FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 50 00087369 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Karthik NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Soora CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2809 Sherwin Street MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77007 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Rakshith NAME NICKNAME LAST **SUFFIX** Rocky Saligram **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 16819 Colony Terrace Drive **ADDRESS** (Residence or Business) Sugarland, TX 77479 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 294-6619 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified Χ reporting limit **PERIOD** Month Day Month Day Year Year **COVERED** 02/25/2024 **THROUGH** 06/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE**

11 OFFICE

Month

Day

OFFICE HELD (if any)

Year

Primary

General

Runoff

Special

12 OFFICE SOUGHT (if known)

Other

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 50

13 C / OH NAME	Soora, Karthik (Mr.)		14 Filer ID (E 00087369	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without to difficeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00		
	5)	\$ 29,030.00		
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS				\$ 0.00
		\$ 62,036.50		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 115.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		Mr	. Karthik Soora	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 50 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00087369 Soora, Karthik (Mr.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 29,030.00 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 62,036.50 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	MONEI	ARY POLITICAL CON	SCHEDULE A1		LE A1		
	The Instru	ction Guide explains how to c	complete this form	n.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 4/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commission 00087369	on Filers)
_					_		
4	Date 03/02/2024	 5 Full name of contributor	ut-of-state PAC (ID#: iip Code)	1	Amount of Contribution (\$)	\$50.00
_		Aubrey, TX 76226	la-				
8	Principal occu Manager	pation / Job title (See Instructions)	9	Employer (See Instructions Liftoff Campaigns)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Aspandiar, Shiroy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$175.00		
		San Francisco, CA 94108					
	Principal occupation / Job title (See Instructions) Business owner Employer (See Instruction NA)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/09/2024 Batiste, Grace Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00	
		New York, NY 11102					
	Principal occu Marketing	pation / Job title (See Instructions)		Employer (See Instructions Google)		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00		
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed)		
	Date O3/04/2024 Full name of contributor out-of-state PAC (ID#:) Chatterjee, Shivani Contributor address; City; State; Zip Code Houston, TX 77007			Amount of Contribution (\$)	\$1,000.00		
	Principal occu Strategy Mar	pation / Job title (See Instructions) nager		Employer (See Instructions Kiva)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 5/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commission 00087369	n Filers)
4	Date 03/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_		Houston, TX 77004	- -	5 1 (0 1 ::	_		
8	Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Sunnyside Legal	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/25/2024 Chokshi, Reena Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$75.00		
	Principal occu	Houston, TX 77025 pation / Job title (See Instructions)	Т	Employer (See Instructions	<u> </u>		
Physician Baylor Colleg				Baylor College of Medic			
	Date 03/04/2024	Full name of contributor	:			Amount of Contribution (\$)	\$25.00
		Houston, TX 77007					
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Oliver Wymann	5)		
	Date 02/28/2024	Full name of contributor out-of-state PAC (ID#Fyke, Steve Contributor address; City; State; Zip Code Houston, TX 77005-2848)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/28/2024 Granberry, Claire Contributor address; City; State; Zip Code Houston, TX 77019		•	Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions) d		Employer (See Instructions not employed	5)		
			1				

	MONET	ARY POLITICAL CON	S		SCHEDULE A1		
	The Instru	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 6/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commissio 00087369	n Filers)
4	03/04/2024 Hafizi, Niloufar 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$35.00		
8	Principal occu	Katy, TX 77450 pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Nonprofit em			Emgage	,		
	Date Full name of contributor out-of-state PAC (ID#:) 02/28/2024 Hatoum, Hind Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Principal occu	Austin, TX 78724 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
				Not employed	,		
Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00		
		Houston, TX 77055					
	Principal occu Furniture mo	pation / Job title (See Instructions) ver		Employer (See Instructions Porch mover	5)		
Date Full name of contributor out-of-state PAC (ID#: 02/25/2024 Jensen, Bridget Contributor address; City; State; Zip Code Houston, TX 77019				Amount of Contribution (\$)	\$30.00		
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
	Date Full name of contributor out-of-state PAC (ID#:) Kaliki, Jyothi Contributor address; City; State; Zip Code Encinitas, CA 92024			Amount of Contribution (\$)	\$25.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 7/50	
2	FILER NAME Soora, Karth			3	Filer ID (Ethics Commission 00087369	on Filers)
4	Date 02/27/2024			7	Amount of Contribution (\$)	\$5,000.00
_	<u> </u>	New York, NY 10004				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) 03/07/2024 Lewis, Vance Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu	Oakland, CA 94612 spation / Job title (See Instructions)	Employer (See Instructions)		
	Associate Partner Promise Venture Studio					
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Mai, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00	
		Houston, TX 77009				
	Principal occu Machinist	ipation / Job title (See Instructions)	Employer (See Instructions) Self)		
	Date 03/04/2024	Full name of contributor out-of-state PAC (ID#:_ Manjanatha, Deepa Contributor address; City; State; Zip Code San Diego, CA 92116)		Amount of Contribution (\$)	\$10.00
	Principal occu Graduate St	pation / Job title (See Instructions) udent	Employer (See Instructions UCSD)		
	Date O2/27/2024 Full name of contributor out-of-state PAC (ID#:) McCollum, William Contributor address; City; State; Zip Code Sherwood, AR 72120			Amount of Contribution (\$)	\$10.00	
	Principal occu Administrativ	upation / Job title (See Instructions) ve Specialist	Employer (See Instructions McLarty Companies)		

