FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00061997 96 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Ravi K. NAME Date Received **ELECTRONICALLY FILED** 01/15/2025 NICKNAME LAST **SUFFIX** Sandill CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 56386 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77256 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Mary Shannon NAME NICKNAME LAST **SUFFIX** Santee STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 325 W 18th St. **ADDRESS** (Residence or Business) Houston, TX 77008 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 942-5816 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2024 12/31/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 127 Harris None

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Sandill, Ravi K. (The	Honorable)	14 Filer ID ((Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 13,320.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 339.46
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 84,541.92
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 66,345.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hon	orable Ravi K. Sandi	II
		Signature of	f Candidate or Officehol	der
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subsc	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	er administering oath	Printed name of officer administering oath	Title of officer	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH **COVER SHEET PG 3**

				3 of 96	
18 FILEF		ME avi K. (The Honorable)	19 Filer ID 00061997	(Ethic	cs Commission Filers)
		E SUBTOTALS SCHEDULE		:	SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	13,320.00
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	3	\$	51,309.10
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	33,232.82
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	4,565.03

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/15 Rpt: 4/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/02/2024 Abrams, Barry 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00		
		Houston, TX 77079				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10	Contributor's e Blank Rome	employer/law firm LLP		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	07/02/2024	Amin, Dilip Contributor address; City;				\$101.00
		Jersey Village, TX 7706	4	I 0 17 1 1 1 77		
	Attorney	Principal Occupation		Contributor's Job Title Lawyer		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
		f Dilip M Amin		Law iiiiii oi continuttoi 3 3	Jou.	se (ii diiy)
		s a child, law firm of parent(s) (if	anv)			
		, , , , , , , , , , , , , , , , , , , ,	,,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/01/2024	Ammons, Robert				\$500.00
		Contributor address; City; Houston, TX 77006	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	morpai Occupation		Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Ammons Lav	w Firm		Ammons Law Firm		
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/15 Rpt: 5/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/02/2024 Boatman, RJ 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77062				
8		Principal Occupation		9 Contributor's Job Title		
	Executive			Executive Director		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/01/2024	Burrus, Matthew Contributor address; City; Houston, TX 77024	State; Zip Code			\$100.00
_	Contributor's F	Principal Occupation		Contributor's Job Title		
		unications Officer		Chief Communications	Off	icer
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Houston Ass	sociation of Realtors				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/03/2024	Cargas, James				\$50.00
		Contributor address; City; Houston, TX 77006	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Managing Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self-Employ	ed				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/15 Rpt: 6/96
2	FILER NAME Sandill, Ravi	i K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/01/2024 Cooper, James 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77005				
8		Principal Occupation		9 Contributor's Job Title		
L	Attorney			Partner		
10	Reed Smith	employer/law firm LLP		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/01/2024	Contributor address; City; Webster, TX 77598	State; Zip Code			\$500.00
H	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Spencer Far	ne				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/02/2024	Crabtree, Travis Contributor address; City; Bellaire, TX 77401	State; Zip Code			\$100.00
H	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	EVP & Coun			Vice President		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Swyft Filings	3				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/15 Rpt: 7/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00061997
4	07/02/2024 Criaco, Adam 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
		Houston, TX 77060				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Owner		
10		employer/law firm		11 Law firm of contributor's sp	oouse	e (if any)
12	Criaco & Sai	rriperi s a child, law firm of parent(s) (i	· anul			
12	. II CONTINUATOR I	s a cilliu, law littii oi paretii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι.	Amount of Contribution (\$)
	07/02/2024	DeLaune, Patrick				\$100.00
		Contributor address; City; Houston, TX 77079	State; Zip Code			
	Contributor's F	I		Contributor's Job Title	<u> </u>	
	Attorney			Of Counsel		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Bowman and	d Brooks				
	If contributor is	s a child, law firm of parent(s) (if	any)			
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/01/2024	Durrani, AJ	_			\$250.00
		Contributor address; City; Houston, TX 77024	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/15 Rpt: 8/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/01/2024 Fry, Terry 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77098				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Me			Owner		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
L	Terry G Fry			Lucero Wollam LLC		
12	2 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 (\$)
	07/03/2024	Gomez, Jorge Contributor address; City; \$	State; Zip Code		-	\$500.00
		Houston, TX 77080		T		
		Principal Occupation		Contributor's Job Title Solo Practitioner		
	Attorney	employer/law firm				on (if any)
	Gomez Law			Law firm of contributor's sp	Jou:	se (II arry)
-		s a child, law firm of parent(s) (if	anv)			
	ii continuator ii	o a orma, favorimo o paromico, (ii	a.,,,			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/01/2024	Granger, Weldon	_			\$2,500.00
		Contributor address; City; S Houston, TX 77024	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Jones Grang	ger Law Firm				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CON	ITRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to c	omplete this form.	1 Total pages Schedule A(J)1: Sch: 6/15 Rpt: 9/96
2	FILER NAME Sandill, Rav	K. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00061997
4	Date 07/01/2024		it-of-state PAC (ID#:) ip Code	7 Amount of Contribution (\$) \$500.00
		Spring, TX 77386		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10	Contributor's Hastings La	employer/law firm	11 Law firm of contributor's s	spouse (if any)
12		s a child, law firm of parent(s) (if any)		
12	in contributor i	s a clina, law initi of parchi(s) (if any)		
F	Date	Full name of contributor 0	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/01/2024	Hollins, Christopher		\$250.00
		Contributor address; City; State; Z	in Code	
		Contributor address, Oity, State, 2	p Code	
		Houston TV 77004		
		Houston, TX 77004	T	
		Principal Occupation	Contributor's Job Title	
	Controller		City Controller	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	City of Hous	ton	White & Case LLP	
	If contributor i	s a child, law firm of parent(s) (if any)		
-	Date	Full name of contributor Ou	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/01/2024	Khan, Gagan		\$250.00
		Contributor address; City; State; Z	ip Code	·· <mark> </mark>
		·		
		Houston, TX 77024		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Principle	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Gk Law PLL	С		
	If contributor i	s a child, law firm of parent(s) (if any)	•	
ı				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/15 Rpt: 10/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/01/2024 Kherkher, Steve 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Houston, TX 77098				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Partner		
10	Contributor's 6 Kherkher Ga	employer/law firm arcia LLP		11 Law firm of contributor's sp	oous	se (If any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/02/2024	Lapidus, Mark Contributor address; City;	State; Zip Code			\$250.00
		Houston, TX 77057		T		
		Principal Occupation		Contributor's Job Title		
	Attorney	employer/law firm		Attorney Law firm of contributor's sp	2011	on (if any)
	Lapidus Knu	• •		Law littl of contributors sp	Jous	se (ii aiiy)
	•	s a child, law firm of parent(s) (i	f anv)			
		o a orma, iam mm or parom(o) (i	,,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/02/2024	Leal, Michele	_			\$500.00
		Contributor address; City; Houston, TX 77006	State; Zip Code			
_	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Consultant			Consultant		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	EnFocus Gr	oup				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/15 Rpt: 11/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/02/2024 Loras, Scott 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Houston, TX 77008				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 LORAS, PC	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/01/2024	Lucido, Rita Contributor address; City;	State; Zip Code		•	\$100.00
		Houston, TX 77098		1		
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		and the sun of
	Retired	employer/law firm		Law firm of contributor's sp)Ou:	se (II ally)
_		s a child, law firm of parent(s) (i	f any)			
	coacc	o a orma, iam imm or parom(o) (i	, ,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)
	07/03/2024	Magenheim, Alan				\$250.00
		Contributor address; City; Houston, TX 77006	State; Zip Code		•	
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Owner-Member		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Magenheim	Zehnder		Magenheim Zehnder		
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 9/15 Rpt: 12/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/01/2024 McIlvain, Patrick 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$15.00		
		Houston, TX 77007				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Retired	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (if	any)			
