Case manager		Employer (See Instructions) FBC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 74/84 Rpt: 77/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Uppal, Jayson <hr/> <b>6</b> Contributor address; City; State; Zip Code  Boston, MA 07701	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Director		<b>9</b> Employer (See Instructions) PosiGen
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Uppal, Jayson <hr/> Contributor address; City; State; Zip Code  Boston, MA 12345	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) PosiGen
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valerie, Esparza <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) UT Austin
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valerie, Esparza <hr/> Contributor address; City; State; Zip Code  Austin, TX 78758	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) UT Austin
Date 10/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Dam, Denise <hr/> Contributor address; City; State; Zip Code  Anchorage, AK 99502	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 75/84 Rpt: 78/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Dam, Denise <hr/> <b>6</b> Contributor address; City; State; Zip Code  Anchorage, AK 99502	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) none
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Skike, Dave <hr/> Contributor address; City; State; Zip Code  Hillsborough, NC 27278	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Skike, Dave <hr/> Contributor address; City; State; Zip Code  Hillsborough, NC 27278	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vance, Lewis <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio
Date 11/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vance, Lewis <hr/> Contributor address; City; State; Zip Code  Oakland, CA 94612	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Associate Partner		Employer (See Instructions) Promise Venture Studio

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 76/84 Rpt: 79/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/31/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vasisht, Anup <hr/> <b>6</b> Contributor address; City; State; Zip Code  Winter park, FL 32789	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Verma, Neal <hr/> Contributor address; City; State; Zip Code  Middleburg, FL 32068	Amount of Contribution (\$)  \$16.67
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Affordable Marijuana License
Date 10/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Verma, Neal <hr/> Contributor address; City; State; Zip Code  Middleburg, FL 32068	Amount of Contribution (\$)  \$16.67
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Affordable Marijuana License
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walchuk, Andrew <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94117	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Morrison Foerster
Date 10/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walters, Justin <hr/> Contributor address; City; State; Zip Code  Richmond, TX 77406	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Qcells USA Corp

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 77/84 Rpt: 80/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walters, Justin <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77406	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Qcells USA Corp
<b>Date</b> 11/07/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waqar, Qureshi <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77006	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Climate Advocate		<b>Employer (See Instructions)</b> None
<b>Date</b> 11/07/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waqar, Qureshi <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77006	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Climate Advocate		<b>Employer (See Instructions)</b> None
<b>Date</b> 12/31/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watson, Sarah <hr/> <b>Contributor address; City; State; Zip Code</b>  Ridgewood, NJ 12345	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Product Manager		<b>Employer (See Instructions)</b> JPMorgan Chase
<b>Date</b> 12/31/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watters, Jeff <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77006	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Gray Reed & McGraw LLP



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 78/84 Rpt: 81/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weber, David <hr/> <b>6</b> Contributor address; City; State; Zip Code  Avon, CT 06001	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Portfolio Manager		<b>9</b> Employer (See Instructions) HIMCO
Date 10/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weber, David <hr/> Contributor address; City; State; Zip Code  Avon, CT 12345	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Portfolio Manager		Employer (See Instructions) HIMCO
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Webster, Toussaint <hr/> Contributor address; City; State; Zip Code  Washington, DC 20012	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engagement Manager		Employer (See Instructions) DC Public Schools
Date 10/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Webster, Toussaint <hr/> Contributor address; City; State; Zip Code  Washington, DC 20012	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engagement Manager		Employer (See Instructions) DC Public Schools
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Webster, Toussaint <hr/> Contributor address; City; State; Zip Code  Washington, DC 20012	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Engagement Manager		Employer (See Instructions) DC Public Schools

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 79/84 Rpt: 82/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whipple, Terry <hr/> <b>6</b> Contributor address; City; State; Zip Code  Drain, OR 97435	<b>7</b> Amount of Contribution (\$)  \$83.33
<b>8</b> Principal occupation / Job title (See Instructions) owner		<b>9</b> Employer (See Instructions) bear creek timber company
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Whipple, Terry <hr/> Contributor address; City; State; Zip Code  Drain, OR 97435	Amount of Contribution (\$)  \$83.33
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) bear creek timber company
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) William, McCollum <hr/> Contributor address; City; State; Zip Code  Sherwood, AR 72120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administrative Specialist		Employer (See Instructions) McLarty Companies
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) William, McCollum <hr/> Contributor address; City; State; Zip Code  Sherwood, AR 72120	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administrative Specialist		Employer (See Instructions) McLarty Companies
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Alyssa <hr/> Contributor address; City; State; Zip Code  Keller, TX 76248	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 80/84 Rpt: 83/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/06/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrzesniewski, Amy <hr/> <b>6</b> Contributor address; City; State; Zip Code  New Haven, CT 06511	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) University of Pennsylvania