	MONET	ARY POLITICAL CON		SCHEDULE A1			
	The Instruc	ction Guide explains how to c	omplete this form	n.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 8/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commission 00087369	ı Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Morrison, Brett 6 Contributor address; City; State; Zip Code Katy, TX 77494		7	Amount of Contribution (\$)	\$45.00		
8	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	ERP Security			ConocoPhillips	,		
	Date Full name of contributor out-of-state PAC (ID#:) 02/28/2024 Norred, Nolan Contributor address; City; State; Zip Code Houston, TX 77098			Amount of Contribution (\$)	\$10.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employed Not Employed						
	Date 05/03/2024	Full name of contributor ou P., Anita Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		New York, NY 10128					
	Principal occu Communicat	pation / Job title (See Instructions) ions		Employer (See Instructions Healthcare education pr		ct	
	Date 02/29/2024	Full name of contributor ou Prudencio, Richard Contributor address; City; State; Zi Houston, TX 77070	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$10.00
	Principal occu UPS Packag	pation / Job title (See Instructions)		Employer (See Instructions UPS	5)		
	Date Full name of contributor out-of-state PAC (ID#:) O2/27/2024 Qadri, Zohaib Contributor address; City; State; Zip Code Austin, TX 78723			Amount of Contribution (\$)	\$25.00		
	Principal occupation / Job title (See Instructions) Council Member Employer (See Instruction City of Austin						
			l_				

	MONET	ARY POLITICAL COI	S		SCHEDULE A1		
	The Instruc	ction Guide explains how to o	complete this forn	1.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 9/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commissi 00087369	on Filers)
4	Date 03/04/2024	5 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		Irving, TX 75063	1_				
8	8 Principal occupation / Job title (See Instructions) Analyst 9 Employer (See Instructions Egon Zehnder)				
	Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Rafiq, Hena Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
	Principal occu	Irving, TX 75063 pation / Job title (See Instructions)		Employer (See Instructions)		
	Analyst Egon Zehnder				,		
	Date Full name of contributor out-of-state PAC (ID#:) 03/19/2024 Ram, Kumar Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
		New York, NY 10021					
	Principal occu Not employe	pation / Job title (See Instructions) d		Employer (See Instructions Retired)		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$200.00		
	Principal occu Deloitte	pation / Job title (See Instructions)		Employer (See Instructions Deloitte)		
Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Soora, Siva Contributor address; City; State; Zip Code Little Rock, AR 72223			Amount of Contribution (\$)	\$15,000.00			
	Principal occupation / Job title (See Instructions) Global Systems Manager Employer (See Instructions Almatis)		
	5.0341 09310		<u> </u>				

	MONET	ARY POLITICAL CONTR	S		SCHEDULE A1		
	The Instruc	ction Guide explains how to com	plete this form	n.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 10/50	
2	FILER NAME Soora, Karth	ik (Mr.)			3	Filer ID (Ethics Commission 00087369	on Filers)
4	Date 02/26/2024	 Full name of contributor out-of-s Soora, Siva Contributor address; City; State; Zip Co)	7	Amount of Contribution (\$)	\$1,000.00
8	Dringinal occu	Little Rock, AR 72223 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0		ems Manager		Almatis)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/04/2024 Srinivasan, Padma Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Delinational	Sugarland, TX 77479		Employer (See Instructions			
	Principal occupation / Job title (See Instructions) Not Employed Not Employed)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/05/2024 Tallent, Bill Bob Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Houston, TX 77019					
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Woodland Advisors LLC			
	Date 03/03/2024	Telford, Bradford	itate PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Episcopal High School)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/27/2024 atmakuri, Vishal Contributor address; City; State; Zip Code austin, TX 78744			Amount of Contribution (\$)	\$5,000.00		
	Principal occu software dev	pation / Job title (See Instructions)		Employer (See Instructions Integral ad science)		
			I				

