JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commission 00061997	n Filers)	2 Total pages	s filed: 64
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER	The Honorable	Ravi K.			Date Received	
					ELECTRON	ICALLY FILED
					07/15/2024	
	NICKNAME	LAST Sandill		SUFFIX	01110/2024	
4 CANDIDATE /	ADDRESS / PO BOX; A	.PT / SUITE #; CI	ΓY;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
OFFICEHOLDER MAILING					Receipt #	Amount
ADDRESS	REDACTED PER 2	254.0313, GOV'T (CODE			
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mrs.	Mary Shannoi	n			
	NICKNAME	LAST			SUFFIX	
		Santee				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	APT / S	SUITE #; CITY;	5	STATE; ZIP CODE
TREASURER ADDRESS						
(Residence or Business)	REDACTED PER 2	254.0313, GOV'T (CODE			
7 CAMPAIGN TREASURER		IONE NUMBER	EXTENSION			
PHONE	(713) 942-5816					
8 REPORT TYPE	January 15	30th day befor	e election 🔲 Ru	noff	15th day after	campaign treasurer
						officeholder only)
	X July 15	8th day before		ceeded modified oorting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Ye	ar		Month Day	Year	
COVERED	02/25/2024	T	HROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Ye	ar XF	Primary	Runoff	Other	
	03/05/2024		General	Special		
11 OFFICE	OFFICE HELD (if any) District Judge District 1	27 Harris	1	2 OFFICE SOUGHT District Judge Dist		
		21 1101113				
			•			
		GO [·]	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.us		Vei	rsion V4.1.0.d378aba

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 64

I

13 C / OH NAME	Sandill, Ravi K. (The	Honorable)	14 Filer ID 00061997	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL	candidate / officeholder.	political contributions accepted or political expendi These expenditures may have been made withou d officeholders are required to report this information	tures made by political c t the candidate's or office	eholder's knowledge or
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELI		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAI	NS)	\$ 18,790.00
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·	IZED POLITICAL EXPENDITURES		\$ 234.50
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 239,603.57
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 107,862.07
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AT	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	ty of perjury, that the ac all information required t	companying report is to be reported by me
		The Ho	norable Ravi K. Sand	ill
		Signature	of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.d378aba0

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 64

18 FILER NAM Sandill, Ra	IE avi K. (The Honorable)	19 Filer ID 00061997	(Ethics C	ommission Filers)
20 SCHEDULE NAME OF S	SUE	STOTAL AMOUNT		
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	18,790.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	200,562.27
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	39,041.30
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	1,970.02
			-	

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 1/7 Rpt: 4/64	
2 FILER NAME Sandill, Ravi	K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061997	
02/28/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Brume, Friday 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$10.00	
	Houston, TX 77049		
	Principal Occupation		
Realtor		Realtor	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
Remax East			
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
03/01/2024	Carrigan, Mark		\$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77042		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Carrigan Law	<i>i</i> Group P.C.		
If contributor is	s a child, law firm of parent(s) (if any)		
Date 03/02/2024	Full name of contributor out-of-state PAC (ID#: Dao, Andrew)	Amount of Contribution (\$) \$500.00
00/02/2024	Contributor address; City; State; Zip Code		
	Houston, TX 77006		
Contributor's P	rrincipal Occupation	Contributor's Job Title	
Attorney		Attorney	
	mployer/law firm	Law firm of contributor's sp	oouse (if anv)
Daly & Black			
If contributor is	a child, law firm of parent(s) (if any)	I	
Eorme provided	ov Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 d378aba0

The Instructior	Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/7 Rpt: 5/64	
2 FILER NAME Sandill, Ravi K. (1	he Honorable)		3 Filer ID (Ethics Commission Filers) 00061997
02/27/2024 D	ull name of contributor out-of-state PAC (ID#:_ pas, Micky ontributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,000.00	
н	louston, TX 77057		
8 Contributor's Princip Attorney	al Occupation	9 Contributor's Job Title Owner	
10 Contributor's employ Tyler & Das	yer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor is a ch	ild, law firm of parent(s) (if any)	<u> </u>	
03/05/2024 D			Amount of Contribution (\$) \$1,000.00
	louston, TX 77002		
Contributor's Princip Lawyer	al Occupation	Contributor's Job Title Partner	
Contributor's employ Baker Botts L.L.P If contributor is a ch		Law firm of contributor's sp	ouse (if any)
02/28/2024 E	ull name of contributor out-of-state PAC (ID#:_ ssmyer, Michael ontributor address; City; State; Zip Code)	Amount of Contribution (\$) \$100.00
H	ilshire Village, TX 77055		
Contributor's Princip Attorney	al Occupation	Contributor's Job Title Owner	
Contributor's employ		Law firm of contributor's sp	ouse (if any)
The Essmyer Law	IId, law firm of parent(s) (if any)		
	exas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.d378aba0

The Instruc	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 3/7 Rpt: 6/64	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	K. (The Honorable)		00061997
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	7 Amount of Contribution (\$)	
02/27/2024	Friedrich, Mary Anne		\$25.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77096		
8 Contributor's F	Principal Occupation		
Retired		Retired	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	bouse (if any)
Retired			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/04/2024	Hansen, Shelby	/	\$5.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77007		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Fundraising		Director of Operations	
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
Strong Strate			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/27/2024	Hiran, S. Bruce		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77026		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Attorney		Litigation & Appellate A	ttorney
	mployer/law firm	Law firm of contributor's sp	bouse (if any)
	eter Law Firm		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.d378aba0

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 4/7 Rpt: 7/64	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sandill, Ravi	K. (The Honorable)		00061997
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	7 Amount of Contribution (\$)	
03/03/2024	Kuriakos Ciesil, Maria		\$100.00
	6 Contributor address; City; State; Zip Code		
	Chicago, IL 60646	9 Contributor's Job Title	
	Principal Occupation		
Judge		Associate Judge	
10 Contributor's e		11 Law firm of contributor's sp	
	of Cook County	Law Offices of James C	JIESII
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/01/2024	Lapidus, Mark		\$500.00
	Contributor address; City; State; Zip Code		
	Bellaire, TX 77401		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Lapidus Knu	dsen P.C.		
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/04/2024	Medina, David		\$100.00
	Contributor address; City; State; Zip Code		
	Houston TV 77020		
Constributorio	Houston, TX 77030	Contributoria Job Title	
Attorney	Principal Occupation	Contributor's Job Title Partner	
-	employer/law firm	Law firm of contributor's sp	nouse (if any)
	ns Riley & Scarborough		
	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.d378aba0

The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 5/7 Rpt: 8/64	
2 FILER NAME Sandill, Ravi	K. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061997
4 Date 02/27/2024	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$1,000.00
	 6 Contributor address; City; State; Zip Code Houston, TX 77057 		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney			
10 Contributor's e	employer/law firm	Partner 11 Law firm of contributor's sp	nouse (if any)
Midani Law F			
	s a child, law firm of parent(s) (if any)		
Data			Automatic Constraints (D)
Date 02/27/2024	Full name of contributor out-of-state PAC (ID#:_ Penn, Eric)	Amount of Contribution (\$) \$2,500.00
02/2/1/2024			\$2,500.00
	Contributor address; City; State; Zip Code		
	Jacksonville, TX 75766-1309		
	Principal Occupation	Contributor's Job Title	
Attorney		President	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
The Penn La			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/24/2024	Political Action Committee of Winstead PC		\$1,500.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75201		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 6/7 Rpt: 9/64
2 FILER NAME Sandill, Ravi	K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061997	
4 Date 03/01/2024	 5 Full name of contributor out-of-state PAC (ID#: Selbe, Steven 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00
	Kingwood, TX 77345		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	1
Attorney		Senior Counsel	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Gordon Ree			
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date)	Amount of Contribution (\$)
03/01/2024	The Ammons Law Firm, LLP		\$2,500.00
	Contributor address; City; State; Zip Code		
	Houston TX 77006		
Contributoria	Houston, TX 77006	Contributor's Job Title	
Contributors	Principal Occupation		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/30/2024	The Feldman Law Firm		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77057		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
L Formo providad	by Texas Ethics Commission www.ethic	e etato ty ue	Version V/1 1 0 d278aba0

The Instruc	tion Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 7/7 Rpt: 10/64	
2 FILER NAME Sandill, Ravi	K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061997	
03/05/2024	 5 Full name of contributor out-of-state PAC (ID#: The Impact Fund 6 Contributor address; City; State; Zip Code 	7 Amount of Contribution (\$) \$5,000.00	
	Washington, DC 20001		
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	I
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/17/2024	Tung, Joseph		\$250.00
	Contributor address; City; State; Zip Code Houston, TX 77056		
Contributor's P	rincipal Occupation	Contributor's Job Title	
Attorney		Houston Office Director	
	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Grable Martir			
If contributor is	a child, law firm of parent(s) (if any)	I	
Date 02/27/2024	Full name of contributor out-of-state PAC (ID#: Zahid, Zeinab Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
	Houston, TX 77080		
	rincipal Occupation	Contributor's Job Title	
	Attorney Managing Partner		
Contributor's e	mployer/law firm	Law firm of contributor's sp	ouse (if any)
	a child, law firm of parent(s) (if any)		
	ov Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 d378aba0

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Printing Expense	xpense Vages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	ILER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 1/7 Rpt: 11/64	andill, Ravi K. (The Honorable)		00061997		
4	Date 03/04/2024	ayee name ceves Communications				
_						
6	Amount (\$) \$96,330.00	ayee address; City; State; Zip Co 2.O. Box 6514 Iouston, TX 77265	ae			
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) dvertising Expense	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense I advertising and fees		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ght	Office held		
	Date	ayee name				
	03/08/2024	ceves Communications				
	Amount (\$)	ayee address; City; State; Zip Co	de			
	\$7,088.15	O. Box 6514 louston, TX 77265	(b) Description			
	OF	ategory (See Categories listed at the top of this schedule) dvertising Expense	Check if Austin	outside of Texas. Complete Schedule T. , TX, officeholder living expense d texting services		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ght	Office held		
	Date	ayee name				
	03/07/2024	rinson, Isaiah				
	Amount (\$) \$900.00	ayee address; City; State; Zip Co 738 E Hampton Dr	de			
		louston, TX 77039				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) alaries/Wages/Contract Labor		outside of Texas. Complete Schedule T. , TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sou	ght	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide expla	Office Ov Polling Ex Printing E Salaries/V	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 2/7 Rpt: 12/64		Sandill, Ravi K. (The Honorable)					00061997
4	Date	5	Payee name					
	02/29/2024		Chase Cardmember Services					
6	Amount (\$)	7	Payee address; City; Si	tate; Zip Co	ode			
	\$946.04		P.O. Box 6294					
			Carol Stream, IL 60197					
_					1			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description		
	EXPENDITURE		Credit Card Payment					ide of Texas. Complete Schedule T. , officeholder living expense
						Credit Card F		
						croat card r	uj	mont
_	Complete ONILV if divest		Sendidate (Office helder perce	0#:00				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ugnt			Office held
	Date		Payee name					
	03/07/2024		Chase Cardmember Services					
	Amount (\$)	┢	Payee address; City; Si	tate; Zip Co	ode			
	\$12,364.49		P.O. Box 6294					
	+==,000							
			Carol Stream, IL 60197					
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description		
	OF EXPENDITURE		Credit Card Payment					ide of Texas. Complete Schedule T.
	-							, officeholder living expense
						Credit Card F	ay	ment
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	04/05/2024		Chase Cardmember Services					
	Amount (\$)		Payee address; City; Si	tate; Zip Co	ode			
	\$5,980.99		P.O. Box 6294					
			Carol Stream, IL 60197					
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description		
	OF EXPENDITURE		Credit Card Payment					ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
					1	Credit Card F	'ay	rment
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ught			Office held
	expenditure to benefit C/OI	Н						

	EXPENDITURE CATEGOR	RIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains I	Loan Repayment/Reimbursemen Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor now to complete this form.						
1 Total pages Schedule F1: 2 FILER	NAME		3 Filer ID (Ethics Commission Filers)					
	ill, Ravi K. (The Honorable)		00061997					
4 Date 5 Payee	name							
04/05/2024 Chas	hase Cardmember Services							
6 Amount (\$) 7 Payee	address; City; State;	Zip Code						
\$5,980.99 P.O.	Box 6294							
Carol	Carol Stream, IL 60197							
8 PURPOSE (a) Categ	Ory (See Categories listed at the top of this sch	edule) (b) Description						
	t Card Payment	Check if trav	vel outside of Texas. Complete Schedule T.					
			stin, TX, officeholder living expense					
		Credit Card	Payment					
9 Complete <u>ONLY</u> if direct Candida expenditure to benefit C/OH	ate/Officeholder name C	office sought	Office held					
Date Payee	name							
04/30/2024 Chas	e Cardmember Services							
Amount (\$) Payee	address; City; State;	Zip Code						
	Box 6294							
Q11,501.20 1.0.	B0X 0234							
Carol	Stream, IL 60197							
PURPOSE (a) Categ	Ory (See Categories listed at the top of this sch	edule) (b) Description						
OF EXPENDITURE Credi	t Card Payment		vel outside of Texas. Complete Schedule T.					
			stin, TX, officeholder living expense					
		Credit Cart	a Fayment					
Complete ONLV if direct Condid	ata (Office helder name	ffice courset	Office hold					
Complete <u>ONLY</u> if direct Candidate expenditure to benefit C/OH	ate/Officeholder name C	office sought	Office held					
	name							
04/30/2024 Chas	e Cardmember Services							
		Zip Code						
\$11,901.26 P.O.	Box 6294							
Carol	Stream, IL 60197							
	Ory (See Categories listed at the top of this sch							
EXPENDITURE	t Card Payment		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense					
		Credit Card						
		Credit Cart	ar aymont					
Complete ONLV if direct	ato/Officebolder pame		Office held					
Complete <u>ONLY</u> if direct Candidate expenditure to benefit C/OH	ate/Officeholder name C	ffice sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense pense pens (pens /ages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 14/64		Sandill, Ravi K. (The Honorable)					00061997
4	Date	5	Payee name					
	06/05/2024		Chase Cardmember Services					
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de			
	\$7,539.89		P.O. Box 6294					
			Carol Stream, IL 60197					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	adula)	(b)	Description		
	OF	ľ	Credit Card Payment	ieuuie)	• •		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, тх,	officeholder living expense
						Credit Card F	Pay	ment
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght			Office held
⊨	-							
	Date		Payee name					
	03/11/2024		Davis, Carl					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$750.00		1507 California St.					
			#2					
			Houston, TX 77006					
_	PURPOSE	(a)	Category (See Categories listed at the top of this sch	adula)	(b)	Description		
	OF	ľ	Consulting Expense	ieuuie)	• •		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, тх,	officeholder living expense
						Voter outread	ch s	services
	Complete ONLY if direct		Candidate/Officeholder name 0	Office sou	ght			Office held
	expenditure to benefit C/OI	-						
	Date		Payee name					
	03/07/2024		Harry's Restaurant					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$740.55		318 Tuam					
			Houston, TX 77006					
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description		
	OF		Food/Beverage Expense	,			outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						Breakfast me	etir	ng
	Complete <u>ONLY</u> if direct		Candidate/Officeholder name	Office sou	ght			Office held
	expenditure to benefit C/OI	1						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		5	Office Ove Polling Ex Printing E Salaries/V	erhea pense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Tatal as use Oak adula E4		The Instruction Guide explain	is now to co	mpie	ete this form.					
1	Total pages Schedule F1: Sch: 5/7 Rpt: 15/64		FILER NAME Sandill, Ravi K. (The Honorable)				3	Filer ID (Ethics Commission Filer 00061997	rs)		
4	Date 02/26/2024	I	Payee name MJE Strategies LLC								
6	Amount (\$)		-	te; Zip Co	oho						
U	\$33,749.01		Fremont, CA 94536								
8	PURPOSE OF EXPENDITURE		 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Direct mail 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held			
	Date		Payee name								
	02/27/2024		Piryx, Inc.								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$209.40	I	995 Market St.								
			2nd Floor								
			San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Fees	schedule)	(b)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense :essing fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held			
	Date		Payee name								
	03/01/2024		Piryx, Inc.								
	Amount (\$) \$132.20		Payee address; City; Sta 995 Market St. 2nd Floor San Francisco, CA 94103	te; Zip Co	ode						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this : Fees	schedule)	(b)		, тх,	ide of Texas. Complete Schedule T. , officeholder living expense ressing fees			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held			