			,,			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/01/2024	Najam, Ayesha Contributor address; City; \$	State; Zip Code			\$100.00
		Houston, TX 77024				
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Gibbs & Bru	ns				
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/02/2024	Natarajan, Rufi	_			\$100.00
		Contributor address; City; 9 Houston, TX 77007	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Community			Events Director		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Harris Count	ty Precinct 4				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/15 Rpt: 13/96
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/02/2024 Nolen, Rand 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77019				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10		employer/law firm en & Jez, LLP		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f anv)			
	. II continuator i	o a orma, raw mm or paromi(o) (r				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/01/2024	Parikh, Mona Contributor address; City;	<u> </u>			\$250.00
		Sugar Land, TX 77478				
		Principal Occupation		Contributor's Job Title		
	Attorney	and a conflored fines		Partner		on (if any)
	Jones Mays	employer/law firm Parikh		Law firm of contributor's sp	Jous	e (II ally)
		s a child, law firm of parent(s) (i	f anv)			
			,,			
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)
	07/02/2024	Quadros, Shannon	_			\$50.00
		Contributor address; City; Houston, TX 77018	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	incipal occupation		Shareholder		
_		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		gl & Crosby PLLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	form.	1 Total pages Schedule A(J)1: Sch: 11/15 Rpt: 14/96	
2	FILER NAME Sandill, Rav	i K. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00061997
4 Date 07/03/2024		Full name of contributor Reagan, Sean Contributor address; City;	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$) \$400.00
		Houston, TX 77079			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Owner	
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)
	The Reagan				
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/02/2024	Ruzinsky, Bruce			\$100.00
		Contributor address; City;	State: 7in Code		···
		Contributor address, Oity,	State, Zip Gode		
		Houston TV 77004			
		Houston, TX 77024		T - "	
		Principal Occupation		Contributor's Job Title	
	Attorney			Partner	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Jackson Wa	lker LLP			
	If contributor i	s a child, law firm of parent(s) (i	f any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/02/2024	Scott, Dwight	_		\$500.00
		Contributor address; City;	State; Zip Code		
			. ,		
		Pearland, TX 77581			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Scott Patton	PC			
	If contributor i	s a child, law firm of parent(s) (i	f any)		
L					
ı					

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 12/15 Rpt: 15/96		
2	FILER NAME Sandill, Ravi	i K. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00061997
4	Date 07/01/2024	5 Full name of contributor Sebastian, Anna6 Contributor address; City; StatesKingwood, TX 77339	7 Amount of Contribution (\$) \$50.00		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	
•	Attorney	Throipar Occupation	Attorney		
10	Contributor's	employer/law firm arreal & Associates	11 Law firm of contributor's sp	ouse (if any)	
12		s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/01/2024	Shamsi, Farrukh Contributor address; City; Sta Houston, TX 77022	<u> </u>		\$500.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>
	Program Dir			President	
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)
	Texas Clinic				
	If contributor is	s a child, law firm of parent(s) (if a	ny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/02/2024	Sorola-Pohlman, Lenora Contributor address; City; Sta Houston, TX 77008	ate; Zip Code		\$500.00
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Consultant			Owner	
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)
	Sorola Insur	ance Services			
	If contributor is	s a child, law firm of parent(s) (if a	ny)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 13/15 Rpt: 16/96		
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Street, Hanson 6 Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$127.00
		Houston, TX 77019				
8		Principal Occupation	9 Contributor's Job Title			
	Settlement of			Settlement consultant		
10	Contributor's 6 Street Settle	employer/law firm ments, LLC		11 Law firm of contributor's sp	ous	se (if any)
12	2 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 (\$)
	07/01/2024	Street, Rome Contributor address; City; Houston, TX 77019	State; Zip Code			\$127.00
_	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Therapist	molpai Occupation		Trauma Therapist		
	·	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)
	07/02/2024	Taherzadeh, Mo	out of state 1710 (IBM.	/		\$250.00
		Contributor address; City; Sugar Land, TX 77479	State; Zip Code		•	
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Managing shareholder		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Taherzadeh	, PC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 14/15 Rpt: 17/96		
2	FILER NAME Sandill, Ravi	K. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00061997
4	07/01/2024 Ward, Andrea 6 Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$100.00
		Webster, TX 77598				
8		Principal Occupation		9 Contributor's Job Title		
	Philanthropy			Philanthropy Officer		
10		employer/law firm ain Tumor Foundation		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	07/02/2024	Waters, Jeffrey Contributor address; City;	<u> </u>		•	\$100.00
		Kingwood, TX 77339				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Sales			President		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	National Air	of Texas				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	07/01/2024	White, Allen	<u> </u>	·		\$500.00
		Contributor address; City; Houston, TX 77080	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Chief IP Counsel		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Air Liquide L	JSA LLC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONETARY POLITICAL CONTRIBUT	SCHEDULE A(J)1		
	The Instruction Guide explains how to complete this	1	Total pages Schedule A(J)1: Sch: 15/15 Rpt: 18/96	
2	FILER NAME Sandill, Ravi K. (The Honorable)		1	Filer ID (Ethics Commission Filers) 00061997
4	Date 07/01/2024 5 Full name of contributor out-of-state PAC (ID Wolfe, Zach 6 Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$) \$100.00
	The Woodlands, TX 77389			
8	Contributor's Principal Occupation	9 Contributor's Job Title		
	Attorney	Trial Lawyer, Thought L	Lead	er
10	O Contributor's employer/law firm	11 Law firm of contributor's sp	pouse	e (if any)
	Zach Wolfe Law Firm 2 If contributor is a child, law firm of parent(s) (if any)			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1: Sch: 1/7 Rpt: 19/96	2 FILER NAME Sandill, Ravi K. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00061997								
4	Date 12/31/2024	5 Payee name Ammons, Robert								
	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 3700 Montrose Blvd. #1 Houston, TX 77006								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Refund of contribution overage								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date 07/08/2024	Payee name Chase Cardmember Services								
	Amount (\$) \$6,719.46	Payee address; City; State; Zip Code P.O. Box 6294 Carol Stream, IL 60197								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card payment								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date 08/05/2024	Payee name Chase Cardmember Services								
	Amount (\$) \$3,155.29	Payee address; City; State; Zip Code P.O. Box 6294								
		Carol Stream, IL 60197								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card payment								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

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

Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/7 Rpt: 20/96 Sandill, Ravi K. (The Honorable) 00061997 4 Date Payee name 08/29/2024 Chase Cardmember Services 6 Amount (\$) Payee address; City; State; Zip Code \$9,999.37 P.O. Box 6294 Carol Stream, IL 60197 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit card payment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/07/2024 Chase Cardmember Services Amount (\$) Payee address; City; State; Zip Code \$4,270.03 P.O. Box 6294 Carol Stream, IL 60197 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit card payment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/23/2024 Chase Cardmember Services Amount (\$) Payee address: City: State; Zip Code \$7,535.47 P.O. Box 6294 Carol Stream, IL 60197 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Credit Card Payment **EXPENDITURE** Check if Austin, TX, officeholder living expense Credit card payment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations wade by - Git/Awards/Memorials Expense Printing Expense Traver Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not liste Credit Card Payment						
		The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1: Sch: 3/7 Rpt: 21/96	2 FILER NAME Sandill, Ravi K. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00061997				
4	Date 11/18/2024	5 Payee name Chase Cardmember Services	-				
6	Amount (\$) \$10,779.72	7 Payee address; City; State; Zip Code P.O. Box 6294 Carol Stream, IL 60197					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment (b) Description Check if to	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense d payment				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/24/2024	Direct TV					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$235.00	P.O. Box 105261					
		Atlanta, GA 30348					
	PURPOSE OF EXPENDITURE	Check if A	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense Service for courtroom				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/31/2024	Granger, Weldon					
	Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 310 East Friar Tuck Lane					
		Houston, TX 77024					
	PURPOSE OF EXPENDITURE	Check if A	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense contribution overage				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/7 Rpt: 22/96	Sandill, Ravi K. (The Honorable)	00061997
4 Date	5 Payee name	•
11/10/2024	Grijalva, Cynthia	
6 Amount (\$)	7 Payee address; City; State; Zip (Code
\$1,000.00	20711 Cranfield Dr	
	Katy, TX 77450	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Year end gift
O Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		bught Office field
Dete	T -	
Date	Payee name	
11/11/2024	Level Arts, LLC	- .