6 Contributor address; City; State; Zip Code Houston, TX 77009 8 Principal occupation / Job title (See Instructions) not empolyed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)		MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E A1
Soora, Karthik (Mr.) 4 Date		The Instruction Guide explains how to complete this form.	1		
A Date 02/27/2024 Second	2		3		n Filers)
Principal occupation / Job title (See Instructions) not empolyed Date 02/27/2024 Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) washington dc, DC 20012 Principal occupation / Job title (See Instructions) Pmployer (See Instructions) Amount of Contribution (\$) \$10.00 \$\$ Employer (See Instructions) Employer (See Instructions)	4	Date 5 Full name of contributor out-of-state PAC (ID#:) 02/27/2024 hall, patricia	7		\$50.00
not empolyed Date Full name of contributor □ out-of-state PAC (ID#: □) Amount of Contribution (\$) 02/27/2024 weber, toussaint \$10.00 Contributor address; City; State; Zip Code washington dc, DC 20012 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
02/27/2024 weber, toussaint \$10.00 Contributor address; City; State; Zip Code washington dc, DC 20012 Principal occupation / Job title (See Instructions) Employer (See Instructions)	8		ns)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		02/27/2024 weber, toussaint		Amount of Contribution (\$)	\$10.00
			ns)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			ages	/Contract Labor		OTHER (enter	a category not listed a	bove)
		_		The Instruction G	uide expiains no	ow to cor	mpie	ete tnis form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 1/38 Rpt: 12/50		Soora, Karth	nik (Mr.)						00087369		
4	Date	5	Payee name									
	03/05/2024		AMM Politic	al								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$987.00		507 N Sylva	nia Ave,								
			•									
			Fort Worth,	TV 76111								
Ļ						-	<i>a</i> >					
8	PURPOSE OF	(a)		e Categories listed at t	he top of this schedu	ule)	(b)	Description				
	EXPENDITURE		Advertising I	Expense				=		ide of Texas. Cor , officeholder livin	nplete Schedule T.	
								AMM Politica		, omeendider nvin	у схренос	
								7				
9	Complete ONLY if direct	<u> </u>	Candidate/Offic	seholder name	Off	ice sou	aht			Office h	old	
	expenditure to benefit C/O		Januluale/Onic	cholder flame	Oili	ice sou(giit			Office	Ciu	
_		_										
	Date		Payee name									
	04/22/2024		ActBlue									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$31.97		115 College	avenue								
			Somerville, I	MA 77077								
	PURPOSE	(a)					(h)	Description				
	OF	(")	Fees	e Categories listed at t	ne top of this schedu	uie)	(~)	_ ·	outsi	ide of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		1 003					_		, officeholder livin		
								ActBlue				
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	ice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
_	Date		Payee name									
	03/07/2024		Action Netw	ork								
		┢			Ctata	7in Co.	al a					
	Amount (\$)		Payee addres	•	State;	ZIP CO	ue					
	\$50.00		1900 L Stree	et NW, Suite 90	10							
			Washington	, DC 20036								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedu	ule)	(b)	Description				
	OF EXPENDITURE		Office Overh	nead/Rental Exp	pense						nplete Schedule T.	
										, officeholder livin	g expense	
								Action Netwo	rk			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Offi	ice sou	ght			Office h	eld	
L												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/38 Rpt: 13/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	04/03/2024	Action Network
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$162.04	1900 L Street NW, Suite 900
		Washington, DC 20036
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Action Network
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/07/2024	Action Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	1900 L Street NW, Suite 900
		Washington, DC 20036
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Action Network
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/10/2024	Action Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	1900 L Street NW, Suite 900
	,	
		Washington, DC 20036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Action Network
		Action Network
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	nple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 3/38 Rpt: 14/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		•
	06/26/2024	Action Network		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$13.54	1900 L Street NW, Suite 900		
		Washington, DC 20036		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE			Check if Austin, TX, officeholder living expense Action Network
				Action Network
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
,	expenditure to benefit C/O		,,,,,	Office field
	Date	Dove nome		
	05/08/2024	Payee name Canva		
			10	
	Amount (\$) \$10.00	Payee address; City; State; Zip Cod L 1 110 Kippax St	ie	
	\$10.00	L 1 110 Κιρμαλ St		
		Curry Hillo NIA 77007 Australia		
		Surry Hills NA 77007 Australia		
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
				Canva
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/Ol	1		
	Date	Payee name		
	04/08/2024	Clubs in Action		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$115.00	4201 Main Street		
		Houston, TX 77002		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Clubs in Action donation		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Donation of furniture to Clubs in Action
				Donation of furniture to Clabs III Action
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·	,,,,,	Since field
_				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 4/38 Rpt: 15/50	Soora, Karthik (Mr.) 00087369			
4	Date	5 Payee name			
	03/12/2024	Comcast Xfinity			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$275.00	12602 Westheimer			
		Houston, TX 77077			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Comcast Xfinity			
		Comcast Aminty			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Date	Power name			
	04/15/2024	Payee name Comcast Xfinity			
		· ·			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$19.96	12602 Westheimer			
		Houston, TX 77077			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
		Check if Austin, TX, officeholder living expense Comcast Xfinity			
		Comcast Amily			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
_	Data				
	Date	Payee name Comcast Xfinity			
	05/14/2024	,			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$8.00	12602 Westheimer			
L		Houston, TX 77077			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Comcast Xfinity			
		Comcast Annity			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/38 Rpt: 16/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	05/07/2024	Communityvo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	619 E 11th 1/2 St
		Houston, TX 77008
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Community
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
-	Date	Dougo nama
	03/08/2024	Payee name
		Dish Society
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.00	4191 Bellaire boulevard
		Houston, TX 77025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Dish Society
		Distr Society
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	03/14/2024	Payee name Empower
		Empower
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	2800 Royal Avenue
		Madison, WI 53558
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Empower
		Empower
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/38 Rpt: 17/50	Soora, Karthik (Mr.)	00087369
4	Date	5 Payee name	
	04/08/2024	Empower	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$159.90	2800 Royal Avenue	
		Madison, WI 53558	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	2/11/2/10/12		TX, officeholder living expense
		Empower	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/10/2024	Empower	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$119.99	2800 Royal Avenue	
		Madison, WI 53558	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overhead/Nental Expense	outside of Texas. Complete Schedule T.
		Empower	TX, officeholder living expense
		Linpower	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
	Data		
	Date	Payee name	
	06/07/2024	Empower	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	2800 Royal Avenue	
		Madison, WI 53558	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overnead/Nertial Expense	outside of Texas. Complete Schedule T.
	LXI LINDITORL	<u> </u>	TX, officeholder living expense
		Empower	
	Complete CNUV'S	Condidate (Office helder news	Office health
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Γ Δ	rms provided by Tayas E	thics Commission www.athics state ty us	Version V// 1 0 d278aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/38 Rpt: 18/50	Soora, Karthik (Mr.)	00087369
4	Date	5 Payee name	•
	06/26/2024	Empower	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.00	2800 Royal Avenue	
		Madison, WI 53558	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE		Check if Austin, TX, officeholder living expense
			Empower
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/OI		Office field
	Date	Payee name	
	02/26/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Wy	
		Menlo Park, CA 94025	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			acebook
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	-	
	Date	Payee name	
	02/26/2024	Facebook	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$900.00	1 Hacker Wy	
		,	
		Menlo Park, CA 94025	
	PURPOSE		Description
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Navertioning Expenses	Check if Austin, TX, officeholder living expense
		F	Facebook
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experience to benefit 6/01	•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/38 Rpt: 19/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	02/26/2024	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Facebook
		1 decision
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/Ol	
⊨	Date	Programme
		Payee name
	02/26/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Facebook
		T adopped t
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	02/26/2024	Facebook
	Amount (\$) \$900.00	Payee address; City; State; Zip Code 1 Hacker Wy
	φ900.00	I Hacker Wy
		Martia Parili, CA 04005
		Menlo Park, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Facebook
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	
\vdash		
l		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment		The Instruction Guide explains how to c	omple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 9/38 Rpt: 20/50		Soora, Karthik (Mr.)		00087369
4	Date	5	Payee name		
	02/26/2024		Facebook		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$900.00		1 Hacker Wy		
		L	Menlo Park, CA 94025		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Facebook
9	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	Н			
	Date	П	Payee name		
	02/27/2024		Facebook		
	Amount (\$)	T	Payee address; City; State; Zip C	ode	
	\$953.66		1 Hacker Wy		
			Menlo Park, CA 94025		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Facebook
					. 4002001
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	Н			
	Date	Π	Payee name		
	02/27/2024		Facebook		
	Amount (\$)	T	Payee address; City; State; Zip C	ode	
	\$900.00		1 Hacker Wy		
			Menlo Park, CA 94025		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Facebook
					1 doctoon
	Complete ONLY if direct	Ц (Candidate/Officeholder name Office so	 uaht	Office held
	expenditure to benefit C/OH				
l					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/38 Rpt: 21/50 00087369 Soora, Karthik (Mr.) 4 Date Payee name 02/28/2024 Facebook 6 Amount (\$) Payee address; City; State; Zip Code \$900.00 1 Hacker Wy Menlo Park, CA 94025 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Facebook Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/28/2024 Facebook Amount (\$) Payee address; City; State; Zip Code \$900.00 1 Hacker Wy Menlo Park, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Facebook Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/28/2024 Facebook Amount (\$) Payee address: City; State; Zip Code \$900.00 1 Hacker Wy Menlo Park, CA 94025 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Facebook Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/38 Rpt: 22/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	02/28/2024	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Facebook
		. 3,33333
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/29/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Facebook
		1 4005001
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
H	Date	Payee name
	03/01/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Facebook
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	s)		
	Sch: 12/38 Rpt: 23/50	Soora, Karthik (Mr.) 00087369			
4	Date	5 Payee name			
	03/04/2024	Facebook			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$900.00	1 Hacker Wy			
		Menlo Park, CA 94025			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Advertising Expense			
	LAFENDITORE	Check if Austin, TX, officeholder living expense			
		Facebook			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O				
⊨	Date	Payee name			
	03/04/2024	Facebook			
┝	Amount (\$)	Payee address; City; State; Zip Code			
	\$900.00	1 Hacker Wy			
	Ψ300.00	Tridenel Wy			
		Monlo Dark, CA 04025			
L	DUDD005	Menlo Park, CA 94025			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Facebook			
L					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	experientare to benefit eror				
	Date	Payee name			
	03/04/2024	Facebook			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$900.00	1 Hacker Wy			
		Menlo Park, CA 94025			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Facebook			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Travel in Dis
Travel Out o
Travel Out o
Contract Labor
OTHER (ent