			EXPENDIT	URE CATEGOR	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Ex Gift/Awards/Memo nmittee Legal Services	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 6/7 Rpt: 16/64		Sandill, Ravi K. (The Ho	norable)				00061997				
4	Date	5	Payee name									
	06/17/2024		Piryx, Inc.									
6	Amount (\$)	7	Payee address; City;	ayee address; City; State; Zip Code								
	\$10.00		995 Market St.									
			2nd Floor									
			San Francisco, CA 9410	3								
8	PURPOSE	(a)	Category (See Categories listed	l at the ton of this sch	edule)	(b) Description						
	OF EXPENDITURE		Fees		ouuloy		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITORE							, officeholder living expense				
						Credit card p	roc	essing fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	e C	Office sou	int		Office held				
	Date		Payee name									
	03/05/2024		Strong Strategies, LLC									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$1,502.04		325 W. 18th St.									
			Houston, TX 77008									
	PURPOSE OF	(a)	Category (See Categories listed	I at the top of this sche	edule)	(b) Description						
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T. , officeholder living expense				
								l compliance services				
						5		·				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	e C)ffice sou	jht		Office held				
	Date		Payee name									
	06/30/2024		The Ammons Law Firm									
	Amount (\$)		Payee address; City;	State:	Zip Co	le						
	\$2,500.00		3700 Montrose Blvd	Otato,	210 00							
	+_,000.00											
			Houston, TX 77006									
	PURPOSE OF	(a)	Category (See Categories listed		edule)	(b) Description	outo:	ide of Texas. Complete Schedule T.				
	EXPENDITURE		Loan Repayment/Reimb	ursement				, officeholder living expense				
								aign donation overage				
							•	- •				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	e C) Office sou	jht		Office held				

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental Ex- Food/Beverage Expense Polling Expense I Committee Legal Services Salaries/Wages/Contract I The Instruction Guide explains how to complete this for	xpense Transportation Equipment & Related Expense Travel in District Travel Out of District Labor OTHER (enter a category not listed above)
1 Total pages Cabadula E1		3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1:		
Sch: 7/7 Rpt: 17/64	Sandill, Ravi K. (The Honorable)	00061997
4 Date	5 Payee name	
02/26/2024	Veritex Bank	
6 Amount (\$) \$18.00	 7 Payee address; City; State; Zip Code 5111 San Felipe St. Houston, TX 77056 	
8 PURPOSE OF EXPENDITURE		otion :k if travel outside of Texas. Complete Schedule T. :k if Austin, TX, officeholder living expense r ansfer fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
03/04/2024	Veritex Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$18.00	5111 San Felipe St. Houston, TX 77056	
PURPOSE OF EXPENDITURE		otion sk if travel outside of Texas. Complete Schedule T. sk if Austin, TX, officeholder living expense ransfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held

		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tran Trav Trav	licitation/Fundraising Expense ansportation Equipment & Related Expense avel in District avel Out of District THER (enter a category not listed above)				
		-		how to complete this form.		(0)		,		
1	Total pages Schedule F4:	2 FILER NAME			3	3 Filer ID (Ethic	s Commiss	ion Filers)		
	Sch: 1/44 Rpt: 18/64	Sandill, Ravi K. (Th	e Honorable)			00061997				
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ						
	ISSUER	Chas	e Bank	EXPENDITURES \$ 234 CHARGED TO A CREDIT CARD			234.5	0		
6	PAYMENT	(a) Amount Charged \$25.00	(b) Date of Charge 02/25/2024	(c) Date(s) Credit Card Is 03/06/2024	suer F	Paid				
7	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code		
		New Pleasant Grov	e Missionary	3221 Bain St						
				Houston, TX 77026						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	X Political	Contributions/Donatio	ns Made By	Donation						
	Non-Political	Candidate/Officehold			. TV of	ifiachalder living over				
٩	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	1, 1 X, 01	ficeholder living expe	inse			
	xpenditure to benefit C/OH			inter cought						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer F	Paid				
		\$79.01	02/27/2024	03/06/2024						
	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code		
		Kokoro		409 Travis St #366						
				Houston, TX 77002						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	X Political	Food/Beverage Expe	,	Judges' Lunch						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	n, TX, of	ficeholder living expe	ense			
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name C	Office sought		Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer F	Paid				
		\$31.92	02/28/2024	03/06/2024						
	PAYEE	(a) Payee name	1	(b) Payee address;		City,	State,	Zip Code		
		Crien		2220 Bevis St						
		Crisp								
		(a) Catagony		Houston, TX 77008						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Lunch meeting						
	X Political	Food/Beverage Expe	nse							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin	n. TX of	ficeholder living expe	inse			
	Complete ONLY if direct	Candidate/Officeholder		Diffice sought	,, 01	Office held				
e	xpenditure to benefit C/OH									

Advertising Expense	EXPI Event Exp		Loan Repayment/R	.,	licitation/Fundraising E	Typense				
Accounting/Banking Consulting Expense	Fees Food/Beve	erage Expense	Office Overhead/Re Polling Expense	ental Expense Tr Tr	ansportation Equipmer avel in District		Expense			
Contributions/ Donations Made By Candidate/Officeholder/Politica		ls/Memorials Expense <i>v</i> ices	Printing Expense Salaries/Wages/Co		avel Out of District THER (enter a category	y not listed al	oove)			
	The Inst	ruction Guide explains h	now to complete	this form.						
1 Total pages Schedule F4:					3 Filer ID (Ethic	s Commiss	sion Filers)			
Sch: 2/44 Rpt: 19/64	Sandill, Ravi K. (Th	•			00061997					
4 CREDIT CARD ISSUER	Name of fina	ncial institution		OF UNITEMIZED	¢	234.5	50			
1000ER	see p	revious		GED TO A CREDIT	Ť	¢ 204.00				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid					
	\$25.00	02/25/2024	03/06/20	124						
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Destine	3215 Lyc	3215 Lyons Ave						
	Lyons Unity Missio	nary Baptist								
				TX 77020						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip Donation							
	Contributions/Donation			I						
X Political	Candidate/Officehold									
Non-Political	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	T. Iffice sought	Check if Austin, TX,	officeholder living expe	ense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoide	i name – O	fince sought		Onice held					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid					
	\$41.59 02/25/2024)24						
	Ψ41.00	02/23/2024								
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code			
	Teotihuacan Mexic	an Cafa	1511 Airl	1511 Airline Dr						
	Teounuacan Mexic	all Cale								
	(a) Catagory			Houston, TX 77009						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Breakfast meeting							
X Political	Food/Beverage Expe	nse	Dicarias	lineeting						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	ense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name O	ffice sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid					
	\$50.00	02/26/2024	03/06/20	124						
PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code			
	Kashmere Gardens	s Missionary	4302 Ca	valcade						
		-	Houston	TX 77026						
PURPOSE OF	(a) Category		(b) Descrip							
EXPENDITURE	(See Categories listed at the top		Donation							
X Political	Contributions/Donation Candidate/Officehold		e							
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	ense				
Complete ONLY if direct	Candidate/Officeholder	r name O	ffice sought		Office held					
expenditure to benefit C/OH										

		ENDITURE CATEGOR								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	l Expense Tra Tra Tra	Jlicitation/Fundraising Expense ansportation Equipment & Related Expense avel in District avel Out of District THER (enter a category not listed above)					
	The Inst	truction Guide explains h	ow to complete this	s form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
Sch: 3/44 Rpt: 20/64	Sandill, Ravi K. (Th	ne Honorable)			00061997					
4 CREDIT CARD	Name of fina	ncial institution			<u>.</u>	004				
ISSUER	see p	revious	EXPENDI CHARGEI CARD	D TO A CREDIT	\$	234.5	50			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	redit Card Issuer	Paid					
	\$63.73	02/27/2024	03/06/2024							
7 PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code			
	Avalon Diner		2417 Westh	neimer Rd						
			Houston, T	X 77098						
8 PURPOSE OF	(a) Category		(b) Descriptio							
	(See Categories listed at the top Food/Beverage Expe	,	Breakfast m	neeting						
X Political										
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	ense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name Of	ffice sought		Office held					
expenditure to benefit C/OH	(a) Amount Charged	(b) Data of Charge		redit Cand Jacuar	Daid					
PAYMENT (a) Amount Charged (b) Date of Charge			(c) Date(s) C 03/06/2024	redit Card Issuer	Pald					
	\$500.00	02/27/2024								
PAYEE	(a) Payee name		(b) Payee ad		City,	State,	Zip Code			
	Just Texas		PO Box 1624							
			Austin TV 79767							
PURPOSE OF	(a) Category		Austin, TX 78767 (b) Description							
EXPENDITURE	(See Categories listed at the top	,	Donation							
X Political	Contributions/Donation Candidate/Officehold		e							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. 🗌	Check if Austin, TX,	officeholder living expe	ense				
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C 03/06/2024	redit Card Issuer	Paid					
	\$223.63	03/03/2024	03/00/2024							
PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code			
			2201 Airline	e Dr						
	Houston Dairymaid	IS								
			Houston, T							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descriptio							
	Food/Beverage Expe		Food for campaign event							
X Political										
Non-Political		of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	ense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name Of	ffice sought		Office held					

	ES MADE BY C				SCI	HEDULI	e F4			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve / - Gift/Award d Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Trans Trave Trave	el in District el Out of District	quipment & Related Expense				
		ruction Guide explains I	now to complete this form.							
1 Total pages Schedule F4:				-	Filer ID (Ethic	s Commiss	ion Filers)			
Sch: 4/44 Rpt: 21/64	Sandill, Ravi K. (Th	e Honorable)	1	-	0061997					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$	\$ 234.50					
6 PAYMENT	(a) Amount Charged \$416.43	(b) Date of Charge 03/05/2024	(c) Date(s) Credit Card 03/05/2024	Issuer P	Paid					
7 PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code			
			2032 Dunlavy St	2032 Dunlavy St						
	Ostia									
			Houston, TX 77006							
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Lunch with campaign volunteers							
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, offi	iceholder living expe	ense				
9 Complete ONLY if direct	Office sought		Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$145.16	(b) Date of Charge 03/06/2024	(c) Date(s) Credit Card 03/06/2024	Issuer P	Paid					
PAYEE	(a) Payee name	I	(b) Payee address;		City,	State,	Zip Code			
	Bloom & Bee		1600 W Loop S							
			Houston, TX 77027							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Breakfast meeting							
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, offi	iceholder living expe	ense				
Complete ONLY if direct	Candidate/Officeholder	name C	office sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer P	Paid					
	\$1,370.88	03/02/2024	03/06/2024							
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code			
	-		2617 W. Holcombe							
	Total Wine & More									
			Houston, TX 77025							
	(a) Category	of this sphericula)	(b) Description							
	(See Categories listed at the top Food/Beverage Expen		Refreshments for ca	Impaign	event					
X Political		-								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, offi	iceholder living expe	inse				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought		Office held					

EXPENDITORE			U	SCHEDULE F4				
	EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards I Committee Legal Serv	rage Expense s/Memorials Expense ices	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	Solicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District DTHER (enter a category not listed above)				
1 Total pages Schedule F4:		-		3 Filer ID (Ethics Commission Filers)				
Sch: 5/44 Rpt: 22/64	Sandill, Ravi K. (Th	e Honorable)		00061997				
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED					
ISSUER		revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$ 234.50				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$22.02	03/03/2024	03/06/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			5150 Buffalo Speedway					
	Kroger							
			Houston, TX 77005					
8 PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Refreshments for campa	ian event				
Delition	Food/Beverage Expe	nse	i tonoonno no oampaign ovont					
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX	K, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$50.00	(b) Date of Charge 03/03/2024	(c) Date(s) Credit Card Issue 03/06/2024	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
			8101 Wileyvale Rd					
	Forest Lawn Missio	nary Baptist						
			Houston, TX 77016					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Donation					
X Political	Contributions/Donatio		9e					
Non-Political	I	of Texas. Complete Schedule		, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	•	ffice sought	Office held				
expenditure to benefit C/OH			nice cought	emee neu				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Pr Paid				
	.,	.,	03/06/2024					
	\$75.00	03/04/2024						
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		- 41114	2019 Crawford St					
	St. John's United M	ethodist						
			Houston, TX 77002					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top		Donation					
X Political	Contributions/Donatio Candidate/Officeholde							
Non-Political	Ι			(office bolder living comments				
		of Texas. Complete Schedule		C, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held				