Amount (\$)	Payee address; City; State; Zip (Code
\$480.00	4620 Norhill Blvd.	
	Houston, TX 77009	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Transportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Expense	Art movers
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/O	Н	
Date	Payee name	
11/07/2024	Martinez, Felix	
Amount (\$)	Payee address; City; State; Zip (Code
\$220.00	11130 Triola Lane	
	Houston, TX 77072	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Transportation Equipment And Related	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Expense	Check if Austin, TX, officeholder living expense
		Movers
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought Office held
ехрепините но репени С/О	11	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 5/7 Rpt: 23/96	Sandill, Ravi K. (The Honorable) 00061997
4	Date	5 Payee name
	07/01/2024	Piryx, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$532.80	995 Market St.
		2nd Floor
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
_	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online donation fees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Groi	'
	Date	Payee name
	10/18/2024	Raja Sweets
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	5667 Hillcroft St
		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Diwali event refreshments
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Daniel and a second a second and a second an
	Date 11/10/2024	Payee name Suptak Donnie
		Syptak, Donnie
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	14911 N Gray Heron
		Cypress, TX 77433
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Year end gift
		Total ond gift
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/7 Rpt: 24/96	Sandill, Ravi K. (The Honorable) 00061997
4	Date	5 Payee name
	07/15/2024	U.S. Postal Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$116.96	2802 Timmons Lane
		Houston, TX 77027
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Postage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
_	Date	Payee name
	08/09/2024	University of Houston Law Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$790.00	4604 Calhoun Rd.
	Ψ100.00	100 i Gamban Ka
		Houston, TX 77004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Transact Zaw Sala a rasion
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/10/2024	Williams, Carol
	Amount (\$)	Payee address; City; State; Zip Code 6523 Grey Oaks Dr
	\$250.00	0525 GIEV OAKS DI
	l	Houston, TV 77050
		Houston, TX 77050
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Cift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Year-end gift
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	H end of the second of the sec

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/M Legal Service	lemorials Exp s			xpens Vages	e Contract Labor te this form.		Travel in Distric Travel Out of Di OTHER (enter a	strict	t listed above)
1	Total pages Schedule F1:	2	FILER NAM							3	Filer ID	(Ethics C	ommission Filers)
	Sch: 7/7 Rpt: 25/96		Sandill, Ra	vi K. (The	Honorab	le)					00061997		
4	Date	5	Payee name										
l	10/17/2024		Yusef, Jay										
6	Amount (\$)	7	Payee addre	ss; City	y;	State;	Zip Co	de					
l	\$275.00		6319 Oak I	Burl Lane									
l													
			Sugar Land	I, TX 7747	'9								
8	PURPOSE	(a)	Category (S	ee Categories	listed at the t	op of this sch	edule)	(b)	Description				
l	OF EXPENDITURE		Travel Out						ш		de of Texas. Con		ıle T.
l	LXI LINDITORL								_		officeholder livin		
l									San Antonio	trai	nsport to CL	E.	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	iceholder n	ame	C	Office sou	ght			Office h	eld	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filer								
	Sch: 1/68 Rpt: 26/96	Sandill, Ravi K. (Th	e Honorable)	00061997							
4	CREDIT CARD ISSUER		ncial institution ase	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 339.46							
6	PAYMENT	(a) Amount Charged	(b) Date of Charge			edit Card Issuer	Paid				
		\$300.00	10/02/2024	10/04/20)24						
7	PAYEE	(a) Payee name		(b) Payee	ado	dress;	City,	State,	Zip Code		
		AABA of Houston				ane, Suite 360					
		() 2		Houston,							
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip							
		Contributions/Donatio	ns Made By	Ticket to	ווט	iner CLE					
	X Political	Candidate/Officeholde			_						
Ļ	Non-Political	`	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held				
_	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Data(s)	۱ (۲	edit Card Issuer	· Daid				
	PATMENT	\$251.86	10/07/2024	10/22/20		edit Card issuer	raiu				
		Ψ201.00	10/01/2024								
PAYEE		(a) Payee name	(b) Payee	ado	dress;	City,	State,	Zip Code			
			1902 Wa	shi	ngton Ave Sui	te C					
		Aiko									
			Houston,								
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	(b) Descrip								
		Food/Beverage Exper	Meal with	1 Ji	udges						
	X Political										
	Non-Political	` 1	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held				
e	xpenditure to benefit C/OH	(a) A many mat Chause and	(h) Data of Charge	(a) Data(a)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	andit Cond Inc.	Daid				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	08/04/20	,	edit Card Issuer	Paid				
		\$68.40	07/11/2024	00/01/20							
	PAYEE	(a) Payee name	l	(b) Payee	ado	dress;	City,	State,	Zip Code		
				7373 Cte	e Ve	ertu, Boulevard	d West				
		Air Canada									
						nt QC H4S1Z3	3 Canada				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description Change fee							
		Fees	of this scriedule)								
	X Political										
	Non-Political	(*) L	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held				
L e	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)					
	Sch: 2/68 Rpt: 27/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	\$ 339.46				
6	PAYMENT	(a) Amount Charged \$20.56	(b) Date of Charge 07/12/2024	(c) Date(s) Credit Card Issuer Paid 08/04/2024							
7	PAYEE	(a) Payee name Amazon			address; y Avenue North WA 98109	City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descrip	otion						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
ex	penditure to benefit C/OH			1							
	PAYMENT	(a) Amount Charged \$14.05	(b) Date of Charge 08/13/2024	(c) Date(s)	Credit Card Issuer 24	r Paid					
PAYEE (a) Payee name			(b) Payee		City,	State,	Zip Code				
		Amazon			y Avenue North						
					WA 98109						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
ex	Complete ONLY if direct complete to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$14.01	(b) Date of Charge 08/18/2024	(c) Date(s) 08/27/20	Credit Card Issuer 24	r Paid					
	PAYEE	(a) Payee name Amazon		(b) Payee address; 410 Terry Avenue North Seattle, WA 98109		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Office supplies							
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
ex	Complete ONLY if direct openditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
l											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(1 11 11 11 11 11 11 11 11 11 11 11 11 1	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 3/68 Rpt: 28/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 339.46		
6	PAYMENT	(a) Amount Charged \$22.72	(b) Date of Charge 08/18/2024	(c) Date(s) Credit Card Issuer Paid 08/27/2024				
7	PAYEE	(a) Payee name Amazon		(b) Payee address; City, State 410 Terry Avenue North Seattle, WA 98109				Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	9 Complete ONLY if direct Candidate/Officeholder name Office sou			e sought	_	Office held		
e	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$23.35	(b) Date of Charge 09/15/2024	(c) Date(s 10/04/20) Credit Card Issuer 124	Paid		
	PAYEE (a) Payee name		•	(b) Payee	address;	City,	State,	Zip Code
		Amazon		410 Terr	y Avenue North			
L					WA 98109			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
	PAYMENT	(a) Amount Charged \$33.98	(b) Date of Charge 09/17/2024	(c) Date(s)) Credit Card Issuer)24	Paid		
	PAYEE	(a) Payee name Amazon			address; y Avenue North WA 98109	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri Office su				
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
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SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeriolide//Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	•	TIER (eliter a category	r not iisteu ai	oove)		
1 Total pages Schedule F4:		·	·	3 Filer ID (Ethics Commission Filers)				