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/38 Rpt: 24/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	03/05/2024	Facebook
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$740.00	1 Hacker Wy
		Menlo Park, CA 94025
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Facebook
		, assessing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	03/05/2024	Facebook
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	1 Hacker Wy
		Menlo Park, CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Facebook
		, assessing
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/11/2024	Facebook
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$5,180.47	1 Hacker Wy
		Menlo Park, CA 94025
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Facebook
		racebook
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment		The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 14/38 Rpt: 25/50		Soora, Karthik (Mr.)		00087369
4	Date	5	Payee name		·
	05/03/2024		Frost Bank		
6	Amount (\$)	7	Payee address; City; State; Zip Co	de	
	\$85.28		628 E. 11th Street		
			Houston, TX 77007		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Frost Bank
9	Complete ONLY if direct		L Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI			3	
_	Date		Payee name		
	05/10/2024		Frost Bank		
	Amount (\$)	┝	Payee address; City; State; Zip Co	de	
	\$10.00		628 E. 11th Street		
			Houston, TX 77007		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	<u> </u>	Fees	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin, TX, officeholder living expense
					Frost Bank
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office sou	aht	Office held
	expenditure to benefit C/OI		Januluate/Oniceriolaer frame Onice Sou	ynı	Office field
_	Data		Para a same		
	Date 02/26/2024		Payee name Frost Bank		
				do	
	Amount (\$) \$15.00		Payee address; City; State; Zip Co 628 E. 11th Street	ue	
	Ψ13.00		020 L. IIII Succi		
			Houston, TX 77008		
	PURPOSE	(0)		(h)	N. Donastination
	OF	(a)	Category (See Categories listed at the top of this schedule) Fees	(D)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		1 003		Check if Austin, TX, officeholder living expense
					Frost Bank
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ght	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to comp	plete	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 15/38 Rpt: 26/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		·
	02/26/2024	Frost Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$15.00	628 E. 11th Street		
		Houston, TX 77008		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) D	Description
	OF EXPENDITURE	Fees	Ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			F	Toneck in Addition, 175, diffice totaler living expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
F	Date	Payee name		
	02/27/2024	Frost Bank		
H	Amount (\$)	Payee address; City; State; Zip Code	e	
	\$15.00	628 E. 11th Street		
		Houston, TX 77008		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) D	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
			Ļ	Check if Austin, TX, officeholder living expense Frost Bank
				TOST DATK
┝	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI			
F	Date	Payee name		
	02/29/2024	Frost Bank		
H	Amount (\$)	Payee address; City; State; Zip Code	e	
	\$30.00	628 E. 11th Street		
		Houston, TX 77008		
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) D	Description
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.
l	LAFLINDITORL		Ē	Check if Austin, TX, officeholder living expense
			-	Frost Bank
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI			Sind Hold
H				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to com	-	, , , , , , , , , , , , , , , , , , , ,
1	Total pages Schedule F1:	•	_	3 Filer ID (Ethics Commission Filers)
	Sch: 16/38 Rpt: 27/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		'
	02/29/2024	Frost Bank		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$10,000.00	628 E. 11th Street		
		Houston, TX 77008		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Fees	Į	Check if travel outside of Texas. Complete Schedule T.
			Ļ	Check if Austin, TX, officeholder living expense Frost Bank
			,	1 Took Barik
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O			
H	Date	Payee name		
	03/04/2024	Frost Bank		
┝	Amount (\$)	Payee address; City; State; Zip Cod	le.	
	\$15.00	628 E. 11th Street		
		Houston, TX 77008		
┝	PURPOSE		(h)	Description
	OF	Fees	, ,]	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Ī	Check if Austin, TX, officeholder living expense
				Frost Bank
L	Operation ONLY if allowed	Outside to 10 ff and a laborary and a second	1-4	Office held
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	nι	Office held
⊨	Data			
	Date 03/05/2024	Payee name Frost Bank		
L			lo.	
	Amount (\$) \$500.00	Payee address; City; State; Zip Cod 628 E. 11th Street	ie	
	Ψ500.00	020 E. IIIII Sueet		
		Houston, TX 77008		
L	DUDDOCE	i	/L\ .	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees	(u <u>)</u> 	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	rees	į	Check if Austin, TX, officeholder living expense
			Ī	Frost Bank
L				
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	1		
_				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees Food/Beverage Expense

Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

The Instruction Guide explains how to complete this form.	
2 FILER NAME 3 Filer ID (Ethics Commission Filers)	\neg
Soora, Karthik (Mr.) 00087369	
5 Payee name	
Frost Bank	
7 Payee address; City; State; Zip Code	
628 E. 11th Street	
Houston, TX 77008	
(a) Category (See Categories listed at the top of this schedule) (b) Description	
Fees Check if travel outside of Texas. Complete Schedule T.	
Trost Bank	
Candidate/Officeholder name Office sought Office held	_
Office rought Office rought	
	_
Payee name	
Frost Bank	
Payee address; City; State; Zip Code	
628 E. 11th Street	
Houston, TX 77008	
(a) Category (See Categories listed at the top of this schedule) (b) Description	
FIOSE BAIK	
Condidate Office holds	_
Office rought Office rought	
1	_
Frost Bank	
Payee address; City; State; Zip Code	
628 E. 11th Street	
Houston, TX 77007	
(a) Category (See Categories listed at the top of this schedule) (b) Description	
Fees Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, TX, officeholder living expense	
Check if Austin, TX, officeholder living expense Frost Bank	
Check if Austin, TX, officeholder living expense Frost Bank Candidate/Officeholder name Office sought Office held	
Check if Austin, TX, officeholder living expense Frost Bank	
Check if Austin, TX, officeholder living expense Frost Bank Candidate/Officeholder name Office sought Office held	_
	2 FILER NAME Soora, Karthik (Mr.) 5 Payee name Frost Bank 7 Payee address; City; State; Zip Code 628 E. 11th Street Houston, TX 77008 (a) Category (see categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Office held Payee address; City; State; Zip Code 628 E. 11th Street Houston, TX 77008 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Office held Office held Office held Payee address; City; State; Zip Code 628 E. 11th Street Houston, TX 77008 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Office held Office held Office held Office held Office held Office held Payee name Frost Bank Payee name Frost Bank Payee name Frost Bank Payee address; City; State; Zip Code 628 E. 11th Street Houston, TX 77007

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 18/38 Rpt: 29/50	Soora, Karthik (Mr.)	00087369
4	Date	5 Payee name	
	02/28/2024	Google	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	1602 Amphitheatre	
		Mountainview, CA 94045	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	· · · · · · · · · · · · · · · · · · ·	outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austi	n, TX, officeholder living expense
		Google	
Ļ	Operation ONE V if discont	One districts (Office healths are seen	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
\vdash			
	Date	Payee name	
	03/01/2024	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.59	1601 Amphitheatre	
		Mountainview, CA 94044	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		Google	n, 17, officeriolder living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	03/01/2024	Google	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$477.85	1603 Amphitheatre	
		Mountainview, CA 94046	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austi	n, TX, officeholder living expense
		Google	
L	Complete ONE V'C "	Condidate Office holder notice	Office hald
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 19/38 Rpt: 30/50		Soora, Karthik (Mr.)				00087369
4	Date	5	Payee name				
	03/04/2024		Google				
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1604 Amphitheatre Mountainview, CA 94047					
8	PURPOSE	┝	Category (See Categories listed at the top of this scher	dulo)	(b) Description		
-	OF EXPENDITURE		Advertising Expense	uule)	Check if travel		ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Of	ffice soug	yht		Office held
	Date		Payee name				
	03/05/2024		Google				
	Amount (\$) Payee address; City; State; Zip Code \$900.00 1605 Amphitheatre						
			Mountainview, CA 94048				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this scheel Advertising Expense	dule)	<u> </u>		ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Of	ffice souç	jht		Office held
	Date		Payee name				
	03/20/2024		Google				
	Amount (\$) \$17.05	ı	Payee address; City; State; 1607 Amphitheatre	Zip Coo	de		
			Mountainview, CA 94050				
	PURPOSE OF EXPENDITURE	ı	Category (See Categories listed at the top of this schedard Advertising Expense	dule)	=		ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice souç	yht		Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to	compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 20/38 Rpt: 31/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		
	03/22/2024	Google		
6	Amount (\$)	7 Payee address; City; State; Zip	Code	
	\$70.36	1609 Amphitheatre		
		Mountainview, CA 94052		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Google
	Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	04/01/2024	Google		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$13.59	1606 Amphitheatre		
		Mountainview, CA 94049		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Google
	Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	04/18/2024	Google		
	Amount (\$)	Payee address; City; State; Zip	Code	
	\$1,354.81	1608 Amphitheatre		
		Mountainview, CA 94051		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense
				Google
	Complete ONLY if direct	Candidate/Officeholder name Office s	ought	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/38 Rpt: 32/50	Soora, Karthik (Mr.)	00087369
4 Date	5 Payee name	•
04/22/2024	Google	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$400.00	1609 Amphitheatre	
	Mountainview, CA 94052	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Google
	<u> </u>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou OH	ught Office held
Date	Payee name	
05/16/2024	Google	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$37.60	1609 Amphitheatre	
	Mountainview, CA 94052	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Google
Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/C		
Date	Payee name	
05/28/2024	Google	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$648.01	1609 Amphitheatre	