Date 10/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wrzesniewski, Amy <hr/> Contributor address; City; State; Zip Code  New Haven, CT 12345	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Pennsylvania
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yamdagni, Ashish <hr/> Contributor address; City; State; Zip Code  New York City, NY 10128	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Content creator		Employer (See Instructions) Popshift
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yogesh, Asudani <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yogesh, Asudani <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 81/84 Rpt: 84/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yvonne, Aguirre	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009		
<b>8</b> Principal occupation / Job title (See Instructions) Manager		<b>9</b> Employer (See Instructions) AguirreArtsGroup
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yvonne, Aguirre	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) AguirreArtsGroup
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zeb, Sumbel	Amount of Contribution (\$)  \$30.00
Contributor address; City; State; Zip Code  Rockwall, TX 75032		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zeb, Sumbel	Amount of Contribution (\$)  \$30.00
Contributor address; City; State; Zip Code  Rockwall, TX 75032		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Bruce	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Champaign, IL 61820		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 82/84 Rpt: 85/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zimmerman, Bruce <hr/> <b>6</b> Contributor address; City; State; Zip Code  Champaign, IL 61820	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zorn, Abigail <hr/> Contributor address; City; State; Zip Code  Seattle, WA 98105	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) HR manager		Employer (See Instructions) University of Washington
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) atmakuri, vishal <hr/> Contributor address; City; State; Zip Code  austin, TX 78744	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) software dev		Employer (See Instructions) Integral ad science
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) mehtani, siya <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$149.00
Principal occupation / Job title (See Instructions) doctor		Employer (See Instructions) butte county
Date 07/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) mehtani, siya <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94115	Amount of Contribution (\$)  \$149.00
Principal occupation / Job title (See Instructions) doctor		Employer (See Instructions) butte county

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 83/84 Rpt: 86/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/25/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) nancy, shah <hr/> <b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Operations		<b>9</b> Employer (See Instructions) Gartner
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) nancy, shah <hr/> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Gartner
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) pramod, nelluri <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) CAVHS
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) pramod, nelluri <hr/> Contributor address; City; State; Zip Code  Little Rock, AR 72223	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) CAVHS
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) prudencio, Richard <hr/> Contributor address; City; State; Zip Code  Houston, TX 77070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ups package handlers		Employer (See Instructions) U.P.S

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 84/84 Rpt: 87/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/30/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) prudencio, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77070	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Ups package handlers		<b>9</b> Employer (See Instructions) U.P.S
Date 12/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) prudencio, Richard <hr/> Contributor address; City; State; Zip Code  Houston, TX 77070	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Ups package handlers		Employer (See Instructions) U.P.S
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) sutapa, chatergee <hr/> Contributor address; City; State; Zip Code  friendswood, TX 77546	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) City of Friendswood		Employer (See Instructions) Library Assistant

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 88/191
<b>2</b> FILER NAME Soora, Karthik (Mr.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 12/31/2023	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIVANI, CHATTERJEE	<b>9</b> Loan Amount (\$) \$10,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  Houston, TX 77007	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) DEVELOPMENT		<b>13</b> Employer (See Instructions) KIVA
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/17/2023	<b>5</b> Payee name ACRES HOMES CHAMBER OF COMMERCE	
<b>6</b> Amount (\$) \$80.00	<b>7</b> Payee address; City; State; Zip Code 6112 Wheatley St  Houston, TX 77091	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Acres Homes Chamber
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name ACRES HOMES CHAMBER OF COMMERCE	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 6112 Wheatley St  Houston, TX 77091	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Acres Homes Chamber
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/19/2023	Payee name ACTBLUE DEMOCRATIC PARTY	
Amount (\$) \$40.00	Payee address; City; State; Zip Code 4619 Lyons Ave  Houston, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 08/15/2023	<b>5</b> Payee name ACTBLUE HOUSTON BLACK DEMS
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<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 4619 Lyons Ave  Houston, TX 77020
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/23/2023	Payee name ACTBLUE KARTHIK SOORA
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Amount (\$) \$35.00	Payee address; City; State; Zip Code 7676 Hillmont Street  Houston, TX 77040
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/31/2023	Payee name ACTBLUE PLUMMER 4 HOUSTON
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 900 Bagby St  Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/10/2023	<b>5</b> Payee name ACTION NETWORK	
<b>6</b> Amount (\$) \$14.00	<b>7</b> Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2023	Payee name ACTION NETWORK	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/08/2023	Payee name ACTION NETWORK	
Amount (\$) \$32.00	Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/10/2023	<b>5</b> Payee name ACTION NETWORK	