Sch: 4/68 Rpt: 29/96	Sandill, Ravi K. (Th	e Honorable)		00061997	00061997			
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	\$ 339.46			
6 PAYMENT	(a) Amount Charged \$33.95	(b) Date of Charge 10/06/2024	(c) Date(s) Credit Card Issuer 10/22/2024	Paid				
7 PAYEE	(a) Payee name Amazon		(b) Payee address; 410 Terry Avenue North Seattle, WA 98109	City,	State,	Zip Code		
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies					
Non-Political	(c) distribution states of rotate constitute states in			officeholder living expe	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Data of Chargo	(a) Data(s) Cradit Card Issuer	Doid				
PATMENT	(a) Amount Charged \$182.93	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issuer 10/22/2024	Palu				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
	Amazon		410 Terry Avenue North					
			Seattle, WA 98109					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$30.30	(b) Date of Charge 11/06/2024	(c) Date(s) Credit Card Issuer 11/15/2024	Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	Amazon		410 Terry Avenue North					
			Seattle, WA 98109					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office supplies					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 5/68 Rpt: 30/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$ 339.46		
6	PAYMENT	(a) Amount Charged \$100.26	(b) Date of Charge 09/04/2024	(c) Date(s)				
7	PAYEE	(a) Payee name Angkor Bistro		(b) Payee address; City, State 3111 TPC Pkwy San Antonio, TX 78259				Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
	PAYMENT	(a) Amount Charged \$33.85	(b) Date of Charge 08/21/2024	(c) Date(s) 08/27/20) Credit Card Issuei 124	Paid		
	PAYEE	(a) Payee name (b) Payee address 2417 Westheim		estheimer Rd	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	, TX 77098 ption it meeting			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	ı	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$46.55	(b) Date of Charge 10/04/2024	(c) Date(s)) Credit Card Issuei 124	Paid		
	PAYEE	(a) Payee name Avalon Diner		(b) Payee address; 2417 Westheimer Rd Houston, TX 77098		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descri Breakfas	ption it meeting with Ju	dges		
L	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 expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)					
Sch: 6/68 Rpt: 31/96	Sandill, Ravi K. (Th	e Honorable)		00061997							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.46						
6 PAYMENT	(a) Amount Charged \$72.01	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issuer 10/22/2024	Paid							
7 PAYEE	(a) Payee name Avalon Diner		(b) Payee address; 2417 Westheimer Rd	City,	State,	Zip Code					
	() 0 :		Houston, TX 77098								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Breakfast meeting								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp							
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(a) Data(a) Cradit Card Issuer	Doid							
PATMENT	\$43.40	(b) Date of Charge 10/24/2024	(c) Date(s) Credit Card Issuer 11/15/2024	Palu							
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code					
	Avalon Diner		2417 Westheimer Rd								
			Houston, TX 77098								
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Breakfast meeting								
Non-Political	(a) Charleithean all autaids	of Towns Committee Colombia	Observit Avertin TV	-#:							
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living exp	ense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Carididate/Officeriolder	Tiane Office	2 Sought	Office field							
PAYMENT	(a) Amount Charged \$32.73	(b) Date of Charge 10/28/2024	(c) Date(s) Credit Card Issuer 11/15/2024	Paid							
PAYEE (a) Payee name Avalon Diner		(b) Payee address; 2417 Westheimer Rd Houston, TX 77098	City,	State,	Zip Code						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	· ·	(b) Description Breakfast with GAL								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH Condidate/Office on the condidate of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
	Sch: 7/68 Rpt: 32/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$ 339.46					
6	PAYMENT	(a) Amount Charged \$11.20	(b) Date of Charge 09/24/2024	(c) Date(s) (10/04/202	Credit Card Issuer 4	ssuer Paid					
7	PAYEE	(a) Payee name Badolina Bakery			ingside Dr #110	City,	State,	Zip Code			
Ļ		(a) Category		Houston, T							
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Coffee meeting									
	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, T			Check if Austin, TX,	, officeholder living expense					
9	Complete ONLY if direct			e sought		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$119.54	(b) Date of Charge 08/28/2024	(c) Date(s) 0 10/04/202	Credit Card Issuer 4	Paid					
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code			
Barnaby's Caf			414 W Gra	ay St							
				Houston, T	TX 77019						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descripti Staff Meal	on						
	Non-Political	() 🗖 =			7						
┡		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
е	Complete ONLY if direct xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$46.97	(b) Date of Charge 10/14/2024	(c) Date(s) 0 10/22/202	Credit Card Issuer 4	Paid					
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code			
		Barnaby's Caf		414 W Gra	ny St						
L				Houston, 7	TX 77019						
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descripti Judges Me							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense				
Complete ONLY if direct expenditure to benefit C/OH Condidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Condidate/Officeholder name Check if Austin, TX, officeholder living expense Office sought Office held											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete	this form.	(9-	.,	,		
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)				
Sch: 8/68 Rpt: 33/96	Sandill, Ravi K. (Th	e Honorable)			00061997				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.46			
6 PAYMENT	(a) Amount Charged \$8.29	(b) Date of Charge 07/18/2024	(c) Date(s) 08/04/20	Credit Card Issue 24	r Paid				
7 PAYEE	(a) Payee name Better Luck Tomorrow		(b) Payee 544 Yale	St	City,	State,	Zip Code		
	() 2 :			TX 77007					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echadula)	(b) Descrip	otion		339.46 d ity, State, Zip Code nolder living expense fice held d ity, State, Zip Code			
	Food/Beverage Exper		Tip						
X Political									
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	oense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged \$81.19	(b) Date of Charge 10/23/2024	(c) Date(s) 11/15/20	Credit Card Issue 24	r Paid				
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
	Bludorn		807 Taft	St					
			Houston, TX 77019						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descrip Meeting	otion					
Non-Political	(-) 🗆 a				· · · · · · · · · · · · · · · · · · ·				
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,		pense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	Thathe Offic	e sougnt		Office field				
PAYMENT	(a) Amount Charged \$303.10	(b) Date of Charge 10/16/2024	(c) Date(s) 10/22/20	Credit Card Issue 24	r Paid				
PAYEE	(a) Payee name Brasserie 19		(b) Payee address; City, State, Zip 1962 W Gray St Houston, TX 77019				Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	•	(b) Descrip Meal - GA						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	e sought		Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	s Commiss	sion Filers)					
Sch: 9/68 Rpt: 34/96	Sandill, Ravi K. (Th	e Honorable)		00061997							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.46						
6 PAYMENT	(a) Amount Charged \$304.45	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issuer 11/15/2024	Paid							
7 PAYEE	(a) Payee name Brasserie 19		(b) Payee address; 1962 W Gray St	City,	State,	Zip Code					
	() 5 :		Houston, TX 77019								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Judges Meal								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$71.24	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Card Issuer 08/27/2024	Paid							
PAYEE	PAYEE (a) Payee name Caf Ruisseau		(b) Payee address; 345 N Maple Dr Beverly Hills, CA 90210	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description CLE Lunch								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$19.26	(b) Date of Charge 09/18/2024	(c) Date(s) Credit Card Issuer 10/04/2024	Paid							