	Mountainview, CA 94052	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Google
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou	ught Office held
experiulture to beliefft C/C	11	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	plete thi	s form.		
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
	Sch: 22/38 Rpt: 33/50	Soora, Karthik (Mr.)			00087369	
4	Date	5 Payee name		•		
	06/14/2024	Google				
6	Amount (\$)	7 Payee address; City; State; Zip Code	е			
	\$8.00	1610 Amphitheatre				
		Mountainview, CA 94053				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	b) Desc	cription		
	OF EXPENDITURE	Advertising Expense		theck if travel outsid		
	LXI LINDITORE		_	theck if Austin, TX, o	officeholder living	expense
			Goo	gie		
_	Complete ONLY if direct	Candidate/Officeholder name Office sough			Office he	ald.
9	Complete ONLY if direct expenditure to benefit C/OI		11		Office ne	eia
	Date	Payee name				
	06/24/2024	Google				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$12.79	1609 Amphitheatre				
		Mountainview, CA 94052				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	b) Desc			
	EXPENDITURE	Advertising Expense		theck if travel outsid theck if Austin, TX, o		
			Goo		onicendider living	схренае
				5 -		
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt		Office he	eld
	expenditure to benefit C/OI	4				
	Date	Payee name				
	02/28/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code	<u> </u>			
	\$5,562.13	525 20th Street				
		San Francisco, CA 94107				
	PURPOSE		b) Desc	crintion		
	OF	Salaries/Wages/Contract Labor		cription heck if travel outsid	e of Texas. Com	plete Schedule T.
	EXPENDITURE	Salanos, Wagos, Contract Labor	□c	theck if Austin, TX, o	officeholder living	expense
			Gus	ito		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt		Office he	eld
	experientare to benefit C/OI					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/38 Rpt: 34/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	02/28/2024	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,547.09	525 20th Street
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gusto
		Gusto
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/28/2024	Gusto
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	525 20th Street
	ֆ25.00	525 ZUIT Street
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gusto
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/29/2024	Gusto
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,022.51	525 20th Street
	, ,,	
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
1		Gusto
L	0 1. 0	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 24/38 Rpt: 35/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	02/29/2024	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$940.01	525 20th Street
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Gusto
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/29/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.00	525 20th Street
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gusto
		Custo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Dayso nama
	03/05/2024	Payee name Gusto
	Amount (\$)	Payee address; City; State; Zip Code 525 20th Street
	\$174.82	525 Zuit Street
		05
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gusto
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 25/38 Rpt: 36/50	Soora, Karthik (Mr.)		00087369		
4	Date	5 Payee name		•		
	03/11/2024	Gusto				
6	Amount (\$)	7 Payee address; City; State; Zip Code	е			
	\$26.17	525 20th Street				
		San Francisco, CA 94107				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description		
	OF EXPENDITURE	Salaries/Wages/Contract Labor	Į	Check if travel outside of Texas. Complete Schedule T.		
	LXI LINDITORE		I	Check if Austin, TX, officeholder living expense		
			,	Gusto		
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held		
9	Complete ONLY if direct expenditure to benefit C/OI		IIL	Office field		
	Data					
	Date	Payee name				
	03/12/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code	е			
	\$855.00	525 20th Street				
		San Francisco, CA 94107				
	PURPOSE OF	, , ,	b)	Description		
	EXPENDITURE	Salaries/Wages/Contract Labor	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
				Gusto		
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held		
	expenditure to benefit C/OI	1				
	Date	Payee name				
	03/13/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code	e			
	\$15.00	525 20th Street				
		San Francisco, CA 94107				
	PURPOSE		h)	Description		
	OF	Salaries/Wages/Contract Labor	-, 	Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		į	Check if Austin, TX, officeholder living expense		
			•	Gusto		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held		
		•				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 26/38 Rpt: 37/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		·
	03/14/2024	Gusto		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$5,562.14	525 20th Street		
		San Francisco, CA 94107		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Gusto
				Custo
9	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht	Office held
	expenditure to benefit C/OI			Cindo note
_	Date	Payee name		
	03/14/2024	Gusto		
	Amount (\$)	Payee address; City; State; Zip Code	<u>e</u>	
	\$1,467.38	525 20th Street		
	Ψ1,407.00	323 2341 Suest		
		San Francisco, CA 94107		
	PURPOSE		h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	5)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/ Wages/ Solitact East		Check if Austin, TX, officeholder living expense
				Gusto
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
	Date	Payee name		
	04/02/2024	Gusto		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$24.90	525 20th Street		
		San Francisco, CA 94107		
	PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b)	Description
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Gusto
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 27/38 Rpt: 38/50	Soora, Karthik (Mr.)		00087369
4	Date	5 Payee name		·
	05/02/2024	Gusto		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$159.90	525 20th Street		
		San Francisco, CA 94107		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Gusto
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	06/03/2024	Gusto		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$13.54	525 20th Street		
		San Francisco, CA 94107		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if Austin TX officeholder living expense.
				Check if Austin, TX, officeholder living expense Gusto
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	03/06/2024	H-E-B		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$86.44	5106 Bissonnet St		
		Bellaire, TX 77040		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				H-E-B
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/OI	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/38 Rpt: 39/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
L	03/18/2024	Houston Chronicle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$99.98	4747 Southwest Fwy
		Houston, TX 77027
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Houston Chronicle
		Tiouston Childhole
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	04/10/2024	Houston Chronicle
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	4747 Southwest Fwy
	Ψ10.00	The Goddineset my
		Houston, TX 77027
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Houston Chronicle
		Houston Chionicle
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┝	Date	Payee name
	03/06/2024	Khyber North Indian Gr
H	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	2510 Richmond Avenue
	Ψ20.00	2310 Nichillona Avenue
		Houston, TX 77098
L	PURPOSE	I a .
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Khyber North Indian Gr
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	<u> </u>