<b>6</b> Amount (\$) \$16.00	<b>7</b> Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2023	Payee name ACTION NETWORK	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name ACTION NETWORK	
Amount (\$) \$23.00	Payee address; City; State; Zip Code 1900 L Street NW, Suite 900  Washington, DC 20036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Action Network
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/29/2023	<b>5</b> Payee name AMAZON	
<b>6</b> Amount (\$) \$61.00	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer Ink
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name AMAZON	
Amount (\$) \$96.00	Payee address; City; State; Zip Code 411 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer Ink
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name AMAZON	
Amount (\$) \$96.00	Payee address; City; State; Zip Code 412 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printer Ink
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/11/2023	<b>5</b> Payee name Acres Homes Chamber of Commerce	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 6112 Wheatley St  Houston, TX 77091	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/05/2023	Payee name Aidan Connor	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 723 W 12th St  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/20/2023	Payee name Avalon Diner	
Amount (\$) \$65.00	Payee address; City; State; Zip Code 2417 Westheimer Rd  Houston, TX 77098	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/15/2023	<b>5</b> Payee name BLUE NATION STRATEGIES	
<b>6</b> Amount (\$) \$1,681.00	<b>7</b> Payee address; City; State; Zip Code 5900 Harwick  Bethesda, MD 20816	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2023	Payee name Boxer Properties	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 7676 Hillmont Street  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name Boxer Properties	
Amount (\$) \$853.00	Payee address; City; State; Zip Code 7676 hillmont st  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/01/2023	<b>5</b> Payee name Boxer Properties	
<b>6</b> Amount (\$) \$853.00	<b>7</b> Payee address; City; State; Zip Code 7677 hillmont st  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Boxer Properties	
Amount (\$) \$853.00	Payee address; City; State; Zip Code 7678 hillmont st  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2023	Payee name Boxer Properties	
Amount (\$) \$853.00	Payee address; City; State; Zip Code 7679 hillmont st  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/01/2023	<b>5</b> Payee name Boxer Properties	
<b>6</b> Amount (\$) \$853.00	<b>7</b> Payee address; City; State; Zip Code 7680 hillmont st  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/16/2023	Payee name Comcast	
Amount (\$) \$163.00	Payee address; City; State; Zip Code 7844 W Tidwell Rd Ste 130  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name Comcast	
Amount (\$) \$163.00	Payee address; City; State; Zip Code 7844 W Tidwell Rd Ste 130  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/07/2023	<b>5</b> Payee name Comcast	
<b>6</b> Amount (\$) \$490.00	<b>7</b> Payee address; City; State; Zip Code 7844 W Tidwell Rd Ste 130  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/06/2023	Payee name Comcast	
Amount (\$) \$337.00	Payee address; City; State; Zip Code 7844 W Tidwell Rd Ste 130  Houston, TX 77040	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/15/2023	Payee name Cynthia Bailey	
Amount (\$) \$424.00	Payee address; City; State; Zip Code 7829 Flintridge Dr  Houston, TX 77040	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense signs
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/15/2023	<b>5</b> Payee name Cynthia Bailey	
<b>6</b> Amount (\$) \$1.00	<b>7</b> Payee address; City; State; Zip Code 7830 Flintridge Dr  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense signs
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/07/2023	Payee name DESIGNED TO RUN	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2023	Payee name DESIGNED TO RUN	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 09/07/2023	<b>5</b> Payee name DESIGNED TO RUN
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<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/10/2023	Payee name DESIGNED TO RUN
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2023	Payee name DESIGNED TO RUN
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/07/2023	<b>5</b> Payee name DESIGNED TO RUN	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 47 Bergen Street  Brooklyn, NY 11201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2023	Payee name DaisyChain App	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 128 West, Pierpont Street  Kingston, NY 12401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2023	Payee name DaisyChain App	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 128 West, Pierpont Street  Kingston, NY 12401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/03/2023	<b>5</b> Payee name DaisyChain App	
<b>6</b> Amount (\$) \$136.00	<b>7</b> Payee address; City; State; Zip Code 128 West, Pierpont Street  Kingston, NY 12401	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2023	Payee name DaisyChain App	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 128 West, Pierpont Street  Kingston, NY 12401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name DaisyChain App	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 128 West, Pierpont Street  Kingston, NY 12401	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 07/03/2023	<b>5</b> Payee name Deck Technologies
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<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 1440 G Street  Washington, DC 20005
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2023	Payee name Deck Technologies
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 1440 G Street  Washington, DC 20005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/21/2023	Payee name Devin Mcghee
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Amount (\$) \$98.00	Payee address; City; State; Zip Code 115 Clearview Cir  Americus, GA 31709
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/04/2023	<b>5</b> Payee name Dominos	
<b>6</b> Amount (\$) \$58.00	<b>7</b> Payee address; City; State; Zip Code 5805 Lyons Ave  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pizza
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Elizabeth Townsend	
Amount (\$) \$599.00	Payee address; City; State; Zip Code 3931 Brighton Springs In  Katy, TX 77449	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advance on wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Elizabeth Townsend	
Amount (\$) \$1.00	Payee address; City; State; Zip Code 3931 Brighton Springs In  Katy, TX 77449	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/10/2023	<b>5</b> Payee name FROST BANK	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name FROST BANK	
Amount (\$) \$260.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2023	Payee name Facebook	
Amount (\$) \$33.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/05/2023	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/14/2023	Payee name Facebook	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/28/2023	Payee name Facebook	