EXPENDITORE	SCHEDULE F4			
	EXPE	ENDITURE CATEGOR	IES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expe Fees Food/Beve - Gift/Award I Committee Legal Serv	ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement S Office Overhead/Rental Expense T Polling Expense T Printing Expense T	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District DTHER (enter a category not listed above)
1 Total pages Schedule F4:		-		3 Filer ID (Ethics Commission Filers)
Sch: 6/44 Rpt: 23/64	Sandill, Ravi K. (Th	e Honorable)		00061997
	-	ncial institution	5 TOTAL OF UNITEMIZED	
4 CREDIT CARD ISSUER		revious	EXPENDITURES CHARGED TO A CREDIT CARD	\$ 234.50
6 PAYMENT	(a) Amount Charged \$108.25	(b) Date of Charge 03/05/2024	(c) Date(s) Credit Card Issue 03/06/2024	er Paid
7 PAYEE	(a) Payee name	I	(b) Payee address;	City, State, Zip Code
			6103 Kirby Dr	
	River Oaks Plant H	ouse		
			Houston, TX 77005	
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top	of this schedule)	Decor for campaign even	t
X Political	Event Expense			
	–			
Non-Political		of Texas. Complete Schedule		, officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged \$70.92	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issue 03/06/2024	er Paid
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			1706 Westheimer Rd	
	Common Bond Caf	e & Bakery		
			Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description	
	Food/Beverage Expe		Breakfast for staff	
X Political	· · · · · · · · · · · · · · · · · · ·			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, TX	, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid
	\$100.00	03/03/2024	03/06/2024	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			1024 Pinemont	
	Community of Faith	1		
			Houston, TX 77091	
PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top		Donation	
X Political	Contributions/Donatio		e	
Non-Political	- 1	of Texas. Complete Schedule		, officeholder living expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	Office held
expenditure to benefit C/OH	Sandidate/Onicendider	11ame 0	into obugin	

			D		SCI	HEDUL	e F4		
	EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)						
Advertising Expense Accounting/Banking	Event Expe Fees	ense	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Sol Tra	licitation/Fundraising E Insportation Equipmen	xpense t & Related I	Expense		
Consulting Expense Contributions/ Donations Made By	Food/Beve	rage Expense s/Memorials Expense	Polling Expense Printing Expense	Tra	avel in District				
Candidate/Officeholder/Politica			Salaries/Wages/Contract Labor		HER (enter a category	not listed at	oove)		
	The Instr	ruction Guide explains h	ow to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 7/44 Rpt: 24/64	Sandill, Ravi K. (Th	e Honorable)			00061997				
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEM	IZED					
ISSUER	see pr	evious	EXPENDITURES CHARGED TO A CF		\$	234.5	50		
			CARD						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid				
	\$20.95	03/03/2024	03/06/2024						
	+=0.00	00,00,202							
7 PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
		101 Aurora St							
	Tenfold Coffee Con	npany							
			Houston, TX 77008						
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top		Breakfast meeting						
X Political	Food/Beverage Exper	150							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	stin, TX, d	officeholder living expe	ense			
9 Complete ONLY if direct	ffice sought		Office held						
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid				
	\$98.94	03/05/2024	03/06/2024						
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
	Whale Feede		2955 Kirby Dr						
	Whole Foods								
			Houston, TX 77098	Houston, TX 77098					
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description						
	Food/Beverage Exper		Refreshments for ca	mpaig	in event				
X Political	5								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		stin, TX, d	officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid				
	\$5,000.00	03/06/2024	03/06/2024						
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
	South Asian Bar As	sociation	1600 Lamar St.						
	South Asian Dai As	3001411011							
	(-) 0-+-		Houston, TX 77010						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
_	Contributions/Donatio	ns Made By	Event sponsorship						
X Political	Candidate/Officeholde	er/Political Committe	e						
Non-Political		of Texas. Complete Schedule		stin, TX, d	officeholder living expe	ense			
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held				
expenditure to benefit C/OH									

		EXI	PENDITURE CATEGOR	RIES FOR BOX 1	.0(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Awa	verage Expense rds/Memorials Expense	Loan Repayment/Re Office Overhead/Rer Polling Expense Printing Expense Salaries/Wages/Con	ntal Expense Tra Tra Tra	licitation/Fundraising I ansportation Equipmen avel in District avel Out of District FHER (enter a categor	nt & Related I	
		The In	struction Guide explains	how to complete th	nis form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 8/44 Rpt: 25/64	Sandill, Ravi K. (T	he Honorable)			00061997		
4	CREDIT CARD	Name of fin	ancial institution			¢	224 5	0
	ISSUER	see	previous		DITURES ED TO A CREDIT	\$	234.5	50
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	Paid		
		\$81.66	03/05/2024	03/06/202	24			
7	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
		Pink's Pizza		1009 Moy	St			
		PILIK S PIZZA						
				Houston,				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Descript Food for v				
		Food/Beverage Exp	. ,		oluniteers			
	Non-Political	(c) Check if travel outsic	le of Texas. Complete Schedule	• ⊤. Dffice sought	Check if Austin, TX,	officeholder living exp Office held	ense	
9 P	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicentito		Since Sought		Onice neiu		
Ĕ		(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$130.55	03/05/2024	03/06/202				
⊢	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
				2222 She	arn St			
		Chick-Fil-A						
				Houston,				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Descript				
	X Political	Food/Beverage Exp	, ,	Food for v	ounteers			
	Non-Political		le of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct	Candidate/Officehold	er name C	Office sought		Office held		
e	xpenditure to benefit C/OH					- Dalid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/04/202	Credit Card Issuei	r Paid		
		\$84.69	03/06/2024	0 110 11202				
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
		Underbelly Burge	r	2520 Airlii	ne Dr			
				Houston,				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Descript Staff luncl				
	X Political	Food/Beverage Exp		Stair Will				
	Non-Political					<i>m</i>		
⊢		(c) Check if travel outsic	le of Texas. Complete Schedule	e T. Dffice sought	Check if Austin, TX,	officeholder living exp Office held	ense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH			Shiel Sought				

			ENDITURE CATEGORI		.,			
	Advertising Expense Accounting/Banking Consulting Expense	Event Exp Fees Ecod/Roy	(Loan Repayment/R Office Overhead/Re Polling Expense	ental Expense Tra	licitation/Fundraising E ansportation Equipmer avel in District		Expense
	Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	ls/Memorials Expense F	Printing Expense Salaries/Wages/Co	Tra	avel Out of District THER (enter a category	not listed at	oove)
		5	ruction Guide explains ho	-			not notod di	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 9/44 Rpt: 26/64	Sandill, Ravi K. (Th	ne Honorable)			00061997		
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED		0045	- 0
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	234.5	50
6	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issuer	r Paid		
		\$13.98	03/23/2024	04/04/20	124			
-	PAYEE	(a) Payee name		(b) Payee	addross.	City,	State,	Zip Code
ľ				182 How		City,	State,	
		Uber		102 1101				
				San Frar	ncisco, CA 94105			
8	PURPOSE OF	(a) Category		(b) Descri				
		(See Categories listed at the top Travel In District	of this schedule)	Car from	lunch meeting			
	X Political							
	Non-Political		of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living expe	ense	
		Candidate/Officeholde	r name Off	ice sought		Office held		
e	xpenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Dato(c)) Credit Card Issuer	Paid		
	FAIMENT			04/04/20		Faiu		
		\$20.93	03/23/2024					
	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code
		Uber		182 How	ard St			
		Obei						
_	PURPOSE OF	(a) Category		(b) Descri	ncisco, CA 94105			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	.,	nch meeting			
	X Political	Travel In District						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. I	Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholde	r name Off	ice sought		Office held		
e	xpenditure to benefit C/OH		•					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/04/20) Credit Card Issuer	r Paid		
		\$121.31	03/27/2024	04/04/20				
-	PAYEE	(a) Payee name		(b) Payee	address:	City,	State,	Zip Code
					stheimer Blvd.			
		River Oaks Donuts	i	Suite A				
					TX 77450			
	PURPOSE OF	(a) Category	of this schedule)	(b) Descrip				
EXPENDITURE (See Categories listed at the top of this schedule) Breakfast for jurors Food/Beverage Expense Food/Beverage Expense Food/Beverage Expense								
	X Political							
	Non-Political	(C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholde	r name Off	ice sought		Office held		

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award al Committee Legal Serv	erage Expense Is/Memorials Expense	Loan Repayment/Re Office Overhead/Rer Polling Expense Printing Expense Salaries/Wages/Con	timbursement Scontal Expense Transformer tract Labor OT	blicitation/Fundraising E ansportation Equipmen avel in District avel Out of District THER (enter a category	& Related E	
	i		low to complete th		1		
1 Total pages Schedule F4:					3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 10/44 Rpt: 27/64	Sandill, Ravi K. (Th	ne Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES	\$	234.5	50
			CHARG CARD	ED TO A CREDIT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	Credit Card Issue	r Paid		
	\$25.98	03/28/2024	04/04/202	24			
7 PAYEE	(a) Payee name	•	(b) Payee a	address;	City,	State,	Zip Code
			2950 N Lo	oop West			
	Lanz & Swinney		Suite 500	-			
			Houston.	TX 77092			
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	,	IT service	S			
X Political	Office Overhead/Ren	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. [Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	r name O	office sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$221.39	04/01/2024	04/04/202	24			
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
			3815 Wes	stheimer Rd			
	Central Market						
			Houston,	TX 77027			
PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE	(See Categories listed at the top	,	Office refr	reshments			
X Political	Food/Beverage Expe	IISE					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т. [Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	r name O	office sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$25.93	04/02/2024	04/04/202	24			
PAYEE	(a) Payee name	1	(b) Payee a	address;	City,	State,	Zip Code
			1200 12th	n Ave. South, Ste	e. 1200		
	Amazon.com						
			Seattle, W	/A 98144			
PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE	(See Categories listed at the top	•	Office sup	plies			
X Political Office Overhead/Rental Expense							
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought		Office held		
expenditure to benefit C/OH							

	Advertising Expense	Event Exp		an Repayment/R	eimbursement S	olicitation/Fundraising E		_
	Accounting/Banking Consulting Expense		erage Expense Po	ffice Overhead/Re olling Expense	Ti	ransportation Equipmer ravel in District	it & Related I	_xpense
	Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Serv		rinting Expense alaries/Wages/Co		ravel Out of District THER (enter a category	y not listed at	oove)
		The Inst	ruction Guide explains how	v to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 11/44 Rpt: 28/64	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED	<u>_</u>	22.4	
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	234.5	50
6	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	er Paid		
		\$70.35	04/05/2024	04/04/20)24			
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				84 Seco		3 /	,	•
		Wall Street Journal						
				Chicope	e, MA 01020			
8	PURPOSE OF	(a) Category		(b) Descri	ption			
	EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Office ne	wspaper subscri	iption		
	X Political	Office Overfieldd/iten						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	r name Offic	ce sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	er Paid		
		\$175.92	03/08/2024	04/04/20)24			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				One Mic	rosoft Way			
		Microsoft 365						
				Redmon	d, WA 98052			
	PURPOSE OF	(a) Category	of this cohodula)	(b) Descri				
		(See Categories listed at the top Office Overhead/Ren		Campaig	ın software			
	X Political		•					
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	r name Offic	ce sought		Office held		
e	xpenditure to benefit C/OH					<u> </u>		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 04/04/20) Credit Card Issue	er Paid		
		\$2,976.00	03/08/2024	04/04/20	/ _ -+			
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				4900 Fo	urnace Pl			
		Competitive Edge (Dutreach					
L				_	TX 77401			
	PURPOSE OF	(a) Category	of this schoolule)	(b) Descri				
		(See Categories listed at the top Consulting Expense		Voter ou	treach			
	X Political							
L	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	r name Offic	ce sought		Office held		
e	xpenditure to benefit C/OH							

	EXP	ENDITURE CATEGOR	IES FOR BOX	10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	/ - Gift/Award	erage Expense Js/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense	ental Expense Tr Tr Tr	Dicitation/Fundraising E ansportation Equipment avel in District avel Out of District	& Related E	
Candidate/Officeholder/Politica		^{vices} truction Guide explains h	Salaries/Wages/Co		THER (enter a category	not listed at	oove)
1 Total pages Schedule F4:	i				3 Filer ID (Ethics	s Commiss	ion Filers)
Sch: 12/44 Rpt: 29/64	Sandill, Ravi K. (Th	ne Honorable)			00061997		/
4 CREDIT CARD		ncial institution	5 TOTAL	OF UNITEMIZED			
ISSUER	see p	previous		DITURES GED TO A CREDIT	\$	234.5	0
6 PAYMENT	(a) Amount Charged \$297.65	(b) Date of Charge 03/07/2024	(c) Date(s) 04/04/20	Credit Card Issue	r Paid		
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Toulouse		4444 We	stheimer Rd Ste	E 100		
				TX 77027			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
X Political	Food/Beverage Expe	,	Post-elec	ction meeting			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T.	Check if Austin, TX,	officeholder living expe	nse	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name O	ffice sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$38.73	(b) Date of Charge 03/19/2024	(c) Date(s) 04/04/20	Credit Card Issue	r Paid		
PAYEE			(b) Payee	addraaa	City	Ctoto	Zin Codo
	(a) Payee name Badolina Bakery &	Cafe		rningside Dr #11	City, 0	State,	Zip Code
			Houston,	TX 77005			
PURPOSE OF	(a) Category	of this cohodule)	(b) Descrip				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Staff refr	eshments			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholde	r name O	ffice sought		Office held		
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(c)	Credit Card Issue	r Paid		
FAIMENT	\$1,290.00	03/08/2024	04/04/20		i Faiu		
PAYEE	(a) Payee name		(b) Payee	addraca	City,	State.	Zip Code
	Competitive Edge	Outreach	(b) Payee 4900 Fou		City,	Sidle,	
			Bellaire,	TX 77401			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top Consulting Expense	o of this schedule)	Voter out	reach			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	<u> </u>	Check if Austin, TX.	officeholder living expe	nse	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	•	ffice sought		Office held		