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		re)
1	Total pages Schedule F1:		n Filers)
	Sch: 29/38 Rpt: 40/50	Soora, Karthik (Mr.) 00087369	
4	Date	5 Payee name	
	03/08/2024	Lewis, Antron	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$91.82	1034 Sauliner Street	
		Haveton TV 77040	
_	DUDDOS-	Houston, TX 77019	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Salaries/wages/contract Labor	
		Antron Lewis	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	Date	Payee name	
L	03/12/2024	Lewis, Antron	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$208.76	1034 Sauliner Street	
		Houston, TX 77019	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Antron Lewis	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
_			
	Date	Payee name	
	03/01/2024	Local Office	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$477.38	4909 Bissonet St	
		Houston, TX 77401	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Local Office	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	DH	
_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/38 Rpt: 41/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	03/15/2024	Mailmeteor
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	43 Boulevard Auguste Blanqui
		Paris NA 77007 France
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mailmeteor
		Thaill Total
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
\vdash	Date	Dougo nama
	02/26/2024	Payee name Merchblue
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.76	14833 NE 87th Street
		Redmond, WA 98042
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Merchblue
		Metchblue
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name Merchblue
	02/27/2024	
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.68	14833 NE 87th Street
		Redmond, WA 98042
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Merchblue
		MICICIDIUC
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