Amount (\$) \$125.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/10/2023	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/02/2023	Payee name Facebook	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/10/2023	Payee name Facebook	
Amount (\$) \$208.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/26/2023	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$75.00	<b>7</b> Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/18/2023	Payee name Facebook	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/25/2023	Payee name Facebook	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1 Hacker Wy  Menlo Park, CA 94025	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 10/17/2023	<b>5</b> Payee name Frost Bank
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<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/12/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/24/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/26/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 23/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/07/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/28/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/17/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/12/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/07/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 07/10/2023	<b>5</b> Payee name Frost Bank
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<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/24/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/21/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 27/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/14/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/02/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 08/14/2023	<b>5</b> Payee name Frost Bank
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<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/03/2023	Payee name Frost Bank
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Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 29/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/10/2023	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$) \$15.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/26/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name Frost Bank	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ActBlue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/24/2023	<b>5</b> Payee name GOOGLE	
<b>6</b> Amount (\$) \$48.00	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 08/23/2023	Payee name GOOGLE	
Amount (\$) \$58.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/22/2023	Payee name GOOGLE	
Amount (\$) \$58.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 31/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/23/2023	<b>5</b> Payee name GOOGLE	
<b>6</b> Amount (\$) \$58.00	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2023	Payee name GOOGLE	
Amount (\$) \$58.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/22/2023	Payee name GOOGLE	
Amount (\$) \$65.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 32/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/03/2023	<b>5</b> Payee name GOOGLE	
<b>6</b> Amount (\$) \$14.00	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2023	Payee name GOOGLE	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name GOOGLE	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 33/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/02/2023	<b>5</b> Payee name GOOGLE	
<b>6</b> Amount (\$) \$14.00	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/01/2023	Payee name GOOGLE	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/01/2023	Payee name GOOGLE	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 1600 Amphitheatre  Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 34/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/03/2023	<b>5</b> Payee name GRASSROOTS ANALYTICS	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 806 7th St NW  Washington, DC 20001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/18/2023	Payee name GUSTO	
Amount (\$) \$90.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name GUSTO	
Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 35/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$780.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name GUSTO	
Amount (\$) \$212.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name GUSTO	
Amount (\$) \$878.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 36/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/10/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$495.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name GUSTO	
Amount (\$) \$379.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name GUSTO	
Amount (\$) \$550.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 37/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/10/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$323.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/10/2023	Payee name GUSTO	
Amount (\$) \$440.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/15/2023	Payee name GUSTO	
Amount (\$) \$1,516.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 38/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/15/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$731.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/15/2023	Payee name GUSTO	
Amount (\$) \$534.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/29/2023	Payee name GUSTO	
Amount (\$) \$780.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 39/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 12/29/2023	<b>5</b> Payee name GUSTO
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<b>6</b> Amount (\$) \$410.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2023	Payee name GUSTO
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Amount (\$) \$1,948.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2023	Payee name GUSTO
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Amount (\$) \$1,170.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 40/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$605.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name GUSTO	
Amount (\$) \$1,373.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name GUSTO	
Amount (\$) \$980.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 41/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$790.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/29/2023	Payee name GUSTO	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/29/2023	Payee name GUSTO	
Amount (\$) \$2,800.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 42/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name GUSTO	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name GUSTO	
Amount (\$) \$555.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 43/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/20/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$424.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name GUSTO	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name GUSTO	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 44/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/20/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$308.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name GUSTO	