PAYEE (a) Payee name Catalina Coffee		(b) Payee address; 2201 Washington Ave Houston, TX 77007	City,	State,	Zip Code						
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	*	(b) Description Meeting with GAL								
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethics Commission Filers)				
	Sch: 10/68 Rpt: 35/96	Sandill, Ravi K. (Th	e Honorable)				00061997				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDIT	UNITEMIZED TURES TO A CREDIT	\$ 339.46				
6	PAYMENT	(a) Amount Charged \$15.52	(b) Date of Charge 09/29/2024	(c) Date(s 10/04/20		redit Card Issuer	r Paid				
7	PAYEE	(a) Payee name Catalina Coffee		(b) Payee address; City, 2201 Washington Ave Houston, TX 77007			City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Coffee meeting							
L	Non-Political		of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expense				
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought			Office held				
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$91.14	(b) Date of Charge 10/12/2024	(c) Date(s 10/22/20		redit Card Issuer	Paid				
	PAYEE	Central Market		(b) Payee 3815 We Houston	esth	neimer Rd	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ptio						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•		Check if Austin, TX,	officeholder living expense				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held				
	PAYMENT	(a) Amount Charged \$525.00	(b) Date of Charge 08/01/2024	(c) Date(s 08/04/20		redit Card Issuer	Paid				
	PAYEE	(a) Payee name Chase		(b) Payee address; 383 Madison Avenue New York, NY 10017		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descri Annual n		n nbership fee					
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held				
ı											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	3 Filer ID (Ethics Commission Filers)						
Sch: 11/68 Rpt: 36/96	Sandill, Ravi K. (Th	e Honorable)		00061997							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	\$ 339.46						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid							
	\$388.51	10/23/2024	11/15/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	Chick-Fil-A 2222 Sh										
			Houston, TX 77007								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description								
X Political	Food/Beverage Exper										
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 name Office			e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid							
	\$331.25	10/23/2024	11/15/2024								
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code					
	Chick-Fil-A		2222 Shearn St								
			Houston, TX 77007								
PURPOSE OF	(a) Category	(4: 1.11)	(b) Description								
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Exper		Meal for election workers								
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		e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged \$382.78	(b) Date of Charge 10/23/2024	(c) Date(s) Credit Card Issue 11/15/2024	er Paid							
PAYEE	(a) Payee name	I	(b) Payee address;	City,							
			2222 Shearn St	- 9,	,						
	Chick-Fil-A										
			Houston, TX 77007								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Meal for election workers								
X Political	. Sourbeverage Exper										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 12/68 Rpt: 37/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$0.65	(b) Date of Charge 10/28/2024	(c) Date(s)) Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Chick-Fil-A		(b) Payee 2222 Sho		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Descrip				
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
	Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date			e sought		Office held		
	PAYMENT	(a) Amount Charged \$23.92	(b) Date of Charge 07/18/2024	(c) Date(s) 08/04/20) Credit Card Issue 24	er Paid		
	PAYEE	(a) Payee name City Market		(b) Payee 633 E Da Luling, T	avis St	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$1,147.19	(b) Date of Charge 07/18/2024	(c) Date(s) 08/04/20) Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Clementine Neighb	orhood		address; / Military Hwy onio, TX 78213	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	Food/Beverage Exper	a) Category See Categories listed at the top of this schedule) Good/Beverage Expense (b) Description Meal at CLE for presenters					
\vdash		Non-Political (c) ☐ Check if travel outside of Texas. Complete Schedule T Complete ONLY if direct			Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Office	e sought		Office field		
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 13/68 Rpt: 38/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$66.03	(b) Date of Charge 07/13/2024	(c) Date(s) 08/04/20	Credit Card Issuei 24	Paid		
7 PAYEE	(a) Payee name Coastline Pizza			uston Ave	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descrip	TX 77007			
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe		Staff Mea				
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	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$146.89	(b) Date of Charge 10/01/2024	(c) Date(s) 10/04/20	Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Coastline Pizza		1720 Ho	uston Ave			
			Houston,	TX 77007			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expel		(b) Descrip Staff Mea				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		
PAYMENT	(a) Amount Charged \$61.67	(b) Date of Charge 09/03/2024	(c) Date(s) 10/04/20	Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name Costco Wholesale			address; hmond Ave TX 77027	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Supplies	otion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

	Candidate/Officeriolder/Folitica	3		•	THEN (enter a category	Tiot listeu ai	oove)
1	Total pages Schedule F4:	tal pages Schedule F4: 2 FILER NAME					sion Filers)
	Sch: 14/68 Rpt: 39/96		Sandill, Ravi K. (The Honorable)				,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$50.88	(b) Date of Charge 09/19/2024	(c) Date(s) Credit Card Issue 10/04/2024	r Paid		
7	PAYEE	(a) Payee name Costco Wholesale		(b) Payee address; 3836 Richmond Ave Houston, TX 77027	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
е	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged \$54.10	(b) Date of Charge 09/20/2024	(c) Date(s) Credit Card Issue 10/04/2024	r Paid		
	PAYEE	(a) Payee name Costco Wholesale		(b) Payee address; 3836 Richmond Ave Houston, TX 77027	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Supplies			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$27.11	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issue 10/04/2024	r Paid		
	PAYEE	(a) Payee name Della Coffee		(b) Payee address; 1000 W Gray St #100 Houston, TX 77019	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Description Meeting			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense	
е	Complete ONLY if direct Candidate/Officeholder name Oxpenditure to benefit C/OH			e sought	Office held		
l							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 15/68 Rpt: 40/96	Sandill, Ravi K. (Th	Sandill, Ravi K. (The Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	46
6	PAYMENT	(a) Amount Charged \$319.80	(b) Date of Charge 10/08/2024	(c) Date(s) 10/22/20	Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Docusign			address; Street Suite 155 cisco, CA 94105		State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descrip				
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$101.93	(b) Date of Charge 09/26/2024	(c) Date(s)	Credit Card Issue 24	r Paid		
	PAYEE (a) Payee name Ducky McShweeny's				address; st Oak Blvd TX 77056	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip Meal with	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	oense	
<u>_</u>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$70.72	(b) Date of Charge 10/02/2024	(c) Date(s)	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Eloise Nichols Grill	1		address; I Ln #100 TX 77027	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political (a) Category (See Categories listed at the top of this schedule) Breakfast meeting			t meeting					
$ldsymbol{ldsymbol{ldsymbol{eta}}}$	Ш	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			Check if Austin, TX,	officeholder living exp	oense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 16/68 Rpt: 41/96	Sandill, Ravi K. (Th	andill, Ravi K. (The Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$23.11	(b) Date of Charge 07/24/2024	(c) Date(s) 08/04/20) Credit Card Issuei 124	Paid		
7	PAYEE	(a) Payee name Fifth Vessel		(b) Payee 104 N M	ain St	City,	State,	Zip Code