				ENDITURE CATEGOR		.,			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- I Committee		erage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	blicitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a category	t & Related I	
			The Inst	ruction Guide explains h	low to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 13/44 Rpt: 30/64	Sandill, Rav	/i K. (Th	e Honorable)			00061997		
4		Nam	e of fina	ncial institution		OF UNITEMIZED	\$	234.5	50
	ISSUER		see p	revious		GED TO A CREDIT		204.0	0
6	PAYMENT	(a) Amount Cha \$54.65	rged	(b) Date of Charge 03/21/2024	(c) Date(s 04/04/20) Credit Card Issue)24	r Paid		
7	PAYEE	(a) Payee name)		(b) Payee	address;	City,	State,	Zip Code
		Nickel City			2910 Mc	Kinney St			
						, TX 77003			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories lister	d at the top	of this schedule)	(b) Descri				
	X Political	Food/Beverag		,	Staff lund	CTI			
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	ense	
					ffice sought		Office held		
expenditure to benefit C/OH									
	PAYMENT	(a) Amount Cha \$20.54	rged	(b) Date of Charge 03/26/2024	(c) Date(s 04/04/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Fifth Vessel			(b) Payee 104 N M	ain St	City,	State,	Zip Code
⊢	PURPOSE OF	(a) Category			(b) Descri	, TX 77002			
	EXPENDITURE	(See Categories lister Food/Beverag		,	Coffee w				
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	ense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Offi	ceholder	name O	ffice sought		Office held		
	PAYMENT	(a) Amount Cha \$21.39	rged	(b) Date of Charge 03/27/2024	(c) Date(s) 04/04/20) Credit Card Issue 124	r Paid		
	PAYEE	(a) Payee name Uber			(b) Payee 182 How San Frar		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE	(a) Category (See Categories lister Travel In Distr		of this schedule)	(b) Descri Car from	ption evening legal ev	rent		
L	Non-Political			of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Offi	ceholder	name O	ffice sought		Office held		

	A durantizione Ermanne				()	lisitation (Europhysician -		
	Advertising Expense Accounting/Banking	Event Expe Fees	C	oan Repayment/F Office Overhead/R	ental Expense Tra	licitation/Fundraising E ansportation Equipmer		Expense
	Consulting Expense Contributions/ Donations Made By			olling Expense rinting Expense		avel in District avel Out of District		
	Candidate/Officeholder/Politica	5		alaries/Wages/Co		THER (enter a categor	y not listed at	ove)
			ruction Guide explains ho	w to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	ion Filers)
	Sch: 14/44 Rpt: 31/64	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED			
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	234.5	0
				CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$11.74	03/27/2024	04/04/20)24			
		φ11.14	00/21/2024					
7	PAYEE	(a) Payee name		(b) Payee	address:	City,	State,	Zip Code
				182 How			,	P
		Uber		102 1101				
				San Fran	ncisco, CA 94105			
8	PURPOSE OF	(a) Category		(b) Descri				
ľ	EXPENDITURE	(See Categories listed at the top	of this schedule)	• • •	plitical event			
	X Political	Travel In District						
L	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Om	ce sought		Office held		
e.	xpenditure to benefit C/OH		(h) Data at Ohamua			- D - i -l		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 04/04/20) Credit Card Issue	Paid		
		\$339.90	04/05/2024	04/04/20	724			
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Himalaya Restaura	nt	6652 So	uthwest Freeway			
		Thindaya Restaura	. nc					
					, TX 77074			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•			
	_	Food/Beverage Exper	,	Lyceum	ainner			
	X Political	U						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid		
		\$69.59	04/07/2024	04/28/20)24			
⊢	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				25 South	ampton Buildings	6		
		Sikhs in Law						
				London I	London WC2A1A	L United Kingd	om	
	PURPOSE OF	(a) Category		(b) Descri	ption	_		
	EXPENDITURE	(See Categories listed at the top		Donatior	n to attend event			
	X Political	Contributions/Donatio						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	ense	
⊢	Complete <u>ONLY</u> if direct	Candidate/Officeholder		ce sought		Office held		
	xpenditure to benefit C/OH	Sanadao, Chiocholdor				e		
		1						

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award	erage Expense Pr s/Memorials Expense Pr	S FOR BOX ban Repayment/R ffice Overhead/Re billing Expense inting Expense alaries/Wages/Co	eimbursement Sc ental Expense Tr Tr Tr	blicitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a categor	t & Related I	
		The Inst	ruction Guide explains hov	v to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 15/44 Rpt: 32/64	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL	OF UNITEMIZED			
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	234.5	50
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$18.18	04/09/2024	04/28/20	24			
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
				1001 W 1	11th St			
		Loro						
				Houston	TX 77008			
8	PURPOSE OF	(a) Category		(b) Descri				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Lunch m	eeting			
	X Political	1 ood/Dovorago Expo						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid		
		\$175.92	04/07/2024	04/28/20	124			
	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code
				One Mici	rosoft Way			
		Microsoft 365						
				Redmon	d, WA 98052			
	PURPOSE OF	(a) Category		(b) Descri				
		(See Categories listed at the top Office Overhead/Rent	,	Campaig	n software			
	X Political		F					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	r name Offic	e sought		Office held		
e	xpenditure to benefit C/OH		1	_				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/28/20) Credit Card Issue	r Paid		
		\$35.56	04/09/2024	04/20/20	124			
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		French Gourmet Ba	akerv	2250 We	stheimer Rd			
					TV 77000			
⊢		(a) Catagony			, TX 77098			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrij Breakfas	t with donor			
		Food/Beverage Expe		Dicarias				
					_			
⊢	Non-Political		of Texas. Complete Schedule T.	0.00.000	Check if Austin, TX,	officeholder living expe	ense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offic	e sought		Office held		
e:	xpenditure to benefit C/OH							

			EXP	ENDITURE CATEGOR	RIES FOR BOX	10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			erage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	blicitation/Fundraising l ansportation Equipme avel in District avel Out of District THER (enter a categor	nt & Related I	
			The Inst	ruction Guide explains h	now to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 16/44 Rpt: 33/64	Sandill, Rav	/i K. (Th	e Honorable)			00061997		
4	CREDIT CARD	Nam	e of fina	ncial institution		OF UNITEMIZED			
	ISSUER		see p	revious		IDITURES GED TO A CREDIT	\$	234.5	50
6	PAYMENT	(a) Amount Cha \$102.68		(b) Date of Charge 04/11/2024	(c) Date(s 04/28/20) Credit Card Issue 124	r Paid		
7	PAYEE	(a) Payee name	•	•	(b) Payee	address;	City,	State,	Zip Code
					1964 W	Gray St			
		Hudson Ho	use						
						, TX 77019			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste	d at the ton	of this schedule)	(b) Descri				
		Food/Beverag		,	Judges'	meeting			
	X Political								
	Non-Political			of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offi	cenolder	name O	office sought		Office held		
e		(a) Amount Cha	raod	(b) Date of Charge	(a) Data(a	Cradit Card Issue	r Doid		
	PATMENT	. ,	0		04/28/20) Credit Card Issue)24	i Palu		
		\$2,992.4	3	04/17/2024					
	PAYEE	(a) Payee name	;	•	(b) Payee	address;	City,	State,	Zip Code
		Middlo Eigh	t Hotol		66 Great	Queen St			
		Middle Eigh							
		() -				_ondon WC2B5B	X United Kingo	lom	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste	d at the top	of this schedule)	(b) Descri	ption Sikhs in Law cor	foronoo		
	X Political	Travel Out of				SIKIIS III LAW CUI	lierence		
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Offi	ceholder	r name O	ffice sought	_	Office held		
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Cha	rged	(b) Date of Charge) Credit Card Issue	r Paid		
		\$109.84	Ļ	04/18/2024	04/28/20)24			
	PAYEE	(a) Payee name	9		(b) Payee		City,	State,	Zip Code
		The Savoy	Hotel		78 Cann	on St			
					Londor	andon FOANCA	C United Vince	lom	
-	PURPOSE OF	(a) Category			(b) Descri	London EC4N6A	F United Kingd	IOM	
	EXPENDITURE	(See Categories liste			Dinner a				
X Political Food/Beverage Expense									
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin TY	officeholder living exp	ense	
⊢	Complete <u>ONLY</u> if direct	Candidate/Offi			office sought		Office held	0.150	
e	xpenditure to benefit C/OH				J				

		EXP	ENDITURE CATEGORIE	S FOR BOX	10(a)			
	Advertising Expense Accounting/Banking	Event Exp Fees		oan Repayment/R Iffice Overhead/Re		blicitation/Fundraising E ansportation Equipmer		Exnense
	Consulting Expense Contributions/ Donations Made By	Food/Beve	erage Expense P	olling Expense	Tr	avel in District avel Out of District	it a riolatou i	Experies
	Candidate/Officeholder/Politica			alaries/Wages/Co		THER (enter a category	/ not listed al	oove)
		The Inst	ruction Guide explains how	w to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 17/44 Rpt: 34/64	Sandill, Ravi K. (Th	ne Honorable)			00061997		
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED			
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	234.5	50
			I	CARD				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/28/20) Credit Card Issue	r Paid		
		\$36.68	04/12/2024	04/20/20	124			
7	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Shell		1704 Te>	kas 71 Frontage I	Rd		
		Shell						
				-	ge, TX 78945			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
		Travel Out of District		Fuel for t	rip to Austin for n	neeting		
	X Political							
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought						Office held		
e	xpenditure to benefit C/OH		1	_				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/28/20) Credit Card Issue	r Paid		
		\$55.12	04/12/2024	04/20/20	124			
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		T-Mobile		132nd Av	ve SE			
					, WA 98006			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
		Office Overhead/Ren	tal Expense	Campaig	in priorie			
	X Political							
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Offi	ce sought		Office held		
e	xpenditure to benefit C/OH	(a) Amount Channed	(h) Data of Charge			r Daid		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	04/28/20) Credit Card Issue 24	i Palu		
		\$56.99	04/14/2024	0 1/20/20				
	PAYEE			() 5		0.1	<u> </u>	7.0.1
	PATEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Uber		182 How	ard St			
				Son From	ncisco, CA 94105			
⊢	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top	of this schedule)		legal event			
	X Political	Travel In District			3			
	Non-Political		of Toyon Complete Coloridat			officebolder linder -	2000	
⊢		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought		officeholder living expe	ense	
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenolder	Ulli Ulli	ce sought				
Ľ								

				SCHEDULE F4
Advertising Expense	EXPE Event Expe		RIES FOR BOX 10(a) Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Consulting Expense	Fees	rage Expense	Office Overhead/Rental Expense Polling Expense	Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	s/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	5		now to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 18/44 Rpt: 35/64	Sandill, Ravi K. (Th	e Honorable)		00061997
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZE	
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CREI	\$ 234.50
			CARD	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid
	\$36.58	04/20/2024	04/28/2024	
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Uber		182 Howard St	
			San Francisco, CA 941	05
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top	of this schedule)	Car to dinner at confere	ence
X Political	Travel Out of District			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 04/28/2024	suer Paid
	\$199.50	04/22/2024	04/28/2024	
PAYEE	(a) Payee name		(b) Payee address; 233 S. Wacker Drive	City, State, Zip Code
	United Airlines		235 S. Wacker Drive	
			Chicago, IL 60606	
PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Round trip travel to Bos	ston for Program on Negotiation
X Political				
Non-Political	(C) X Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held
expenditure to benefit C/OH		1		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 04/28/2024	suer Paid
	\$21.14	04/12/2024	04/20/2024	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			109 West SH 71	
	Chevron			
			Ellinger, TX 78938	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	
Travel Out of Dis			Gas for APIS conferen	
X Political				
Non-Political		of Texas. Complete Schedule		TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name O	office sought	Office held
corpenditure to beliefit C/OH				

	SCHEDULE F4		
	EXPENDITURE CATEGORI	ES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Expense I Committee Legal Services	Loan Repayment/Reinbursement Office Overhead/Rental Expense Tri Polling Expense Tri Printing Expense Tri Salaries/Wages/Contract Labor O	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)
	The Instruction Guide explains he	ow to complete this form.	
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 19/44 Rpt: 36/64	Sandill, Ravi K. (The Honorable)		00061997
4 CREDIT CARD	Name of financial institution	5 TOTAL OF UNITEMIZED	
ISSUER	see previous	EXPENDITURES CHARGED TO A CREDIT CARD	\$ 234.50
6 PAYMENT	(a) Amount Charged (b) Date of Charge \$500.00 04/23/2024	(c) Date(s) Credit Card Issue 04/28/2024	r Paid
7 PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
		505 E. Huntland Dr., Ste.	400, LB 28
	Texas Board of Legal	,	
		Austin, TX 78752	
8 PURPOSE OF	(a) Category	(b) Description	
EXPENDITURE	(See Categories listed at the top of this schedule)	Application fee	
X Political	Fees		
Non-Political			
	(c) Check if travel outside of Texas. Complete Schedule T Candidate/Officeholder name		officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		fice sought	Office held
· ·			
PAYMENT	(a) Amount Charged (b) Date of Charge \$206.96 04/24/2024	(c) Date(s) Credit Card Issue 04/28/2024	r Palo
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
		1815 Washington Ave	
	Gus's Fried Chicken		
		Houston, TX 77007	
PURPOSE OF	(a) Category	(b) Description	
EXPENDITURE	(See Categories listed at the top of this schedule)	Staff lunch	
X Political	Food/Beverage Expense		
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T		, officeholder living expense
Complete <u>ONLY</u> if direct		fice sought	Office held
expenditure to benefit C/OH		lice sought	
PAYMENT	(a) Amount Charged (b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
		06/04/2024	
	\$30.00 04/30/2024		
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
	(a) Fayee hame	PO Box 61208	City, State, Zip Code
	Houston Young Lawyers	PO B0X 01208	
		Llouaton TV 77200	
		Houston, TX 77208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Donation	
	Contributions/Donations Made By		
X Political	Candidate/Officeholder/Political Committee	9	
Non-Political	(C) Check if travel outside of Texas. Complete Schedule T		, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Of	fice sought	Office held
expenditure to benefit C/OH			

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	erage Expense s/Memorials Expense	ES FOR BOX Loan Repayment/R Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	Reimbursement S ental Expense 1 1	Solicitation/Fundraising E Fransportation Equipmer Travel in District Fravel Out of District DTHER (enter a category	t & Related			
	The Inst	ruction Guide explains he	how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)						
Sch: 20/44 Rpt: 37/64	Sandill, Ravi K. (Th	e Honorable)			00061997				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL	OF UNITEMIZED)				
ISSUER	see p	revious		IDITURES GED TO A CREDI	т \$	234.5	50		
6 PAYMENT	(a) Amount Charged (b) Date of Charge (c) Date(s) C				er Paid				
	\$70.35	05/03/2024	06/04/20)24					
7 PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code		
	Wall Street Journal		84 Seco	nd Ave.					
			Chicope	e, MA 01020					
8 PURPOSE OF	(a) Category		(b) Descri						
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Office newspaper subscription						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T			K, officeholder living expension				
9 Complete <u>ONLY</u> if direct	fice sought		Office held	ense					
expenditure to benefit C/OH	name Off	loo oougin							
PAYMENT	(c) Date(s) Credit Card Issue	er Paid						
	AYMENT(a) Amount Charged(b) Date of Charge\$46.8405/05/2024								
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
	Uber		182 Howard St						
			San Francisco, CA 94105						
PURPOSE OF	(a) Category		(b) Descri	ption					
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Car to S	ABA Gala					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	 :	Check if Austin. T	K, officeholder living expension	ense			
Complete ONLY if direct	Candidate/Officeholder		fice sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$18.84	05/04/2024	06/04/20)24					
	120101								
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
			182 How						
	Uber								
				ncisco, CA 9410	5				
PURPOSE OF (a) Category		(b) Descri	•						
EXPENDITURE (See Categories listed at the top of this schedule) Travel In District		Car to di	nner event						
X Political									
Non-Political	(C) Check if travel outside		Check if Austin, T	K, officeholder living expe	ense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Off	fice sought		Office held				
expenditure to benefit C/OH									