Amount (\$) \$285.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name GUSTO	
Amount (\$) \$293.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 45/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$1,140.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2023	Payee name GUSTO	
Amount (\$) \$653.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2023	Payee name GUSTO	
Amount (\$) \$775.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 46/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$1,218.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/13/2023	Payee name GUSTO	
Amount (\$) \$826.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/13/2023	Payee name GUSTO	
Amount (\$) \$1,158.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 47/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/12/2023	Payee name GUSTO	
Amount (\$) \$1,203.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/12/2023	Payee name GUSTO	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 48/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/12/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$451.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$625.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$281.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 49/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/14/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$497.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2023	Payee name GUSTO	
Amount (\$) \$656.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2023	Payee name GUSTO	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 50/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/08/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$2,800.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2023	Payee name GUSTO	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2023	Payee name GUSTO	
Amount (\$) \$741.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 51/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/08/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$855.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/08/2023	Payee name GUSTO	
Amount (\$) \$840.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name GUSTO	
Amount (\$) \$680.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 52/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/31/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$741.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/31/2023	Payee name GUSTO	
Amount (\$) \$942.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/02/2023	Payee name GUSTO	
Amount (\$) \$112.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 53/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/06/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$212.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2023	Payee name GUSTO	
Amount (\$) \$93.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2023	Payee name GUSTO	
Amount (\$) \$169.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 54/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/04/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$122.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2023	Payee name GUSTO	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/28/2023	Payee name GUSTO	
Amount (\$) \$1,921.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 55/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/06/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$1,707.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2023	Payee name GUSTO	
Amount (\$) \$2,915.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2023	Payee name GUSTO	
Amount (\$) \$999.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 56/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/29/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$178.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name GUSTO	
Amount (\$) \$2,057.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2023	Payee name GUSTO	
Amount (\$) \$1,921.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 57/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/21/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$1,613.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/13/2023	Payee name GUSTO	
Amount (\$) \$2,057.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/30/2023	Payee name GUSTO	
Amount (\$) \$2,056.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 58/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/30/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$825.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/14/2023	Payee name GUSTO	
Amount (\$) \$1,921.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/03/2023	Payee name GUSTO	
Amount (\$) \$1,207.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 59/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/03/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$1,207.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name GUSTO	
Amount (\$) \$1,097.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name GUSTO	
Amount (\$) \$178.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 60/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/15/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$608.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$1,651.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$2,144.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 61/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/31/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$2,043.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/28/2023	Payee name GUSTO	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2023	Payee name GUSTO	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 62/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name GUSTO	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 63/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/31/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/28/2023	Payee name GUSTO	
Amount (\$) \$563.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2023	Payee name GUSTO	
Amount (\$) \$458.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 64/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/06/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$917.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/17/2023	Payee name GUSTO	
Amount (\$) \$281.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/29/2023	Payee name GUSTO	
Amount (\$) \$29.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 65/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/15/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$635.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/31/2023	Payee name GUSTO	
Amount (\$) \$639.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/21/2023	Payee name GUSTO	