Ļ		(a) Oataman			TX 77002			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	9 Complete ONLY if direct candidate/Officeholder name Office sought expenditure to benefit C/OH				Office held			
Ľ	<u> </u>	(a) Amazumt Charried	(h) Data of Chause	(a) Data(a)	Cuadit Cand Issue	Doid		
	PAYMENT	(a) Amount Charged \$2,773.77	(b) Date of Charge 07/09/2024	08/04/20) Credit Card Issuei 124	Paid		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Four Seasons - Be	verly Hills	300 S Do	oheny Dr			
				Los Ange	eles, CA 99048			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	—	Office held		
	PAYMENT	(a) Amount Charged \$61.63	(b) Date of Charge 09/29/2024	(c) Date(s)) Credit Card Issuei 124	Paid		
	PAYEE	(a) Payee name Frank's Grill			address; /estheimer Rd , TX 77077	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri _l Meal with				
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 expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name				Office held		
Г		•						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	ion Filers)
	Sch: 17/68 Rpt: 42/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$788.02	(b) Date of Charge 08/02/2024	(c) Date(s) Credit Card Issue 08/04/2024	er Paid		
7	PAYEE	(a) Payee name Gucci		(b) Payee address; 204 S Galena St	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		Aspen, CO 81611 (b) Description Gifts for CLE Presenters			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense	
	expenditure to benefit C/OH			e sought	Office held		
	PAYMENT	(a) Amount Charged \$436.00	(b) Date of Charge 11/06/2024	(c) Date(s) Credit Card Issue 11/15/2024	er Paid		
	PAYEE	(a) Payee name Himalaya Restaura	nt	(b) Payee address; 6652 Southwest Fwy Houston, TX 77074	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meal with Court Staff			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$525.00	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issue 10/22/2024	er Paid		
PAYEE (a) Payee name Hudgins, Rachel		(b) Payee address; 136 Mercer Street Jersey City, NJ 07302	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense		of this schedule)	(b) Description Portrait photographer			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	omplete ONLY if direct Candidate/Officeholder name			Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 18/68 Rpt: 43/96	Sandill, Ravi K. (Th				00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$525.00	(b) Date of Charge 11/08/2024	(c) Date(s) 11/15/20	Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name Hudgins, Rachel			cer Street	City,	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Descrip	ity, NJ 07302 otion			
	EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Portrait p	hotographer			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Office held			
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	· Paid		
	FAIMENI	\$307.43	07/19/2024	08/04/20		Faiu		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Hyatt Regency Hill	Country	9800 Hya	att Resort Dr			
				San Anto	nio, TX 78251			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip Lodging	otion			
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
	PAYMENT	(a) Amount Charged \$159.00	(b) Date of Charge 11/09/2024	(c) Date(s) 11/15/20	Credit Card Issuer 24	Paid		
	PAYEE	(a) Payee name Isla Grand Beach R	Resort - South	(b) Payee 500 Padr South Pa		City, 3597	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip Lodging				
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
6	Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name C				Office held		
Г								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)					
	Sch: 19/68 Rpt: 44/96	Sandill, Ravi K. (Th	e Honorable)			00061997							
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	339.4	16					
6	PAYMENT	(a) Amount Charged \$431.72	(b) Date of Charge 08/06/2024	(c) Date(s) C 08/27/2024	Credit Card Issuer 4	Paid							
7	PAYEE	(a) Payee name Jon & Vinny's		(b) Payee ac	ford Dr	City,	State,	Zip Code					
Ļ		(a) Oatawari			ls, CA 90210								
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description	on								
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense						
9				e sought		Office held							
€	expenditure to benefit C/OH												
	PAYMENT	(a) Amount Charged \$114.35	(b) Date of Charge 08/26/2024	(c) Date(s) C 08/27/2024	Credit Card Issuer 4	[*] Paid							
	PAYEE	(a) Payee name	<u> </u>	(b) Payee ac	ldress;	City,	State,	Zip Code					
		Josephine's		318 Gray S	St								
L				Houston, T									
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	•	(b) Description Meal with I									
	Non-Political		of Towns Committee Calcadula T		7 Observation TV	-#							
H		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	 e sought	Check if Austin, TX,	officeholder living exp	ense						
٩	Complete ONLY if direct expenditure to benefit C/OH												
	PAYMENT	(a) Amount Charged \$1,971.07	(b) Date of Charge 09/05/2024	(c) Date(s) C 10/04/2024	Credit Card Issuer 4	Paid							
	PAYEE (a) Payee name JW Marriott Hill Resort & Spa		(b) Payee ac 23808 Res San Antoni		City,	State,	Zip Code						
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District			(b) Description	on								
L	Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule			Check if Austin, TX,	officeholder living exp	ense						
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name				Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)				
Sch: 20/68 Rpt: 45/96	Sandill, Ravi K. (Th	e Honorable)		00061997						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 10/04/2024	er Paid						
	\$16.96	09/05/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	JW Marriott Hill Res	sort & Spa	23808 Resort Pkwy							
			San Antonio, TX 78261							
8 PURPOSE OF	(a) Category	-f. doi: lo do d - \	(b) Description							
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	CLE Breakfast							
X Political	Travor out or Biodilot									
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	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$29.20	08/10/2024	08/27/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Kroger		1440 Studemont St							
			Houston, TX 77007							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		Supplies							
X Political	Office Overhead/Rent	tai Expense								
Non-Political	`	of Texas. Complete Schedule T.		K, officeholder living exp	ense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH		T	1							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 10/04/2024	er Paid						
	\$36.55	08/27/2024	10/04/2024							
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code				
			1440 Studemont St							
	Kroger									
			Houston, TX 77007							
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description							
EXPENDITURE	Office Overhead/Rent	•	Supplies							
X Political		· 								
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule			K, officeholder living exp	ense					
Complete ONLY if direct	Complete ONLY if direct Candidate/Officeholder name C			Office held						
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)					
Sch: 21/68 Rpt: 46/96	Sandill, Ravi K. (Th	e Honorable)		00061997							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16					
6 PAYMENT	(a) Amount Charged \$971.65	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer 10/22/2024	Paid							
7 PAYEE	(a) Payee name Kuhl Linscomb		(b) Payee address; 2418 W Alabama St	City,	State,	Zip Code					
	() -		Houston, TX 77098								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	*	(b) Description Holiday Gifts for Courthouse Staff								
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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$75.00	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer 10/22/2024	· Paid							
PAYEE	(a) Payee name Kuhl Linscomb		(b) Payee address; 2418 W Alabama St Houston, TX 77098	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Holiday Gifts for Staff								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$25.98	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Issuer 08/04/2024	· Paid							
PAYEE (a) Payee name Lanz & Swinney LLC			(b) Payee address; 4741 E Palm Canyon Dr, S Palm Springs, CA 92234	City, Suite D	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense										
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expe	nse						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 22/68 Rpt: 47/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16