	SCHEDULE F4			
	EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	rage Expense s/Memorials Expense ices	Office Overhead/Rental Expense T Polling Expense T Printing Expense T	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District DTHER (enter a category not listed above)
1 Tatal names Cabadula 54:	I			2 Files ID (Ethics Commission Filess)
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)
Sch: 21/44 Rpt: 38/64	Sandill, Ravi K. (Th	e Honorable)	1	00061997
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED	
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDI CARD	т \$ 234.50
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid
	\$19.19	05/04/2024	06/04/2024	
	φ13.13	03/04/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			182 Howard St	
	Uber			
			San Francisco, CA 9410	5
8 PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top	of this schedule)	Car from dinner event	
X Political	Travel In District			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		(, officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	Office held
expenditure to benefit C/OH	oundidate/onicentider	name Of	nice sought	
	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	Pr Paid
	.,	., .	06/04/2024	
	\$1,500.00	05/06/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	(a) Fayee hame		4802 Research Forest D	
	Texas Lyceum Ass	ociation		
			Dallas, TX 75252	
PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top		Event sponsorship	
X Political	Contributions/Donatio		<u>ه</u>	
Non-Political		of Texas. Complete Schedule		C, officeholder living expense
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ffice sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid
	\$375.23	05/05/2024	06/04/2024	
	\$375.23	03/03/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
			233 S. Wacker Drive	
	United Airlines			
			Chicago, IL 60606	
PURPOSE OF (a) Category			(b) Description	
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel to Toronto for Sou	th Asian Bar Association National
X Political	Travel Out of District		Convention	
Non-Political	(C) X Check if travel outside	of Texas, Complete Schedule	T. Check if Austin TX	(, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held
expenditure to benefit C/OH			~	

		EXPE	ENDITURE CATEGOR	RIES FOR BOX	10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense	Solicitation/Fundrais Transportation Equip Travel in District Travel Out of Distric OTHER (enter a cat	pment & Related I				
		The Inst	ruction Guide explains l	how to complete	this form.						
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (B	Ethics Commiss	sion Filers)			
	Sch: 22/44 Rpt: 39/64	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZE		00.4.5				
	ISSUER	see p	revious		IDITURES GED TO A CREE	ыт \$	234.5	bU			
6	PAYMENT	(a) Amount Charged \$371.05	(b) Date of Charge 05/05/2024	(c) Date(s) 06/04/20) Credit Card Iss 124	uer Paid					
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code			
				233 S. W	/acker Drive						
		United Airlines									
					IL 60606						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion ome from Sout	h Acian Bar Ar		ational			
		Travel Out of District	,		on in Toronto	II ASIAII DAI AS	SOCIALION	alional			
	X Political										
9	Complete <u>ONLY</u> if direct	(c) X Check if travel outside Candidate/Officeholder		office sought	Check if Austin,	TX, officeholder living Office held	expense				
	expenditure to benefit C/OH										
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Iss	uer Paid					
		\$175.92	06/04/20	24							
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code			
		Microsoft 365		One Micr	rosoft Way						
				D. J							
		(a) Catagony		(b) Descri	d, WA 98052						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	. ,	n software						
	X Political	Office Overhead/Ren	tal Expense	Campaig							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin,	TX, officeholder living	expense				
	Complete ONLY if direct	Candidate/Officeholder	r name C	Office sought		Office held					
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 06/04/20) Credit Card Iss	uer Paid					
		\$11.54	05/07/2024	00/04/20	124						
	PAYEE	(a) Payee name		(b) Payee	address.	City,	State,	Zip Code			
		(u) r uyee name			Gray St #100	Oity,	Olule,				
		Della's Coffee									
				Houston,	TX 77019						
	PURPOSE OF	(a) Category	(b) Descri								
	EXPENDITURE (See Categories listed at the top of this schedule) Food/Beverage Expense				t meeting						
	X Political										
	Non-Political		of Texas. Complete Schedule		Check if Austin,	TX, officeholder living					
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	rname C	Office sought		Office held					

					SCI	HEDUL	e F4		
Advertising Expense Accounting/Banking Consulting Expense	Event Expe Fees	NDITURE CATEGOR	RIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Trar	citation/Fundraising E nsportation Equipmen rel in District		Expense		
Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Trav	el Out of District IER (enter a category	not listed at	oove)		
	The Instr	uction Guide explains I	how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			;	3 Filer ID (Ethic	s Commiss	sion Filers)		
Sch: 23/44 Rpt: 40/64	Sandill, Ravi K. (Th				00061997				
4 CREDIT CARD ISSUER		ncial institution evious	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD		\$	234.5	50		
6 PAYMENT	(a) Amount Charged \$67.34	(b) Date of Charge 05/10/2024	(c) Date(s) Credit Card 06/04/2024	Issuer	Paid				
7 PAYEE	(a) Payee name	(b) Payee address;		Zip Code					
	Axelrad Beer Garde	'n	1517 Alabama St						
8 PURPOSE OF	(a) Category		Houston, TX 77004 (b) Description						
EXPENDITURE	(See Categories listed at the top	HYLA event refreshn	nents						
X Political	Food/Beverage Exper	ise							
Non-Political	(C) Check if travel outside o	of Texas. Complete Schedule	T. Check if Aus	stin, TX, o	fficeholder living expe	ense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	Office sought		Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$75.00	(b) Date of Charge 05/16/2024	(c) Date(s) Credit Card 06/04/2024	Issuer	Paid				
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
	National Asian Pacific American		910 17th NW						
	National Asian Faci	ne American	Washington, DC 200	006					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schodulo)	(b) Description						
	Fees		Membership dues						
X Political									
Non-Political	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule	T. Check if Aus	stin, TX, o	fficeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onicenoider	name C	ance sought		Office field				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid				
	\$36.48	05/20/2024	06/04/2024						
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
	Avalon Diner		2417 Westheimer Ro	b					
			Houston, TX 77098						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	EXPENDITURE (See Categories listed at the top of this schedule								
X Political	X Political Food/Beverage Expense								
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if Aus	stin, TX, o	fficeholder living expe	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought		Office held				

	Advertising Expense	EXPI Event Exp	ENDITURE CATEGORII	ES FOR BOX 10(a)	Sol	licitation/Fundraising	Expense		
	Accounting/Banking Consulting Expense	Fees	(Office Overhead/Rental Expense Polling Expense	Tra	ansportation Equipme		Expense	
	Contributions/ Donations Made By Candidate/Officeholder/Politica		Is/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor		vel Out of District HER (enter a catego	y not listed al	oove)	
		The Inst	ruction Guide explains ho				-		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 24/44 Rpt: 41/64	Sandill, Ravi K. (Th	ne Honorable)			00061997			
4	CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEN	MIZED				
	ISSUER	see p	revious	EXPENDITURES CHARGED TO A C CARD	REDIT	\$	234.5	50	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Paid				
		\$11.74	05/21/2024	06/04/2024					
7	PAYEE	(a) Payee name	Payee name (b) Payee address;				State,	Zip Code	
		Uber 182 How							
		Obei							
Ļ			San Francisco, CA	94105					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	(b) Description Car to event						
		Travel In District	Car to event						
	X Political								
L	Non-Political	(C) Check if travel outside		ustin, TX, o	officeholder living exp	ense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
		(c) Date(s) Credit Card	d Issuer	Paid					
				06/04/2024	100001				
		\$560.86	05/21/2024						
⊢	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
				1962 W Gray St					
		Brasserie 19							
				Houston, TX 77019					
	PURPOSE OF	(a) Category	of this school (a)	(b) Description					
		(See Categories listed at the top Food/Beverage Expe		GAL Luncheon					
	X Political								
	Non-Political		of Texas. Complete Schedule T		ustin, TX, d	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	r name Off	ice sought		Office held			
e	xpenditure to benefit C/OH	(a) Amount Channed	(h) Data of Charge	(a) Data(a) Credit Carr		Daid			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 04/28/2024	a issuer	Palu			
		\$76.12	04/26/2024						
_	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code	
		(a) Fayee hame		132nd Ave SE		City,	State,		
		T-Mobile		1021107100 02					
				Bellevue, WA 9800	6				
				(b) Description					
	EXPENDITURE (See Categories listed at the top of this schedule)			Campaign phone					
	X Political Office Overhead/Rental Expense								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if A	ustin, TX, d	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	r name Off	ice sought		Office held			
e	xpenditure to benefit C/OH								

Advertising Expense	EXP Event Exp		RIES FOR BOX 1 Loan Repayment/Re	.,	blicitation/Fundraising E	zponso					
Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beve /- Gift/Award	erage Expense Is/Memorials Expense	Office Overhead/Rer Polling Expense Printing Expense Salaries/Wages/Con	ntal Expense Tr Tr Tr	ansportation Equipmer avel in District avel Out of District THER (enter a category	nt & Related E					
		truction Guide explains	-								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)				
Sch: 25/44 Rpt: 42/64	Sandill, Ravi K. (Th	ne Honorable)			00061997						
4 CREDIT CARD	Name of fina	ncial institution			¢	234.5	:0				
ISSUER	see p	revious		DITURES ED TO A CREDIT	P	234.0	50				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/28/202	Credit Card Issue	r Paid						
	\$77.64	04/26/2024	04/20/202	04/20/2024							
7 PAYEE	PAYEE (a) Payee name			address;	City,	State,	Zip Code				
	Nickel City			(inney St							
	8 PURPOSE OF (a) Category										
8 PURPOSE OF	8 PURPOSE OF EXPENDITURE (3) Category (See Categories listed at the top of this schedule) Food/Beverage Expense										
X Political	Staff luncl	n									
Non-Political	е Т.	Check if Austin, TX,	officeholder living expe	ense							
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	Office sought		Office held							
expenditure to benefit C/OH		<u> </u>									
PAYMENT	(b) Date of Charge	(c) Date(s) 06/04/202	Credit Card Issue	r Paid							
	\$25.98	04/29/2024									
PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code				
	Lanz & Swinney		2950 N Lo	pop West							
			Suite 500 Houston, TX 77092								
PURPOSE OF	(a) Category		(b) Descript								
EXPENDITURE	(See Categories listed at the top	,	IT service								
X Political	Office Overhead/Ren	ital Expense									
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	е Т.	Check if Austin, TX,	officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder	r name C	Dffice sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 06/04/202	Credit Card Issue	r Paid						
	\$167.48	04/29/2024	00/04/202	-4							
PAYEE	(a) Payee name	•	(b) Payee a	address;	City,	State,	Zip Code				
	Rumi's Kitchen		1801 Pos	t Oak Blvd Suite	120						
			Houston, (b) Descript								
EXPENDITURE	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			h appointee							
X Political	X Political			111 · · · · · ·							
Non-Political	(C) Check if travel outside	ет. Г	Check if Austin. TX.	officeholder living expe	ense						
Complete ONLY if direct	Candidate/Officeholder		Dffice sought		Office held						
expenditure to benefit C/OH											

		EX	PENDITURE CATEGO	RIES FOR BOX 10	(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/B - Gift/Aw	xpense everage Expense ards/Memorials Expense ervices	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	l Expense Tra Tra Tra	licitation/Fundraising ansportation Equipme avel in District avel Out of District 'HER (enter a catego	nt & Related I			
		The li	struction Guide explains	how to complete this	s form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	ion Filers)		
	Sch: 26/44 Rpt: 43/64	Sandill, Ravi K. (The Honorable)			00061997				
4	CREDIT CARD	Name of fi	nancial institution		UNITEMIZED					
	ISSUER	see	previous	EXPENDI CHARGEI CARD	TURES D TO A CREDIT	\$	234.5	50		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	redit Card Issuer	Paid				
		\$23.74	05/01/2024	06/04/2024						
7	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code		
		Della's Coffee			ay St #100					
				Houston, T	X 77019					
8	PURPOSE OF	(a) Category		(b) Description						
		(See Categories listed at the Food/Beverage Ex		Breakfast m	neeting					
	X Political									
	Non-Political		de of Texas. Complete Schedul		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	ler name (Office sought		Office held					
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C 06/04/2024	redit Card Issuer	Paid				
		\$716.30	05/01/2024	00/0 1/2021						
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
		Le Colonial		57 E Oak S	it					
┝		(a) Catagony		Chicago, IL						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	top of this schedule)	(b) Description Conference planning lunch						
	X Political	Food/Beverage Ex	bense							
	Non-Political		de of Texas. Complete Schedul		Check if Austin, TX,		ense			
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officehold	ler name 0	Office sought		Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	., .,	redit Card Issuer	Paid				
		\$3,798.55	05/02/2024	06/04/2024						
	PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code		
		Taunta Oratan		1510 Polk S	St					
Toyota Center										
				Houston, T						
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		(b) Description								
	Event Expense		Refreshme	nts for campaig	in event					
X Political										
	Non-Political		de of Texas. Complete Schedul		Check if Austin, TX,	officeholder living exp	ense			
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officehold	ler name (Office sought		Office held				