Amount (\$) \$514.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 66/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/13/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$635.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name GUSTO	
Amount (\$) \$635.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name GUSTO	
Amount (\$) \$215.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 67/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 09/14/2023	<b>5</b> Payee name GUSTO
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<b>6</b> Amount (\$) \$632.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/03/2023	Payee name GUSTO
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Amount (\$) \$360.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/11/2023	Payee name GUSTO
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Amount (\$) \$318.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 68/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/15/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$134.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name GUSTO	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/14/2023	Payee name GUSTO	
Amount (\$) \$430.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 69/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/14/2023	<b>5</b> Payee name GUSTO	
<b>6</b> Amount (\$) \$681.00	<b>7</b> Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/31/2023	Payee name GUSTO	
Amount (\$) \$628.00	Payee address; City; State; Zip Code 525 20th Street  San Francisco, CA 94107	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/27/2023	Payee name Good Change	
Amount (\$) \$0.00	Payee address; City; State; Zip Code 6834 Cantrell Road #2406  Little Rock, AR 72207	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 70/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/11/2023	<b>5</b> Payee name Good Change	
<b>6</b> Amount (\$) \$1.00	<b>7</b> Payee address; City; State; Zip Code 6835 Cantrell Road #2406  Little Rock, AR 72207	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2023	Payee name Good Change	
Amount (\$) \$0.00	Payee address; City; State; Zip Code 6836 Cantrell Road #2406  Little Rock, AR 72207	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name HEB	
Amount (\$) \$16.00	Payee address; City; State; Zip Code 11815 Westheimer Rd  Houston, TX 77082	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 71/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/05/2023	<b>5</b> Payee name HEB	
<b>6</b> Amount (\$) \$22.00	<b>7</b> Payee address; City; State; Zip Code 11815 Westheimer Rd  Houston, TX 77082	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team food
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2023	Payee name HOUSTON CHRONICLE	
Amount (\$) \$0.00	Payee address; City; State; Zip Code 4747 Southwest Fwy  Houston, TX 77027	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name Harris County Democratic Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4619 Lyons Ave  Houston, TX 77020	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Legal Services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Harris County Democratic Party Filing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 72/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/02/2023	<b>5</b> Payee name Indeed Jobs	
<b>6</b> Amount (\$) \$3.00	<b>7</b> Payee address; City; State; Zip Code 201 W 5th St  austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Job Promotion
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name Indo American News	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 7457 Harwin Dr  Houston, TX 77036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense IndoAmerican News release
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/13/2023	Payee name J&N Enterprises	
Amount (\$) \$346.00	Payee address; City; State; Zip Code 2519 Fairway Park Dr SUITE 302  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 73/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 07/31/2023	<b>5</b> Payee name J&N Enterprises
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<b>6</b> Amount (\$) \$444.00	<b>7</b> Payee address; City; State; Zip Code 2519 Fairway Park Dr SUITE 302  Houston, TX 77040
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/14/2023	Payee name J&N Enterprises
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Amount (\$) \$346.00	Payee address; City; State; Zip Code 2519 Fairway Park Dr SUITE 302  Houston, TX 77040
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2023	Payee name J&N Enterprises
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Amount (\$) \$1,055.00	Payee address; City; State; Zip Code 2519 Fairway Park Dr SUITE 302  Houston, TX 77040
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 74/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/05/2023	<b>5</b> Payee name J&N Enterprises	
<b>6</b> Amount (\$) \$466.00	<b>7</b> Payee address; City; State; Zip Code 2519 Fairway Park Dr SUITE 302  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TO Frances Worzel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2023	Payee name Jacilet Griffin	
Amount (\$) \$1,056.00	Payee address; City; State; Zip Code PO Box 2234  Missouri City, TX 77459	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advance on wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2023	Payee name Jamaica Pon Di Road	
Amount (\$) \$44.00	Payee address; City; State; Zip Code 2213 s victory  Houston, TX 77088	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and greet food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 75/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/10/2023	<b>5</b> Payee name Juiceland Montrose	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code 1340 westheimer rd d  Houston, TX 77006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and greet food
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name KROGER	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 12555 briar forest dr  Houston, TX 77077	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense KROGER #363 HOUSTON CARD:
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name Khady Mboup	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 11626 royal oaks xing  Houston, TX 77082	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TO KHADY MBOUP
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 76/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/01/2023	<b>5</b> Payee name La Lupita Mexicana	
<b>6</b> Amount (\$) \$82.00	<b>7</b> Payee address; City; State; Zip Code 6622 b pinemont dr ste b  Houston, TX 77092	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team Food
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name M3 GRAPHICS	
Amount (\$) \$1,341.00	Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston, TX 77099	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2023	Payee name M3 GRAPHICS	
Amount (\$) \$81.00	Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston, TX 77099	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 77/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/15/2023	<b>5</b> Payee name M3 GRAPHICS	
<b>6</b> Amount (\$) \$84.00	<b>7</b> Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston, TX 77099	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name M3 GRAPHICS	