1g Expense Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mplet	e this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	_
	Sch: 31/38 Rpt: 42/50	Soora, Karthik (Mr.)		00087369	
4	Date	5 Payee name			
	02/26/2024	Mitchell, Michael			
6	Amount (\$)	7 Payee address; City; State; Zip Co	de		
	\$100.00	1320 Scott Street			
		Houston, TX 77003			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	[Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE		[Check if Austin, TX, officeholder living expense	
				Michael Mitchell	
_	Commisto ONII V if disent	Candidate/Officeholder serve		Office heald	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	gnt	Office held	
_					_
	Date	Payee name			
	02/26/2024	Mitchell, Michael			
	Amount (\$)	Payee address; City; State; Zip Co	de		
	\$100.00	1320 Scott Street			
		Houston, TX 77003			
_	DUDDOOF	(a) a		B 1 1 1 1	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) [Check if travel outside of Texas. Complete Schedule T.	
]]	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF]]	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Salaries/Wages/Contract Labor]] !	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou]] !	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou]] !	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
=	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou Payee name]] !	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou Payee name Mitchell, Michael	[[] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou Payee name Mitchell, Michael Payee address; City; State; Zip Co	[[] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou Payee name Mitchell, Michael	[[] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Co	[[] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$)	Salaries/Wages/Contract Labor Candidate/Officeholder name Office sou Payee name Mitchell, Michael Payee address; City; State; Zip Co	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 02/29/2024 Amount (\$) \$100.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Contract Labor Address: City; State; Zip Contract Labor	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 02/29/2024 Amount (\$) \$100.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Co. 1320 Scott Street Houston, TX 77003	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T.	
_	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$) \$100.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Contract Labor Address: City; State; Zip Contract Labor	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$) \$100.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Contract Labor Address: City; State; Zip Contract Labor	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 02/29/2024 Amount (\$) \$100.00	Salaries/Wages/Contract Labor Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Contract Labor All Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	[[[]]]] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 02/29/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Co. 1320 Scott Street Houston, TX 77003 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office south	[[[]]]] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 02/29/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Co. 1320 Scott Street Houston, TX 77003 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office south	[[[]]]] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 02/29/2024 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office south Payee name Mitchell, Michael Payee address; City; State; Zip Co. 1320 Scott Street Houston, TX 77003 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office south	[[[]]]] ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Michael Mitchell	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/38 Rpt: 43/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	03/01/2024	Mitchell, Michael
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1320 Scott Street
		Houston, TX 77003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Michael Mitchell
		Wildright Wildright
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/06/2024	Mitchell, Michael
H	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	1320 Scott Street
		Houston, TX 77003
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Michael Mitchell
		inionaer miterien
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/06/2024	Mitchell, Michael
H	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1320 Scott Street
		Houston, TX 77003
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Michael Mitchell
		WIIGHAEI WIIGHEII
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 33/38 Rpt: 44/50	Soora, Karthik (Mr.)	00087369
4	Date	5 Payee name	·
	03/04/2024	Ngp Van	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$159.90	1445 New York Avenue	
		Washington, DC 20005	
8	PURPOSE	-	Description
ľ	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	2 mee 2 terrioud/n terriai 2 perioe	Check if Austin, TX, officeholder living expense
			Ngp Van
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experialture to beliefit C/OI	'	
	Date	Payee name	
l	04/08/2024	Ngp Van	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	1445 New York Avenue	
l			
l		Washington, DC 20005	
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
l	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	·	Check if Austin, TX, officeholder living expense
			Ngp Van
L	Operation ONLY if dispose	Out district 10 ff and a little manner	Office health
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
┡	·		
	Date	Payee name	
	05/01/2024	Ngp Van	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.54	1445 New York Avenue	
		Washington, DC 20005	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Ngp Van
			Typ van
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction Guide	Salaries	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission Filers)
	Sch: 34/38 Rpt: 45/50	Soora, Kar	hik (Mr.)					00087369	
4	Date	5 Payee name							
	03/04/2024	Persuasion	and Pixels LLC						
6	Amount (\$) \$74.62	7 Payee addre		State; Zip C	ode				
		Washingto	n, DC 20036						
8	PURPOSE OF		ee Categories listed at the to	op of this schedule)	(b)	Description			
	EXPENDITURE	Consulting	Expense			=		de of Texas. Com officeholder living	
						Persuasion a			гелрепас
						. 0.0000.0			
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	03/01/2024	Phoneburn	er						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$180.15	1968 S. Co	ast Highway						
		Laguna Be	ach, CA 92651						
	PURPOSE OF		ee Categories listed at the to		(b)	Description		d4.T O	olata Calcadula T
	EXPENDITURE	Office Over	head/Rental Exper	ise		=		de of Texas. Com officeholder living	
						Phoneburner			
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught			Office he	eld
	Date	Payee name							
	04/01/2024	Phoneburn	er						
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode				
	\$228.07	1968 S. Co	ast Highway						
			ach, CA 92651						
\vdash	PURPOSE		ee Categories listed at the to		(h)	Description			
	OF		ee Categories listed at the to head/Rental Exper		(~)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		nedd/rteritar Exper	150		Check if Austin,	, TX,	officeholder living	expense
						Phoneburner			
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office so	ught			Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/38 Rpt: 46/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	05/22/2024	Postable
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.79	1180 6th Ave
		New York, NY 10036
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Postable
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	03/06/2024	RUN! WEBSITE BUILDER DESIGNEDTORUN
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.11	47 Bergen Street
	Ψ10.11	47 Beigen Street
		Brooklyn, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense RUN! WEBSITE BUILDER DESIGNEDTORUN
		NOW WEBSITE BOILDERNED FOR ON
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	04/08/2024	RUN! WEBSITE BUILDER DESIGNEDTORUN
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	47 Bergen Street
	Φ10.00	47 bergen Street
		Brooklyn, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense RUN! WEBSITE BUILDER DESIGNEDTORUN
		RON: WEBSITE BOILDER DESIGNEDTORON
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 36/38 Rpt: 47/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	05/06/2024	RUN! WEBSITE BUILDER DESIGNEDTORUN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.00	47 Bergen Street
		Brooklyn, NY 11201
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense RUN! WEBSITE BUILDER DESIGNEDTORUN
		NON. WEBSITE BSIEBEN BESIGNED FONON
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	D :	
	Date	Payee name
	06/04/2024	RUN! WEBSITE BUILDER DESIGNEDTORUN
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.28	47 Bergen Street
		Brooklyn, NY 11201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		RUN! WEBSITE BUILDER DESIGNEDTORUN
	Computate ONLY if direct	Condidate/Officeholder name Office pought
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2024	Smith, Danny
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	4909 Bisonnett Street
		Bellaire, TX 77401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	-	Check if Austin, TX, officeholder living expense
		Danny
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/38 Rpt: 48/50	Soora, Karthik (Mr.) 00087369
4	Date	5 Payee name
	02/27/2024	Smith, Danny
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1.00	4909 Bisonnett Street
		Bellaire, TX 77401
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Danny
		Duniy
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	03/11/2024	Switchboard Pbc
H	Amount (\$)	Payee address; City; State; Zip Code
	\$275.00	2001 K ST NW
		Washington, DC 20006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Switchboard Pbc
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г	Date	Payee name
	04/16/2024	Switchboard Pbc
	Amount (\$)	Payee address; City; State; Zip Code
	\$166.53	2001 K ST NW
		Washington, DC 20006
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Switchboard Pbc
		Switchboard Put
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 38/38 Rpt: 49/50	Soora, Karthik (Mr.)	00087369			
4	Date	5 Payee name	·			
	04/01/2024	Texas Ethics Commissio				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$180.15	201 E 14th St #10				
		Austin, TX 78701				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE		Check if Austin, TX, officeholder living expense			
			Texas Ethics Commissio			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
9	Complete ONLY if direct expenditure to benefit C/OI		Office field			
L	· · · · · · · · · · · · · · · · · · ·					
	Date	Payee name				
	04/02/2024	Texas Ethics Commissio				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,000.00	201 E 14th St #10				
		Austin, TX 78701				
	PURPOSE OF	,	Description			
	EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
			Texas Ethics Commissio			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
expenditure to benefit C/OH						
	Date	Payee name				
	03/20/2024	Zoom.us				
	Amount (\$) Payee address; City; State; Zip Code					
	\$15.00	55 Almaden Blvd				
		San Jose, CA 95113				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.			
	EXI ENDITORE		Check if Austin, TX, officeholder living expense			
			Zoom.us			
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held			
	expenditure to benefit C/OH					
H						

		FORM C/OH - FR		
	The Instruction Guide explains how to complete this form. ** Complete only if "Report Type" on page 1 is marked "Final Report" **	Page 50 of 50		
1	C/OH NAME	2 Filer ID (Ethics Commission Filers)		
	Soora, Karthik (Mr.)	00087369		
3	SIGNATURE	1		
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.			
	Mr. K	arthik Soora		
		andidate / Officeholder		
	<u> </u>			
4	FILER WHO IS NOT AN OFFICEHOLDER			
** Complete A & B below only if you are not an officeholder **				
	A CAMPAIGN FUNDS			
	Check only one:			
	X I do not have unexpended contributions or unexpended interest or income earned from poli	tical contributions.		
	I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code 254.204.			
	B ASSETS			
	Check only one:			
	X I do not retain assets purchased with political contributions or interest or other income from political contributions.			
	I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, 254.204.			
	Mr. K	arthik Soora		
	Signatu	re of Candidate		
5	OFFICEHOLDER			
	** Complete this section only if you are an officeholder **			
	I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.			
	Signatur	e of Officeholder		