	Advertising Expense Accounting/Banking Consulting Expense	Event Exp Fees	0	S FOR BOX	eimbursement Sc ental Expense Tra	blicitation/Fundraising I ansportation Equipmer avel in District		Expense		
	Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	ls/Memorials Expense Pi	rinting Expense alaries/Wages/Cor	Tra	avel Out of District THER (enter a categor	v not listed al	hove)		
		Ū.	ruction Guide explains how	-			y not instea a	5000)		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
	Sch: 27/44 Rpt: 44/64	Sandill, Ravi K. (Th	e Honorable)			00061997				
4	CREDIT CARD	-	ncial institution	5 TOTAL	OF UNITEMIZED					
	ISSUER	see p	revious		DITURES ED TO A CREDIT	\$	234.5	50		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid				
		\$235.68	05/03/2024	06/04/20	24					
7					address;	City,	State,	Zip Code		
		Brasserie Du Parc		1440 Lan	nar St					
					TX 77010					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		t				
	X Political	Food/Beverage Expe	,	Refreshin	nents at LWI eve	rit				
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T				Check if Austin, TX,	officeholder living exp	ense			
9	Complete ONLY if direct	Candidate/Officeholde	ce sought		Office held					
e	xpenditure to benefit C/OH		1							
PAYMENT(a) Amount Charged(b) Date of Charge			(c) Date(s) 06/04/20	Credit Card Issue	r Paid					
		\$12.20	05/04/2024	00/04/20	24					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Uber		182 How	ard St					
		Obei		San Francisco, CA 04105						
				San Francisco, CA 94105 (b) Description						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)		legal event					
	X Political	Travel In District		Car Ironn	legarevent					
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name Offic	ce sought		Office held				
e	xpenditure to benefit C/OH			(-) D - t - (-)		- D - i d				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 06/04/20	Credit Card Issuer 24	r Pald				
		\$57.23	05/05/2024							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Uber		182 Howa	ard St					
		Ober								
		(a) Catagony			cisco, CA 94105	1				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	SABA Gala					
	Travel In District				C, D, Cala					
	Non-Political									
⊢		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	Cneck if Austin, TX,	officeholder living exp Office held	ense			
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Sandidate/Sincenoldel	iname Om	oo oouyin		Chiec Helu				

			EXPE	ENDITURE CATEGOR	IES FOR BOX	10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- (rage Expense s/Memorials Expense	Loan Repayment/R Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	blicitation/Fundraising E ansportation Equipmen avel in District avel Out of District THER (enter a category	t & Related I		
			The Inst	ruction Guide explains h	ow to complete	this form.				
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 28/44 Rpt: 45/64	Sandill, Ravi	i K. (Th	e Honorable)			00061997			
4	CREDIT CARD	Name	e of finai	ncial institution		OF UNITEMIZED		0045	-0	
	ISSUER		see pi	revious		IDITURES GED TO A CREDIT	\$	234.5	50	
6	PAYMENT	(a) Amount Char	ged	(b) Date of Charge) Credit Card Issue	r Paid			
		\$7.47		05/03/2024	06/04/20)24				
7	PAYEE	(a) Payee name			(b) Payee	address;	City,	State,	Zip Code	
		Uber			182 How	ard St				
		Ober								
Ļ		(a) Category			(b) Descri	ncisco, CA 94105				
8	PURPOSE OF EXPENDITURE	(See Categories listed	at the top	of this schedule)	Car to L					
	X Political Image: Second secon									
				of Texas. Complete Schedule	Т.	Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	ffice sought		Office held						
e	expenditure to benefit C/OH									
	PAYMENT (a) Amount Charged			(b) Date of Charge	(c) Date(s) 06/04/20) Credit Card Issue	r Paid			
		\$140.83		05/07/2024	00/0 //20					
	PAYEE			(b) Payee	address;	City,	State,	Zip Code		
		Coppa Oster	ria		5210 Mo	rningside Dr				
		Coppu Osici	na		Houston, TX 77005					
⊢		(a) Catagony			(b) Descri	-				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed	at the top	of this schedule)	· /	eeting with vendo)r			
	X Political	Food/Beverage	e Expe	nse		ootg mar rond.				
	Non-Political	(C) Check if trav	el outside	of Texas. Complete Schedule	 T.	Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Offic	eholder	name Of	ffice sought		Office held			
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Char	ged	(b) Date of Charge	(c) Date(s) 06/04/20) Credit Card Issue	r Paid			
		\$268.47		05/09/2024	06/04/20	124				
_	PAYEE	(a) Payee name			(b) Payee	address:	City,	State.	Zip Code	
					6103 Kirl		0.0),	otato,	p 0000	
River Oaks Plant House				ouse		-) - :				
					Houston	, TX 77005				
PURPOSE OF (a) Category			(b) Descri							
	EXPENDITURE (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense			Mother's	Day flowers for s	staff				
	X Political									
	Non-Political	(C) Check if trav	el outside	of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Offic	eholder	name Of	ffice sought		Office held			
e	xpenditure to benefit C/OH									

			PENDITURE CATEGO		.,		_			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awa	everage Expense urds/Memorials Expense	Loan Repayment/F Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tr Tr Tr	blicitation/Fundraising B ansportation Equipmer avel in District avel Out of District THER (enter a categor	t & Related I			
		The In	struction Guide explains	how to complete	this form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)		
	Sch: 29/44 Rpt: 46/64	Sandill, Ravi K. (1	The Honorable)			00061997				
4	CREDIT CARD	Name of fir	ancial institution			¢	224 5	0		
	ISSUER	see	previous		NDITURES GED TO A CREDIT	\$	234.5	50		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge		b) Credit Card Issue	r Paid				
		\$229.43	05/10/2024	06/04/20	J24					
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code		
				2300 We	estheimer					
		A'Bouzy								
					, TX 77089					
8	EXPENDITURE (See Categories listed at the top of this schedule)				ption gn staff lunch					
		Food/Beverage Exp		Campai	gii stali iurich					
	X Political	<u> </u>			_					
	Non-Political (c) Check if travel outside of Texas. Complete Schedule Complete ONLY if direct Candidate/Officeholder name O				Check if Austin, TX,	officeholder living exp Office held	ense			
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicentio		Office sought		Once held				
Ĕ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$463.75 05/13/2024								
⊢	PAYEE	(a) Payee name (b) Payee ad			address;	City,	State,	Zip Code		
				150 Fou	rth Ave., North					
		South Asian Bar	Association of	Suite 70	Suite 700					
				Nashville, TN 37219						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t	on of this schedule)	(b) Descri	•					
		Fees	op of this schedule)	National conference dues						
	X Political	L								
	Non-Political		de of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense			
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officehold	er name C	Office sought		Office held				
-		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
				06/04/20		i i ala				
		\$71.45	05/14/2024							
-	PAYEE	(a) Payee name		(b) Pavee	address;	City,	State,	Zip Code		
				6103 Kir		- 3,	,			
River Oaks Plant House										
				Houston	, TX 77005					
PURPOSE OF (a) Category			(b) Descri	•						
	EXPENDITURE (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense			Voluntee	er Mother's Day fl	owers				
	X Political									
	Non-Political	(C) Check if travel outsid		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officehold	er name C	Office sought		Office held				
e	xpenditure to benefit C/OH									

	ES MADE BY CREDIT CARL		SCHEDULE F4
	EXPENDITURE CATEGORI		
Advertising Expense Accounting/Banking	Fees	Office Overhead/Rental Expense Tr	blicitation/Fundraising Expense ansportation Equipment & Related Expense
Consulting Expense Contributions/ Donations Made By	y - Gift/Awards/Memorials Expense F	Printing Expense Tr	avel in District avel Out of District
Candidate/Officeholder/Politica		-	THER (enter a category not listed above)
	The Instruction Guide explains ho	ow to complete this form.	
1 Total pages Schedule F4:			3 Filer ID (Ethics Commission Filers)
Sch: 30/44 Rpt: 47/64	Sandill, Ravi K. (The Honorable)		00061997
4 CREDIT CARD	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$ 234.50
ISSUER	see previous	CHARGED TO A CREDIT	
		CARD	
6 PAYMENT	(a) Amount Charged (b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
	\$57.20 05/13/2024	06/04/2024	
7 PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
		20 Toronto St.	
	South Asian Bar Association of		
		Toronto ON M5C2B8 Car	nada
8 PURPOSE OF	(a) Category	(b) Description	
EXPENDITURE	(See Categories listed at the top of this schedule) Fees	Conference add-on	
X Political			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T	. Check if Austin, TX,	officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name Off	ice sought	Office held
expenditure to benefit C/OH			
PAYMENT	(a) Amount Charged (b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
	\$17.26 05/17/2024	06/04/2024	
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
		1200 12th Ave. South, Ste	e. 1200
	Amazon.com		
		Seattle, WA 98144	
PURPOSE OF	(a) Category	(b) Description	
EXPENDITURE	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Office supplies	
X Political	Once Overneau/Kentar Expense		
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T	. Check if Austin, TX,	officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Off	ïce sought	Office held
expenditure to benefit C/OH			
PAYMENT	(a) Amount Charged (b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
	\$805.67 06/04/2024	06/04/2024	
PAYEE	(a) Payee name	(b) Payee address;	City, State, Zip Code
		233 S. Wacker Drive	
	United Airlines		
		Chicago, IL 60606	
PURPOSE OF	(a) Category	(b) Description	
EXPENDITURE	(See Categories listed at the top of this schedule) Travel Out of District	Round trip travel for Harri	s County Judges' CLE
X Political			
Non-Political	(C) X Check if travel outside of Texas. Complete Schedule T	Check if Austin, TX,	officeholder living expense
Complete ONLY if direct		ice sought	Office held
expenditure to benefit C/OH			

			PENDITURE CATEGOR						
	Advertising Expense Accounting/Banking Consulting Expense	Fees	xpense everage Expense	Loan Repayment/F Office Overhead/R Polling Expense	ental Expense Tra	licitation/Fundraising E ansportation Equipmer avel in District		Expense	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Aw	ards/Memorials Expense ervices	Printing Expense Salaries/Wages/Co	Tra	avel Out of District THER (enter a category	/ not listed al	oove)	
		The li	nstruction Guide explains h	now to complete	this form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 31/44 Rpt: 48/64	Sandill, Ravi K. (The Honorable)			00061997			
4		Name of fi	nancial institution		OF UNITEMIZED	\$	234.5	50	
	ISSUER	see	previous		GED TO A CREDIT	Ŷ	204.0		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 06/04/20) Credit Card Issue	Paid			
		\$37.07	05/29/2024	00/04/20)24				
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
		Uber		182 How	vard St				
				San Fra	ncisco, CA 94105				
8	PURPOSE OF	(a) Category		(b) Descri					
	EXPENDITURE	(See Categories listed at the	Car to ev	vent at Post Oak					
	X Political	Travel In District							
	Non-Political (c) Check if travel outside of Texas. Complete Schedule				Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officehold	ffice sought		Office held				
e	xpenditure to benefit C/OH					D :			
PAYMENT (a) Amount Charged (b) Date of Charg				(c) Date(s 06/04/20) Credit Card Issuer)24 	Paid			
		\$25.98	05/29/2024	00/0 //20					
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code	
		Lanz & Swinney			_oop West				
				Suite 50	-				
-	PURPOSE OF	(a) Category		(b) Descri	, TX 77092 ption				
	EXPENDITURE	(See Categories listed at the		IT servic	•				
	X Political	Office Overhead/R	ental Expense						
	Non-Political	(C) Check if travel outs	de of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living expe	ense		
	Complete ONLY if direct	Candidate/Officehold	ler name O	ffice sought		Office held			
e	xpenditure to benefit C/OH		(b) Data of Change) Credit Card Iacua	Daid			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 06/04/20) Credit Card Issuer)24 	Pald			
		\$126.09	05/29/2024						
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
		Demekula		1701 S S	Shepherd Dr.				
		Barnaby's							
					, TX 77019				
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Descri Staff lun						
X Political Food/Beverage Expense									
	Non-Political	(C) Check if travel outs	de of Texas. Complete Schedule	т.	Check if Austin TY	officeholder living exp	ense		
⊢	Complete <u>ONLY</u> if direct	Candidate/Officehold		ffice sought		Office held			
e	xpenditure to benefit C/OH			-					

	A durantining Frances		PENDITURE CATEGOR		• •	lisitation (Europhysician -			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awa	everage Expense ards/Memorials Expense	Loan Repayment/F Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Tra Tra Tra	licitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a categor	t & Related I		
		The In	struction Guide explains I	how to complete	this form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 32/44 Rpt: 49/64	Sandill, Ravi K. (1	The Honorable)			00061997			
4		Name of fir	nancial institution		OF UNITEMIZED	\$	234.5	50	
	ISSUER	see	previous		GED TO A CREDIT	φ	204.0		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge) Credit Card Issue	r Paid			
		\$65.00	06/02/2024	06/04/20	JZ4				
7	PAYEE	(a) Payee name	-	(b) Payee	address;	City,	State,	Zip Code	
		Houston Young L	awyers	PO Box	61208				
				Houston	, TX 77208				
8	PURPOSE OF	(a) Category		(b) Descri	ption		ficeholder living expense Office held		
	EXPENDITURE	(See Categories listed at the t Contributions/Donation		Donation	ו				
	X Political		der/Political Committe	ee					
	Non-Political	(C) Check if travel outside	de of Texas. Complete Schedule	e T.	Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officehold	er name C	Office sought		Office held			
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 06/04/20	 Credit Card Issue 124 	r Paid			
		\$64.26	06/02/2024						
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
		T-Mobile		132nd A	ve SE				
⊢		(a) Category		(b) Descri	e, WA 98006				
	PURPOSE OF EXPENDITURE	(See Categories listed at the t	op of this schedule)	``	an phone				
	X Political	Office Overhead/Re	ental Expense	Campai	<u>, , , , , , , , , , , , , , , , , , , </u>				
	Non-Political		de of Texas. Complete Schedule		Check if Austin, TX,	officeholder living exp	ense		
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officehold	er name C	Office sought		Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$54.38	06/04/2024						
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code	
		Barnaby's		1701 S S	Shepherd Dr.				
Bainaby S		Houston	, TX 77019						
⊢	PURPOSE OF	(a) Category		(b) Descri					
	EXPENDITURE	(See Categories listed at the t		Lunch m					
	X Political	Food/Beverage Exp	ense		-				
	Non-Political (C) Check if travel outside of Texas. Complete Schedule T.			 е Т.	Check if Austin, TX.	officeholder living exp	ense		
	Complete ONLY if direct					Office held			
e	expenditure to benefit C/OH								