Amount (\$) \$279.00	Payee address; City; State; Zip Code 11730 Wilcrest Dr  Houston, TX 77099	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Posters, signs, tshirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/17/2023	Payee name MAILMETEOR	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 43 Boulevard Auguste Blanqui  Paris Ile de France 75013 France	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 78/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/18/2023	<b>5</b> Payee name MAILMETEOR	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code 43 Boulevard Auguste Blanqui  Paris Ile de France 75013 France	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/17/2023	Payee name MAILMETEOR	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 43 Boulevard Auguste Blanqui  Paris Ile de France 75013 France	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/17/2023	Payee name MAILMETEOR	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 43 Boulevard Auguste Blanqui  Paris Ile de France 75013 France	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 79/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 12/18/2023	<b>5</b> Payee name MAILMETEOR	
<b>6</b> Amount (\$) \$10.00	<b>7</b> Payee address; City; State; Zip Code 43 Boulevard Auguste Blanqui  Paris Ile de France 75013 France	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Emails
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2023	Payee name MARIGOLD CAFE	
Amount (\$) \$22.00	Payee address; City; State; Zip Code 7676 Hillmont Street  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 80/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/31/2023	<b>5</b> Payee name MERCH BLUE	
<b>6</b> Amount (\$) \$26.00	<b>7</b> Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/26/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 81/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/23/2023	<b>5</b> Payee name MERCH BLUE	
<b>6</b> Amount (\$) \$26.00	<b>7</b> Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/24/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2023	Payee name MERCH BLUE	
Amount (\$) \$33.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 82/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/20/2023	<b>5</b> Payee name MERCH BLUE	
<b>6</b> Amount (\$) \$26.00	<b>7</b> Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2023	Payee name MERCH BLUE	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 83/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 10/04/2023	<b>5</b> Payee name MERCH BLUE	
<b>6</b> Amount (\$) \$26.00	<b>7</b> Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2023	Payee name MERCH BLUE	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name MERCH BLUE	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 14833 NE 87TH ST  Redmond, WA 98052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 84/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/17/2023	<b>5</b> Payee name N A	
<b>6</b> Amount (\$) \$9.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name N A	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name N A	
Amount (\$) \$7.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 85/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/15/2023	<b>5</b> Payee name N A	
<b>6</b> Amount (\$) \$7.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/16/2023	Payee name N A	
Amount (\$) \$6.00	Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/03/2023	Payee name NGP VAN	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 86/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/02/2023	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$160.00	<b>7</b> Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name NGP VAN	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2023	Payee name NGP VAN	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 87/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/02/2023	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) \$160.00	<b>7</b> Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name NGP VAN	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 1445 New York Avenue  Washington, DC 20005	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Data services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2023	Payee name NNT THE COFFEE HOUS661 HOUSTON CARD	
Amount (\$) \$7.00	Payee address; City; State; Zip Code 802 Shepherd Street  Houston, TX 77007	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 88/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 12/14/2023	<b>5</b> Payee name NO DESCRIPTION
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<b>6</b> Amount (\$) \$5.00	<b>7</b> Payee address; City; State; Zip Code 628 E. 11th Street  Houston, TX 77008
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense N A
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/14/2023	Payee name PARTY CITY
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Amount (\$) \$63.00	Payee address; City; State; Zip Code 13760 Northwest Fwy  Houston, TX 77040
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorations
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2023	Payee name PHONEBURNER
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Amount (\$) \$159.00	Payee address; City; State; Zip Code 1968 S Coast Hwy Suite 1800  Laguna Beach, CA 92651
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 89/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/01/2023	<b>5</b> Payee name PHONEBURNER	
<b>6</b> Amount (\$) \$22.00	<b>7</b> Payee address; City; State; Zip Code 1968 S Coast Hwy Suite 1800  Laguna Beach, CA 92651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/02/2023	Payee name PHONEBURNER	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 1969 S Coast Hwy Suite 1800  Laguna Beach, CA 92651	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 10/30/2023	Payee name PHONEBURNER	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 1970 S Coast Hwy Suite 1800  Laguna Beach, CA 92651	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 90/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/30/2023	<b>5</b> Payee name PHONEBURNER	
<b>6</b> Amount (\$) \$175.00	<b>7</b> Payee address; City; State; Zip Code 1971 S Coast Hwy Suite 1800  Laguna Beach, CA 92651	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2023	Payee name PHONEBURNER	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 1972 S Coast Hwy Suite 1800  Laguna Beach, CA 92651	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Persuasion and Pixels	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1717 N Street NW  Washington, DC 20036	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 91/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/16/2023	<b>5</b> Payee name Persuasion and Pixels	
<b>6</b> Amount (\$) \$395.00	<b>7</b> Payee address; City; State; Zip Code 1717 N Street NW  Washington, DC 20036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/05/2023	Payee name Persuasion and Pixels	