	PAYMENT	(a) Amount Charged \$25.98	(b) Date of Charge 09/27/2024	(c) Date(s) 10/04/20	Credit Card Issuer 24	Paid		
7	PAYEE	(a) Payee name Lanz & Swinney LL	С		alm Canyon Dr,	City, Suite D	State,	Zip Code
Ļ		(-) O-t			rings, CA 92234			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip Campaig	n IT services			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
ı	Complete ONLY if direct spenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
	T ATMENT	\$25.98	09/29/2024	10/04/20		T Click		
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Lanz & Swinney LL	С		alm Canyon Dr,	Suite D		
					ings, CA 92234			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip	n IT services			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	ense	
	Complete ONLY if direct spenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought		Office held		
	PAYMENT	(a) Amount Charged \$32.37	(b) Date of Charge 10/31/2024	(c) Date(s) 11/15/20	Credit Card Issuer 24	Paid		
	PAYEE	(a) Payee name Lanz & Swinney LL	С		address; ralm Canyon Dr, s rings, CA 92234	City, Suite D	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Campaig	otion n IT services			
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 name Compenditure to benefit C/OH			e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

Candidate/Onicerolden/Folitica		ruction Guide explains how	to complete this form.	OTTIEN (enter a cate)	jory not noted di	50vc)
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)
Sch: 23/68 Rpt: 48/96	Sandill, Ravi K. (Th	Sandill, Ravi K. (The Honorable)				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$14.67	(b) Date of Charge 07/24/2024	(c) Date(s) Credit Card Issu 08/04/2024	uer Paid		
7 PAYEE	(a) Payee name Layne's Chicken Fil	ngers	(b) Payee address; 2359 S Shepherd Dr	City,	State,	Zip Code
0. PURPOSE OF	(a) Catagony		Houston, TX 77019 (b) Description			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	· · · · · · · · · · · · · · · · · · ·	Staff meal			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	X, officeholder living e	xpense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$90.58	(b) Date of Charge 07/25/2024	(c) Date(s) Credit Card Issu 08/04/2024	uer Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Layne's Chicken Fi	ngers	2359 S Shepherd Dr			
			Houston, TX 77019			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Staff meal			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin.	X, officeholder living e	xpense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	Office held	<u>. </u>	
PAYMENT	(a) Amount Charged \$42.58	(b) Date of Charge 07/22/2024	(c) Date(s) Credit Card Issu 08/04/2024	uer Paid		
PAYEE	(a) Payee name Lyft		(b) Payee address; 185 Berry St Suite 400 San Francisco, CA 9410	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from Happy			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin.	X, officeholder living e	xpense	
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct Candidate/Officeholder name C			Office held	,,,,,,	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 24/68 Rpt: 49/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$36.34	(b) Date of Charge 08/30/2024	(c) Date(s) Credit Card Issuer 10/04/2024	Paid		
7 PAYEE	(a) Payee name Lyft		(b) Payee address; 185 Berry St Suite 400	City,	State,	Zip Code
			San Francisco, CA 94107			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from airport in	Dallas		
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 expenditure to benefit C/OH Candidate/Officeholder name Office sought			e sought	Office held		
PAYMENT	(a) Amount Charged \$49.86	(b) Date of Charge 08/31/2024	(c) Date(s) Credit Card Issuer 10/04/2024	· Paid		
PAYEE	(a) Payee name Lyft			City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94107 (b) Description Car service to IAH			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$29.07	(b) Date of Charge 09/05/2024	(c) Date(s) Credit Card Issuer 10/04/2024	Paid		
PAYEE	(a) Payee name Lyft		(b) Payee address; 185 Berry St Suite 400 San Francisco, CA 94107	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from airport in	San Antonio		
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	The Insti	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 25/68 Rpt: 50/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$43.85	(b) Date of Charge 09/06/2024	(c) Date(s) 10/04/20) Credit Card Issuer 24	r Paid		
7 PAYEE	(a) Payee name Lyft			address; y St Suite 400 ncisco, CA 94107	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE X Political	(See Categories listed at the top Travel In District	of this schedule)	. ,	ce from IAH			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$26.00	(b) Date of Charge 11/10/2024	(c) Date(s) 11/15/20) Credit Card Issuer 24	Paid		
PAYEE	(a) Payee name			y St Suite 400	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	ncisco, CA 94107 otion ice from event			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
PAYMENT	(a) Amount Charged \$14.00	(b) Date of Charge 11/10/2024	(c) Date(s) 11/15/20) Credit Card Issuer 24	r Paid		
PAYEE	(a) Payee name Lyft			address; y St Suite 400 ncisco, CA 94107	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi	otion ce to event			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	v to c	omplete thi	s form.	(* ** ** ******************************	,	
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 26/68 Rpt: 51/96	Sandill, Ravi K. (Th	e Honorable)				00061997		
4	CREDIT CARD ISSUER		ncial institution revious	5	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$58.83	(b) Date of Charge 09/11/2024) Date(s) C 0/04/2024	redit Card Issue 1	r Paid		
7	PAYEE	(a) Payee name Mandola's Deli		42) Payee ad	nd St	City,	State,	Zip Code
Ļ	DUDDOCE OF	(a) Catagony		_	ouston, T) Description				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		1 ` ′	leal with J				
	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	name Offic	ce so	ught		Office held		
е	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$193.06	(b) Date of Charge 07/23/2024	1 ' ') Date(s) C 8/04/2024	redit Card Issue 1	r Paid		
	PAYEE	(a) Payee name	•	(b)) Payee ad	ldress;	City,	State,	Zip Code
		Margaritaville Beac	h Resort	32	10 Padre	Blvd			
L				S	outh Padr	e Island, TX 78	8597		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	1 ` ') Description Odging - D				
	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	· · · · · · · · · · · · · · · · · · ·	e so	ught	1	Office held		
e	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$193.06	(b) Date of Charge 10/11/2024) Date(s) C 0/22/2024	redit Card Issue 1	r Paid		
	PAYEE	(a) Payee name Margaritaville Beac	h Resort	32) Payee ad 10 Padre outh Padr		City, 8597	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Travel Out of District		(b)) Description				
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule					Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce so	ught		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics C	Commissi	ion Filers)
Sch: 27/68 Rpt: 52/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	6
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$25.56	11/08/2024	11/15/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Margaritaville Beac	h Resort	310 Padre Blvd			
			South Padre Island, TX 7	8597		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
X Political	Travel Out of District	,	Happy Hour at event			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	е	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 11/15/2024	er Paid		
	\$53.04	11/09/2024	11/15/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Margaritaville Beac	h Resort	310 Padre Blvd			
			South Padre Island, TX 7	8597		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description			
X Political	Travel Out of District	or triis scriedule)	Lodging			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense	e	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$2,119.92	08/05/2024	08/27/2024			
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City,	State,	Zip Code
			246 N Canon Dr Floor 3			
	Mastro's Beverly Hi	ills				
			Beverly Hills, CA 90210			
PURPOSE OF	(a) Category	(4)	(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Judges' CLE meal			
X Political						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense	е	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this form.			