	EXP	ENDITURE CATEGOR	RIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Awar	erage Expense ds/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transporta Travel in E Travel Out	n/Fundraising Expense ation Equipment & Related District t of District enter a category not listed a	·			
	The Ins	truction Guide explains I	how to complete this form.						
1 Total pages Schedule F4:	2 FILER NAME			3 Fi	iler ID (Ethics Commiss	sion Filers)			
Sch: 33/44 Rpt: 50/64	Sandill, Ravi K. (Tl	ne Honorable)		0006	61997				
4 CREDIT CARD	Name of fina	ancial institution	5 TOTAL OF UNITER						
ISSUER	see p	previous	EXPENDITURES CHARGED TO A C CARD	REDIT	234.5	50			
6 PAYMENT	(a) Amount Charged \$737.43	(b) Date of Charge 05/29/2024	(c) Date(s) Credit Card 06/04/2024	d Issuer Paid					
7 PAYEE	(a) Payee name	•	(b) Payee address;	Cit	y, State,	Zip Code			
	Aiko		1902 Washington A	ve Suite C					
			Houston, TX 77007	Houston, TX 77007					
8 PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		CLE planning dinne	er					
X Political	Food/Deverage Lxpe	1130							
Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule	T. Check if A	ustin, TX, officeho	older living expense				
9 Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name C	Office sought	Offi	ce held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 06/04/2024	d Issuer Paid	id				
	\$40.16 05/30/2024								
PAYEE	(a) Payee name	•	(b) Payee address;	Cit	y, State,	Zip Code			
	Uber		182 Howard St						
	Obei			San Francisco, CA 94105					
PURPOSE OF	(a) Category		(b) Description	94105					
EXPENDITURE	(See Categories listed at the top	o of this schedule)	Car from planning c	linner					
X Political	Travel In District		p						
Non-Political	(C) Check if travel outside	e of Texas. Complete Schedule	T. Check if A		older living expense				
Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name C	Office sought	Offi	ce held				
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d lequer Daid					
			06/04/2024	u issuel faiu					
	\$70.35	05/31/2024							
PAYEE	(a) Payee name		(b) Payee address;	Cit	y, State,	Zip Code			
			84 Second Ave.						
	Wall Street Journa	l							
			Chicopee, MA 0102	20					
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)		(b) Description							
Office Overhead/Rental Expense		Office newspaper s	ubscription						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			T. Check if An Office sought		older living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					ce held				

		EXP	ENDITURE CATEGOR	RIES FOR BOX	10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Re Office Overhead/Re Polling Expense Printing Expense Salaries/Wages/Cor	ntal Expense Tr Tr Tr	blicitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a categor	nt & Related I				
		The Inst	ruction Guide explains h	now to complete t	his form.						
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 34/44 Rpt: 51/64	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED DITURES	¢	234.5	0			
	ISSUER	see p	revious		ED TO A CREDIT	Þ	234.0	0			
6	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 05/30/2024	(c) Date(s) 06/04/20	Credit Card Issue 24	r Paid					
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code			
		Indo American New	uc.	7457 Har	win Dr.						
		Indo American New	13		Suite 262						
Ļ		(a) Catagony		Houston, (b) Descrip	Houston, TX 77036						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	Print ad	lion						
	X Political	Advertising Expense									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	ense				
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	Office sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 06/04/20	Credit Card Issue	r Paid	fice held				
	\$299.00 06/01/2024			00/04/20	24						
	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code			
		United Airlines		233 S. W	acker Drive						
		Officed Affiliates									
⊢		(a) Catagony		Chicago,							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	• • •	(b) Description Airline fee						
	X Political	Fees									
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Т.	Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name O	office sought		Office held					
e	xpenditure to benefit C/OH			() ()							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
		\$1,025.00	06/05/2024								
⊢	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code			
		South Texas Colleg	no of Low	1303 Sar	i Jacinto St						
		South rexas Colley									
				TX 77002							
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip CLE Fees							
	X Political Fees										
				Check if Auctio	officeholder living exp	anso					
⊢)ffice sought		Office held	51156				
е	expenditure to benefit C/OH					2					

			PENDITURE CATEGOR				_			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Aw	everage Expense ards/Memorials Expense	Loan Repayment/Reimb Office Overhead/Rental Polling Expense Printing Expense Salaries/Wages/Contract	Expense Tra Tra Tra	licitation/Fundraising ansportation Equipme avel in District avel Out of District THER (enter a categor	nt & Related			
		The Ir	struction Guide explains	how to complete this	form.					
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 35/44 Rpt: 52/64	Sandill, Ravi K. (The Honorable)			00061997				
4	CREDIT CARD	Name of fi	nancial institution		UNITEMIZED		224.0	-0		
	ISSUER	see	previous	EXPENDIT CHARGED CARD	TO A CREDIT	\$	234.5	50		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	Paid				
		\$115.23	06/12/2024							
7	PAYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code		
		Aramark		2400 Marke	t Street					
				Philadelphia	DA 10102					
8	PURPOSE OF	(a) Category		(b) Descriptio						
ľ	EXPENDITURE	(See Categories listed at the		Food at eve						
	X Political	Food/Beverage Exp	ense							
	Non-Political	(C) Check if travel outsi	de of Texas. Complete Schedule	ет. 🔲	Check if Austin, TX,	officeholder living exp	ense			
9	Complete ONLY if direct	Candidate/Officehold	ler name C	Dffice sought		Office held				
expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	Paid				
		\$232.97	06/20/2024							
	PAYEE	(a) Payee name		(b) Payee add	dress;	City,	State,	Zip Code		
		Southwest Airline	c	P.O. Box 36	647-1CR					
			5							
					Dallas, TX 75235 (b) Description					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	op of this schedule)	(b) Description						
	X Political	Travel Out of Distric	et		Jillerence					
	Non-Political	(c) Check if travel outsi	de of Texas. Complete Schedule	ет.	Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officehold	ler name C	Dffice sought		Office held				
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cr	edit Card Issuer	^r Paid				
		\$205.19	06/20/2024							
	PAYEE	(a) Payee name	•	(b) Payee add	dress;	City,	State,	Zip Code		
		Clark's Houston		3807 Montro	ose Blvd					
		Clark'S Houston								
L				Houston, T						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the	op of this schedule)	(b) Descriptio		r clerk and inte	arn			
	X Political	Food/Beverage Exp				i cicik anu inte	2111			
				Chaole if August	officeholder					
⊢			e T. L	CRECK IT AUSTIN, TX,	officeholder living exp Office held	ense				
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Since Sought		Ginee Helu						

	Advartising Evennes				mant Ca	lisitation/Fundraising	Evenee		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Awar	rerage Expense ds/Memorials Expense	Loan Repayment/Reimburset Office Overhead/Rental Exper Polling Expense Printing Expense Salaries/Wages/Contract Lab	ense Tra Tra Tra	licitation/Fundraising ansportation Equipme avel in District avel Out of District THER (enter a catego	nt & Related I		
		The Ins	truction Guide explains h	ow to complete this form	n.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
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4	CREDIT CARD	Name of fina	ancial institution	5 TOTAL OF UN		¢	224 5	0	
	ISSUER	see p	previous	EXPENDITUR CHARGED TC CARD		\$	234.5	50	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	^r Paid			
		\$52.57	06/21/2024						
7	PAYEE	(a) Payee name	•	(b) Payee addres	S;	City,	State,	Zip Code	
		Kolache Factory		2045 Westheim	ner Rd				
		Rolache Factory							
L				Houston, TX 77	/098				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	p of this schedule)	(b) Description Breakfast for ju	rv.				
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	Non-Political		of Taylog, Complete Cabadula		als if Assation TV	office helder living ov			
9	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholde	e of Texas. Complete Schedule	ffice sought	CK IT AUSTIN, TX,	officeholder living exp Office held	bense		
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⊢	PAYEE	(a) Payee name		(b) Payee addres	S;	City,	State,	Zip Code	
		Nickel City		2910 McKinney	' St				
				Houston, TX 77003					
	PURPOSE OF	(a) Category		(b) Description					
		(See Categories listed at the top Food/Beverage Expe		Staff meeting					
	X Political								
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e	xpenditure to benefit C/OH				O and la sure	Delet			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid			
		\$16.67	06/30/2024						
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		Uber		182 Howard St					
		Obei							
⊢				San Francisco,	CA 94105				
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⊢			T. Cheo ffice sought	UK IT AUSTIN, TX,	officeholder living exp Office held	Jense			
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Forms provided by Texas Ethics Commission

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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Staff gift Image: Non-Political (c) Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$49.38 (b) Date of Charge 06/10/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Lyft (b) Payee address; Site 5000 San Francisco, CA 94107 City, State, Zip Code 185 Berry St. Suite 5000 San Francisco, CA 94107 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Car to airport (IAH) Mon-Political (c) Image: Check if ravel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Complete QNLY if direct Candidate/Officeholder name Office sought Office held			River Oaks Plant H	louse							
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Image: Start git Start git Image: Start git Start g		PURPOSE OF	() 0)		(b) Descri	ption					
Image:		EXPENDITURE		,	Staff gift						
Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder new Office sought Office held PAYMENT (a) Amount Charged \$49.38 (b) Date of Charge 06/10/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Lyft Iss Berry St. Suite 5000 San Francisco, CA 94107 (b) Description Car to airport (IAH) Cart o airport (IAH) Cart o airport (IAH) PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Car to airport (IAH) Cart o airport (IAH) Cart o airport (IAH) Mon-Political (c) Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		X Political	Gill/Awarus/Merriona								
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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Car to airport (IAH) Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct Candidate/Officeholder name Office sought Office held					185 Berr	y St.					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Car to airport (IAH) Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Lyft		Suite 50	00					
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	┢	Complete ONLY if direct	olete ONLY if direct Candidate/Officeholder name Office sought				Office held				
	expenditure to benefit C/OH										

Forms provided by Texas Ethics Commission

	Advertising Expense		EXPI Event Exp		IES FOR BOX	()	plicitation/Fundraising E	Exponso		
	Accounting/Banking Consulting Expense		Fees	erage Expense	Office Overhead/R Polling Expense	ental Expense Ti	ansportation Equipmer		Expense	
	Contributions/ Donations Made By Candidate/Officeholder/Politica	l Committee	Gift/Award Legal Serv	s/Memorials Expense ⁄ices	Printing Expense Salaries/Wages/Co		avel Out of District THER (enter a categor	y not listed al	oove)	
			The Inst	ruction Guide explains h	low to complete	this form.				
1	Total pages Schedule F4:						3 Filer ID (Ethic	s Commiss	sion Filers)	
	Sch: 38/44 Rpt: 55/64	Sandill, Rav	/i K. (Th	e Honorable)			00061997			
4	CREDIT CARD	Nam	e of fina	ncial institution		OF UNITEMIZED	\$	234.5	50	
	ISSUER		see p	revious		GED TO A CREDIT		204.0		
6	PAYMENT	(a) Amount Cha	rged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$120.58	}	06/10/2024						
7	PAYEE	(a) Payee name)	•	(b) Payee	address;	City,	State,	Zip Code	
		Neptune			63 Saler	n St # 1				
		Neptune								
8	PURPOSE OF	(a) Category			(b) Descri	MA 02113				
°	EXPENDITURE	(See Categories liste	d at the top	of this schedule)	.,	t conference				
	X Political	Food/Beverag	je Expe	nse						
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Offi	ceholde	name O	ffice sought		Office held			
e	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Cha	rged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$23.62		06/11/2024						
	PAYEE	(a) Payee name	•		(b) Payee	address;	City,	State,	Zip Code	
		Uber			182 How	vard St				
		0.001								
⊢	PURPOSE OF	(a) Category				ncisco, CA 94105)			
	EXPENDITURE	(See Categories liste	d at the top	of this schedule)	(b) Description Car to event at conference					
	X Political	Travel Out of	District							
	Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Offi	ceholde	name O	ffice sought		Office held			
e	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Cha	rged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$34.66		06/11/2024						
	PAYEE	(a) Payee name	;	I	(b) Payee	address;	City,	State,	Zip Code	
		Libor			182 How	/ard St				
		Uber								
						ncisco, CA 94105	5			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories liste	d at the top	of this schedule)	(b) Descri		nao to hotal			
		Travel Out of		·		event at confere				
⊢				T. ffice sought	Check if Austin, TX,	Office held	ense			
e	Complete ONLY if direct Candidate/Officeholder name C expenditure to benefit C/OH				mee sought					

		EXP	ENDITURE CATEGOR	RIES FOR BOX	10(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/- Gift/Awar	erage Expense ds/Memorials Expense	Loan Repayment/F Office Overhead/R Polling Expense Printing Expense Salaries/Wages/Co	ental Expense Ti Ti Ti Ti	olicitation/Fundraising I ansportation Equipmen ravel in District ravel Out of District THER (enter a categor	nt & Related				
		The Ins	truction Guide explains	how to complete	this form.						
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 39/44 Rpt: 56/64	Sandill, Ravi K. (Tl	he Honorable)			00061997					
4	CREDIT CARD	Name of fina	ancial institution		OF UNITEMIZED						
	ISSUER	see p	previous		IDITURES GED TO A CREDIT	\$	234.5	50			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$318.07	06/12/2024								
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code			
		United Airlines		233 S. V	Vacker Drive						
		Officed Annines			Objects II 00000						
L					, IL 60606						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descri Airline fe							
	X Political	Fees									
	Non-Political			_							
	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholde	e of Texas. Complete Schedule	e T. Office sought	Check if Austin, TX,	officeholder living exp	ense				
	expenditure to benefit C/OH	oundidate/onicenoide		Since Sought		Office field					
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$2,170.52	06/13/2024								
		+=,=: 0:0=									
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
		Charles Listel		1 Benne	tt St						
		Charles Hotel									
					ge, MA 02138						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descri	ption ay for conference						
	X Political	Travel Out of District			ay for conterence						
	Non-Political			_							
⊢	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholde	e of Texas. Complete Schedule	e 1. Office sought	Check if Austin, TX,	officeholder living exp	ense				
e e	expenditure to benefit C/OH	oundidate/onicenoide		Shice Sought		Office field					
┢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid					
		\$130.51	06/15/2024								
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code			
		United Airlines		233 S. V	Vacker Drive						
		United Annines									
⊢					, IL 60606						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Descri Airline fe							
	X Political										
					-#						
⊢	Non-Political	(c) Check if travel outside Candidate/Officeholde	e of Texas. Complete Schedule	e T. Office sought	Check if Austin, TX,	officeholder living exp	ense				
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Since Sought		Once nelu							