Amount (\$) \$1,757.00	Payee address; City; State; Zip Code 1717 N Street NW  Washington, DC 20036	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/06/2023	Payee name Persuasion and Pixels	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 1717 N Street NW  Washington, DC 20036	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 92/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 07/26/2023	<b>5</b> Payee name Persuasion and Pixels	
<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 1717 N Street NW  Washington, DC 20036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/15/2023	Payee name RANDALLS	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 5161 San Felipe St  Houston, TX 77056	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/01/2023	Payee name RIPPLE	
Amount (\$) \$2,492.00	Payee address; City; State; Zip Code 176 Millburn Ave Apt 30  Millburn, NJ 07041	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 93/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> Date 12/15/2023	<b>5</b> Payee name RIPPLE
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<b>6</b> Amount (\$) \$4,500.00	<b>7</b> Payee address; City; State; Zip Code 176 Millburn Ave Apt 30  Millburn, NJ 07041
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Finance
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/07/2023	Payee name SWITCHBOARD
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Amount (\$) \$145.00	Payee address; City; State; Zip Code 1725 I St NW  Washington DC, DC 20006
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/06/2023	Payee name SWITCHBOARD
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Amount (\$) \$159.00	Payee address; City; State; Zip Code 1725 I St NW  Washington DC, DC 20006
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 94/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/08/2023	<b>5</b> Payee name SWITCHBOARD	
<b>6</b> Amount (\$) \$85.00	<b>7</b> Payee address; City; State; Zip Code 1725 I St NW  Washington DC, DC 20006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name SWITCHBOARD	
Amount (\$) \$70.00	Payee address; City; State; Zip Code 1725 I St NW  Washington DC, DC 20006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name TACOS DONA LENA	
Amount (\$) \$36.00	Payee address; City; State; Zip Code 8788 Hammerly Blvd G  Houston, TX 77080	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for meet and greet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 95/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/25/2023	<b>5</b> Payee name TACOS DONA LENA	
<b>6</b> Amount (\$) \$34.00	<b>7</b> Payee address; City; State; Zip Code 8788 Hammerly Blvd G  Houston, TX 77080	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for meet and greet
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2023	Payee name TARGET	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 13250 Northwest Fwy  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2023	Payee name THE ION	
Amount (\$) \$10.00	Payee address; City; State; Zip Code 4201 Main St  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 96/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/13/2023	<b>5</b> Payee name Tacos a Go Go	
<b>6</b> Amount (\$) \$48.00	<b>7</b> Payee address; City; State; Zip Code 3704 Main st  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2023	Payee name Twitter X	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 1355 Market Street  San Francisco, CA 19097	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Twitter X	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 1356 Market Street  San Francisco, CA 19097	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital social media
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 97/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/01/2023	<b>5</b> Payee name UH Parking	
<b>6</b> Amount (\$) \$5.00	<b>7</b> Payee address; City; State; Zip Code 4302 University Drive  Houston, TX 77204	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Wal Mart	
Amount (\$) \$28.00	Payee address; City; State; Zip Code 13484 Northwest Fwy  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/30/2023	Payee name Wal Mart	
Amount (\$) \$33.00	Payee address; City; State; Zip Code 13485 Northwest Fwy  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supply
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 98/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/14/2023	<b>5</b> Payee name Wal Mart	
<b>6</b> Amount (\$) \$64.00	<b>7</b> Payee address; City; State; Zip Code 13486 Northwest Fwy  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supply
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/19/2023	Payee name Wal Mart	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 13487 Northwest Fwy  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supply
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 07/27/2023	Payee name Wal Mart	
Amount (\$) \$19.00	Payee address; City; State; Zip Code 13488 Northwest Fwy  Houston, TX 77040	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supply
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 99/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 08/11/2023	<b>5</b> Payee name Wal Mart	
<b>6</b> Amount (\$) \$113.00	<b>7</b> Payee address; City; State; Zip Code 13489 Northwest Fwy  Houston, TX 77040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supply
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/09/2023	Payee name Yumcha Heights	
Amount (\$) \$8.00	Payee address; City; State; Zip Code 600 N Shepherd Dr #458  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 11/09/2023	Payee name Yumcha Heights	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 600 N Shepherd Dr #458  Houston, TX 77007	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 100/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 11/10/2023	<b>5</b> Payee name Zoa Moroccan Food	
<b>6</b> Amount (\$) \$28.00	<b>7</b> Payee address; City; State; Zip Code 4710 Lillian St  Houston, TX 77007	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Team food
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2023	Payee name Zoom	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2023	Payee name Zoom	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 101/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
<b>4</b> Date 09/20/2023	<b>5</b> Payee name Zoom	
<b>6</b> Amount (\$) \$17.00	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/20/2023	Payee name Zoom	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2023	Payee name Zoom	
Amount (\$) \$17.00	Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 102/102 Rpt:	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369	
<b>4</b> Date 12/20/2023	<b>5</b> Payee name Zoom		
<b>6</b> Amount (\$)  \$17.00	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/1 Rpt: 191/191	<b>2</b> FILER NAME Soora, Karthik (Mr.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087369
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 10/02/2023	<b>6</b> Payee name IndoAmerican News
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<b>7</b> Amount (\$) \$400.00	<b>8</b> Payee address; City; State; Zip Code 7457 Harwin Dr  Houston, TX 77036
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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