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award	erage Expense s/Memorials Expense	ES FOR BOX 10(a Loan Repayment/Reimbi Office Overhead/Rental I Polling Expense Printing Expense Salaries/Wages/Contract	ursement So Expense Tra Tra Tra	licitation/Fundraising E> ansportation Equipment avel in District avel Out of District 'HER (enter a category	& Related I		
		The Inst	ruction Guide explains ho	ow to complete this	form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	Commiss	sion Filers)	
	Sch: 40/44 Rpt: 57/64	Sandill, Ravi K. (Th	e Honorable)			00061997			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF EXPENDIT CHARGED CARD		\$	234.5	50	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid			
		\$17.55	06/20/2024						
7	PAYEE	(a) Payee name		(b) Payee add	ress;	City,	State,	Zip Code	
		L Un a n		182 Howard	St				
		Uber							
				San Francisco, CA 94105					
8	PURPOSE OF	(a) Category (See Categories listed at the top	of this school (a)	(b) Description					
		Travel In District	or this schedule)	Car from cel	ebration even	t			
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living expe	nse		
9	Complete ONLY if direct	Candidate/Officeholder	name Off	fice sought		Office held			
expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid			
		\$16.65	06/21/2024						
	PAYEE	(a) Payee name	•	(b) Payee add	ress;	City,	State,	Zip Code	
				182 Howard	St				
		Uber							
				San Francisco, CA 94105					
	PURPOSE OF	(a) Category		(b) Description					
		(See Categories listed at the top Travel In District	or this schedule)	Car to celebration event					
	X Political								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		Check if Austin, TX,	officeholder living expe	ıse		
	Complete ONLY if direct	Candidate/Officeholder	name Off	fice sought		Office held			
e	xpenditure to benefit C/OH		1	1					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid			
		\$76.86	06/26/2024						
	PAYEE					0.4	01-1-	71-0-1-	
	PATEE	(a) Payee name		(b) Payee add		City,	State,	Zip Code	
		Amazon.com		1200 12th A	ve. South, Ste	9. 1200			
				Seattle, WA	00111				
PURPOSE OF (a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top	,	Office suppli					
X Political Office Overhead/Rental Expense									
				Chook if Austin TV	officebolder living area	200			
⊢				fice sought	CHECK II AUSTIN, TX,	officeholder living exper	138		
е	xpenditure to benefit C/OH								
	-	1							

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	Advertising Expense Accounting/Banking	Event Exp Fees	0	oan Repayment/R ffice Overhead/Re	ental Expense Tra	licitation/Fundraising E ansportation Equipmer avel in District		Expense	
	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	s/Memorials Expense Pr	olling Expense rinting Expense	Tra	avel Out of District FHER (enter a categor	upot listed al		
	Candidate/Officenoide/Politica	0	ruction Guide explains how	alaries/Wages/Co v to complete		THER (enter a category	y not listed a	JOVE)	
1	Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·				3 Filer ID (Ethic	s Commis	sion Filers)	
 _	Sch: 41/44 Rpt: 58/64	Sandill, Ravi K. (Th	e Honorable)			00061997		,	
4	CREDIT CARD		ncial institution	5 TOTAL	OF UNITEMIZED				
	ISSUER	see n	revious	EXPEN	IDITURES	\$	234.5	50	
				CHARC	GED TO A CREDIT				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid			
		\$12.48	06/26/2024						
7	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
		Uber		182 How	ard St				
		Obei		0					
L				San Francisco, CA 94105 (b) Description					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	. /	eeting with GALs				
	X Political	Travel In District			eeting with GALS				
	Non-Political				_				
Ļ		(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	ce sought	Check if Austin, TX,	officeholder living exp	ense		
9 e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Onicenoider	name Onio	Je sought		Onice neiu			
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid			
		\$12.26	06/26/2024						
		Ψ12.20	00/20/2024						
	PAYEE	(a) Payee name		(b) Payee	address;				
				182 How	ard St				
		Uber							
					ncisco, CA 94105				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri					
		Travel In District		Car from	meeting with GA	LS			
	X Political								
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held			
e		(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid			
				(0) Duic(3)		T ulu			
		\$25.98	06/30/2024						
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
					oop West	-			
		Lanz & Swinney		Suite 500)				
Houston			TX 77092						
PURPOSE OF (a) Category		(b) Descri							
		(See Categories listed at the top Office Overhead/Ren	,	IT service	es				
X Political									
	Non-Political				Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct								
e	expenditure to benefit C/OH								

	Advertising Evennes				.,	aliaitation/Eundraiaina	Funance		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	/ - Gift/Award	erage Expense Is/Memorials Expense	Loan Repayment/F Office Overhead/R Polling Expense Printing Expense	ental Expense Ti Ti Ti	olicitation/Fundraising ransportation Equipme ravel in District ravel Out of District	nt & Related I		
	Candidate/Officeholder/Politica	Ũ	ruction Guide explains I	Salaries/Wages/Co		THER (enter a catego	ry not listed al	oove)	
1	Total pages Schedule F4:	2 FILER NAME	<u> </u>			3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 42/44 Rpt: 59/64	Sandill, Ravi K. (Th	ne Honorable)			00061997			
4	CREDIT CARD	Name of fina	ncial institution		OF UNITEMIZED	¢	224 5	.0	
	ISSUER	see p	revious		IDITURES GED TO A CREDIT	\$	\$ 234.50		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
		\$137.04	06/30/2024						
7	PAYEE	(a) Payee name	-	(b) Payee	address;	City,	State,	Zip Code	
		Brasserie 19		1962 W	Gray St				
					, TX 77019				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri Lunch m	•				
	X Political	Food/Beverage Expe	nse	Lunch III	leeting				
	Non-Political		of Texas. Complete Schedule		Check if Austin, TX	, officeholder living exp	ense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	r name C	Office sought		Office held			
F		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	PAYMENT (a) Amount Charged (b) Date of Charge \$84.65 03/01/2024			03/06/20	,				
	PAYEE	(a) Payee name How to Survive on	Land & Sea	(b) Payee 3401 Ha		City,	State,	Zip Code	
					, TX 77003				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	ption an meeting				
	X Political	Food/Beverage Expe	nse	Campaig	grifficeting				
	Non-Political		of Texas. Complete Schedule		Check if Austin, TX	, officeholder living exp	ense		
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		Office sought		Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s 06/04/20) Credit Card Issue	er Paid			
		\$253.93	06/03/2024	00/04/20	JZ4				
	PAYEE	(a) Payee name	-	(b) Payee	address;	City,	State,	Zip Code	
		Hudson House		1964 W	Gray St				
			, TX 77019						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	•				
X Political		Lunch m							
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX	, officeholder living exp	ense		
e	Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Candidate/Officeholder name			Office sought		Office held			

	EXPI	ENDITURE CATEGOR	RIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Award	erage Expense s/Memorials Expense	Loan Repayment/Reimburse Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract La	ense Tra Tra Tra	licitation/Fundraising ansportation Equipme avel in District avel Out of District 'HER (enter a catego	nt & Related I			
	The Inst	ruction Guide explains I	how to complete this for	m.					
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
Sch: 43/44 Rpt: 60/64	Sandill, Ravi K. (Th	e Honorable)			00061997				
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UN EXPENDITUR		\$	234.5	:0		
ISSUER	see p	revious	CHARGED TO CARD		Φ	204.0			
6 PAYMENT	(a) Amount Charged \$25.98	(b) Date of Charge 02/28/2024	(c) Date(s) Credit 03/06/2024	Card Issuer	Paid				
7 PAYEE	(a) Payee name	•	(b) Payee addres	s;	City,	State,	Zip Code		
	Lonz & Cwinnov		2950 N Loop V	Vest					
	Lanz & Swinney		Suite 500						
			Houston, TX 7	7092					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description IT services						
X Political	Office Overhead/Ren	tal Expense							
Non-Political		of Taylor Complete Cale dula			- ff k - k - k - k - k - k - k - k -				
9 Complete <u>ONLY</u> if direct	(C) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	CK IF AUSTIN, TX, O	officeholder living exp Office held	ense			
expenditure to benefit C/OH			since bought						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid	aid			
\$31.74 05/15/2024			06/04/2024						
PAYEE	(a) Payee name	1	(b) Payee addres	s;	City,	State,	Zip Code		
	Tres Market Foods		2620 Joanel St	:					
			Houston, TX 7	7027					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
X Political	Food/Beverage Expe	,	Breakfast meet	ung					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Che	ck if Austin, TX, o	officeholder living exp	ense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder		Office sought		Office held				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit 06/04/2024	t Card Issuer	Paid				
	\$223.18	05/15/2024	06/04/2024						
PAYEE	(a) Payee name	•	(b) Payee addres	s;	City,	State,	Zip Code		
	Street to Kitchen		3401 Harrisbur	g Blvd					
			Suite G						
	(a) Catagoni		Houston, TX 7	7003					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Lunch with forn	ner law cler	ks				
X Political Food/Beverage Expense				NJ					
				old if Assettion The	officeholderst				
			Diffice sought	UK II AUSTIN, TX, I	officeholder living exp Office held	lense			
expenditure to benefit C/OH									

EXPENDITURE CATEGORIES FOR BOX 10(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equi Travel in District Travel Out of Distric				
		The Inst	ruction Guide explains l	how to complete this form.					
1	Total pages Schedule F4:	otal pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 44/44 Rpt: 61/64	Sandill, Ravi K. (Th	e Honorable)		00061997	00061997			
4	CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZ EXPENDITURES	\$	234.5	50		
		See pi	evious	CHARGED TO A CRE CARD	DIT				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$322.25	05/09/2024	06/04/2024					
7	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				2814 Navigation			•		
		El Tiempo Cantina							
				Houston, TX 77003					
8	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top		Staff lunch					
	X Political	Food/Beverage Exper	ise						
	Non-Political	(C) Check if travel outside (of Texas, Complete Schedule		TX officebolder living	evnense			
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
-	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid				
		\$335.44	05/14/2024	06/04/2024					
		¢000.11	00/1 //2021						
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				1814 Washington Ave					
		B&B Butchers							
				Houston, TX 77007	Houston, TX 77007				
	PURPOSE OF	(a) Category		(b) Description					
		(See Categories listed at the top of this schedule) Food/Beverage Expense		Staff birthday lunch	Staff birthday lunch				
X Political									
	Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if Austin	Check if Austin, TX, officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder name Office		ce sought Office held					
e	xpenditure to benefit C/OH								

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instru	bages Schedule K: 1/1 Rpt: 62/64				
2 FILER NAME	D (Ethics Commissi	on Filers)			
Sandill, Rav	vi K. (⁻	00061	L997		
4 Date	5 N	Name of person from whom amount is received	1	8 Amount (\$)	
03/28/2024	. ∠	Aceves Communications			\$1,500.00
	6 A	Address of person from whom amount is received; City; State; Zip Code			
	H 7 F	ribution returned to fi	ler		
	F	Refund			
Date		Name of person from whom amount is received		Amount (\$)	
06/07/2024	N N	Microsoft			\$138.18
	A	Address of person from whom amount is received; City; State; Zip Code			
		Redmond, WA 98052			
		Refund	ponucar com	ribution returned to fi	ler
Date		Name of person from whom amount is received		Amount (\$)	* 201.01
06/30/2024		Jnited Airlines Address of person from whom amount is received; City; State; Zip Code			\$331.84
		Chicago, IL 60606			
		Purpose for which amount is received Check if Refund	political cont	ribution returned to fi	ler
		Relatio			

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

SCHEDULE T

					1 Tatal as was Oak adula Ta				
The Inst	ruction (Guide explains	1 Total pages Schedule T: Sch: 1/2 Rpt: 63/64						
2 FILER NAME			· · · · · · · · · · · · · · · · · · ·						
Sandill, Ravi K.	(The Hond	orable)	3 Filer ID (Ethics Commission Filers) 00061997						
4 Name of Contribut	tor / Corpor	ation or Labor Org	anization / Pledgor /Pay	ee					
United Airlines									
5 Contribution / Exp	enditure rep	ported on:							
Schedule A2									
Schedule F2									
6 Dates of Travel	Dates of Travel 7 Name of person(s) traveling								
	Sandill, R.K. (The Honorable)								
	8 Depart	ure city or name c	f departure location						
06/09/2024	Houst	on, TX							
	9 Destina	ation city or name	of destination location						
06/09/2024	Bosto	n, MA							
10 Means of transpor	tation	11 Purpose of tra	avel (including name of c	onference, seminar, or	other event)				
Commercial Airp	olane	Travel to Bo	ston for Program on N	Negotiation					
Name of Contribut	tor / Corpor	ation or Labor Org	anization / Pledgor /Pay	ee					
United Airlines									
Contribution / Exp	enditure rep	ported on:							
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D Schedule F1				
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dates of Travel	Name	of person(s) trave	ling						
		ll, R.K. (The Hor							
			f departure location						
06/12/2024	Bosto	-							
	Destin	ation city or name	of destination location						
06/12/2024	Houst	on, TX							
Means of transpor	Means of transportation Purpose of travel (including name of conference, seminar, or other event)								
Commercial Airp	Commercial Airplane Return travel home from Boston for Program on Negotiation								
Name of Contribut	tor / Corpor	ation or Labor Ord	anization / Pledgor /Pav	ee					
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee United Airlines									
Contribution / Expenditure reported on:									
Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1									
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC				
Dales of Travel	Dates of Travel Name of person(s) traveling								
Sandill, R.K. (The Honorable)									
07/11/2024 Departure city or name of departure location 07/11/2024 Houston. TX									
07/11/2024 Destination city or name of destination location									
Means of transpor					,				
Commercial Airplane Travel to Toronto for South Asian Bar Association National Convention									

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

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee United Airlines								
5 Contribution / Expe	enditure rep	orted on:						
Schedule A2		Schedule B Schedule F4	Schedule B(J)	Schedule C2	Schedule D	Schedule F1		
6 Dates of Travel	7 Name of person(s) traveling Sandill, R.K. (The Honorable)							
07/17/2024	8 Departure city or name of departure location							
011112024	Toronto, Canada P Destination city or name of destination location							
07/17/2024	9 Destination city or name of destination location07/17/2024Houston, TX							
10 Means of transport	tation	11 Purpose of tr	avel (including name of o	conference, seminar, or of	ther event)			
Commercial Airp	lane	Return trav	el home from conferer	nce in Toronto				
Name of Contribut United Airlines	or / Corpora	ation or Labor Org	ganization / Pledgor /Pay	ee				
Contribution / Expe	enditure rep	oorted on:						
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1		
Schedule F2		Schedule F4	Schedule G	Schedule H	Schedule COH-UC			
Dates of Travel	Dates of Travel Name of person(s) traveling Sandill, R.K. (The Honorable)							
	-		of departure location					
08/04/2024	08/04/2024 Aspen, CO							
08/04/2024	Destination city or name of destination location D4/2024 Los Angeles, CA							
	Means of transportation Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Travel to Harris County Judges' CLE							
Name of Contribut United Airlines	or / Corpora	ation or Labor Org	ganization / Pledgor /Pay	ee				
Contribution / Expe	enditure rep	orted on:						
Schedule A2								
Schedule F2	× s	Schedule F4	Schedule G	Schedule H	Schedule COH-UC	_		
Dates of Travel	Dates of Travel Name of person(s) traveling Sandill, R.K. (The Honorable)							
Departure city or name of departure location								
08/07/2024 Los Angeles, CA								
08/07/2024	Destination city or name of destination location 08/07/2024 Houston, TX							
Means of transportation Purpose of travel (including name of conference, seminar, or other event)								
Commercial Airplane Return travel to Houston from Harris County Judges' CLE								
Forms provided by 1	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0							