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commiss	sion Filers)
	Sch: 28/68 Rpt: 53/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITION	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$129.89	(b) Date of Charge 08/08/2024	(c) Date(s) Credit Card Issue 08/27/2024	er Paid		
7	PAYEE	(a) Payee name McAfee		(b) Payee address; 6220 America Center Dri San Jose, CA 95002	City, ive	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description IT security			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		K, officeholder living exp	ense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held		
	PAYMENT	(a) Amount Charged \$13.54	(b) Date of Charge 07/07/2024	(c) Date(s) Credit Card Issue 08/04/2024	er Paid		
	PAYEE	(a) Payee name Microsoft		(b) Payee address; One Microsoft Way Redmond, WA 98052	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Software subscription			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	(, officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$13.54	(b) Date of Charge 08/07/2024	(c) Date(s) Credit Card Issue 08/27/2024	er Paid		
	PAYEE	(a) Payee name Microsoft		(b) Payee address; One Microsoft Way Redmond, WA 98052	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	•	(b) Description Software subscription			
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		(, officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 29/68 Rpt: 54/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	16
	PAYMENT	(a) Amount Charged \$13.54	(b) Date of Charge 09/07/2024	(c) Date(s 10/04/20) Credit Card Issuei)24	r Paid		
7	PAYEE	(a) Payee name Microsoft			address; rosoft Way d, WA 98052	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	ption			
	X Political	Office Overhead/Rent		Sollware	subscription			
	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	name Office	e sought		Office held		
e:	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$13.54	(b) Date of Charge 10/07/2024	(c) Date(s)) Credit Card Issuer 124	r Paid		
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Microsoft		One Mic	rosoft Way			
				Redmon	d, WA 98052			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	ption subscription			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	l .	Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
	PAYMENT	(a) Amount Charged \$13.54	(b) Date of Charge 11/07/2024	(c) Date(s 11/15/20) Credit Card Issuer)24	r Paid		
	PAYEE	(a) Payee name Microsoft			address; rosoft Way d, WA 98052	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
	Non-Political	1	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 30/68 Rpt: 55/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$39.70	(b) Date of Charge 08/19/2024	(c) Date(s) Credit Card Issuel 08/27/2024	r Paid		
7 PAYEE	(a) Payee name Minute Maid Park		(b) Payee address; 501 Crawford St	City,	State,	Zip Code
	() -		Houston, TX 77002			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Concessions at Astros ga	me with staff		
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 expenditure to benefit C/OH	expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged \$52.04	(b) Date of Charge 08/21/2024	(c) Date(s) Credit Card Issuer 08/27/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Minute Maid Park		501 Crawford St			
			Houston, TX 77002			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Concessions at Astros ga	me with staff		
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	·	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$42.27	(b) Date of Charge 08/21/2024	(c) Date(s) Credit Card Issuer 08/27/2024	r Paid		
PAYEE	(a) Payee name Minute Maid Park		(b) Payee address; 501 Crawford St Houston, TX 77002	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	•	(b) Description Concessions at Astros ga	me with staff		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 31/68 Rpt: 56/96	Sandill, Ravi K. (Th	e Honorable)		00061997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITORN	\$	339.4	16	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$44.58	10/02/2024	10/04/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Minute Maid Park		501 Crawford St				
			Houston, TX 77002				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Food/Beverage Exper		Concessions at Astros ga	ame with stair			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$143.59	08/24/2024	08/27/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Moo Print		25 Fairmount Ave				
			East Providence, RI 0293	14			
PURPOSE OF	(a) Category	(4)	(b) Description				
EXPENDITURE 	(See Categories listed at the top Printing Expense	of this schedule)	Printing				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 08/27/2024	er Paid			
	\$121.85	08/17/2024	00/2/12024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			2910 McKinney St Ste 50	00			
	Nickel City						
			Houston, TX 77003				
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description				
EXPENDITURE	Food/Beverage Exper	•	Happy Hour event				
X Political							
Non-Political	<u> </u>	K, officeholder living expe	ense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
	•						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 32/68 Rpt: 57/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$519.60	(b) Date of Charge 09/17/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Nickel City			address; Kinney St Ste 50 TX 77003	City, 0	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	•	(b) Descrip		vent		
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	expense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$89.42	(b) Date of Charge 10/09/2024	(c) Date(s) 10/22/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Nickel City			address; Kinney St Ste 50 TX 77003	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descrip Staff mea	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living e	expense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$50.32	(b) Date of Charge 08/14/2024	(c) Date(s) 08/27/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Pappas BBQ		(b) Payee 1217 Pie Houston,		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	nse	(b) Descrip Staff brea	akfast 			
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0.001:26+	Check if Austin, TX,		expense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 33/68 Rpt: 58/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$54.03	11/11/2024	11/15/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Proud Pie		1050 Yale Street #100			
			Houston, TX 77008			
8 PURPOSE OF	(a) Category	(4)	(b) Description			
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Exper		Staff Meal			
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	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$207.23	(b) Date of Charge 08/27/2024	(c) Date(s) Credit Card Issue 10/04/2024	r Paid		
	Ψ201.23	00/21/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			9 Market St Suite 900			
	QR Code Generato	or				
	(-) 0-4		San Francisco, CA 94103	3		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description QR software			
X Political	Office Overhead/Rent	tal Expense	QIX SOILWAIE			
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	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$300.00	07/23/2024	08/04/2024			
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code
	(4) 1 3, 22 1 1 1 1 1		16418 Cedar Sage St	2.3,		_p
	Rivas, Luis					
			Houston, TX 77095			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Driver for campaign even	ts		
X Political						
Non-Political	(C) Check if travel outside	Check if Austin, TX,	, officeholder living expe	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held	_	
, , , , , , , , , , , , , , , , , , , ,						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)	
Sch: 34/68 Rpt: 59/96	Sandill, Ravi K. (Th	e Honorable)		00061997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$200.00	08/11/2024	08/27/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Rivas, Luis		16418 Cedar Sage St				
			Houston, TX 77095				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Travel In District	of this schedule)	Driver for campaign even	ts			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living exper	ıse		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$100.00	11/11/2024	11/15/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Rivas, Luis		16418 Cedar Sage St				
			Houston, TX 77095				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Travel In District	of this schedule)	Driver for campaign even	ts			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	ıse		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$50.51	09/16/2024	10/04/2024				
PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code	
			3601 Westheimer Rd				
	River Oaks Donuts						
			Houston, TX 77027				
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description				
EXPENDITURE	Food/Beverage Exper	,	Breakfast				
X Political							
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		officeholder living exper	ıse		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)			
l	Sch: 35/68 Rpt: 60/96	Sandill, Ravi K. (Th	e Honorable)		00061997					
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16			
6	PAYMENT	(a) Amount Charged \$50.01	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issue 10/22/2024	r Paid					
7	PAYEE	(a) Payee name River Oaks Donuts		(b) Payee address; 3601 Westheimer Rd	City,	State,	Zip Code			
Ļ		() 0 :		Houston, TX 77027						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Breakfast						
	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 name Office sough			e sought	Office held					
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$224.20	(b) Date of Charge 10/30/2024	(c) Date(s) Credit Card Issue 11/15/2024	er Paid					
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
		River Oaks Donuts		3601 Westheimer Rd						
				Houston, TX 77027						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Breakfast						
	X Political			<u>_</u>						
L	Non-Political	(*) L	of Texas. Complete Schedule T.		, officeholder living exp	ense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held					
	PAYMENT	(a) Amount Charged \$126.65	(b) Date of Charge 08/13/2024	(c) Date(s) Credit Card Issue 08/27/2024	er Paid					
	PAYEE	(a) Payee name River Oaks Plant H	ouse	(b) Payee address; 6103 Kirby Dr Houston, TX 77005	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	,	(b) Description Staff birthday flowers						
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				, officeholder living exp	ense				
е	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)					
Sch: 36/68 Rpt: 61/96	Sandill, Ravi K. (Th	e Honorable)		00061997							
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16					
6 PAYMENT	(a) Amount Charged \$128.82	(b) Date of Charge 10/14/2024	(c) Date(s) Credit Card Issue 10/22/2024	r Paid							
7 PAYEE	(a) Payee name River Oaks Plant H	ouse	(b) Payee address; 6103 Kirby Dr	City,	State,	Zip Code					
	() -		Houston, TX 77005								
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial		(b) Description Flowers for funeral								
Non-Political	(c) distant and salada si islaat salada si islaat salada ii										
Complete ONLY if direct expenditure to benefit C/OH	expenditure to benefit C/OH										
PAYMENT	\$14.65 09/11/2024 10/04/2024										
PAYEE	(a) Payee name River Oaks Shoppir	ng Center	(b) Payee address; 1964 W Gray St Houston, TX 77019	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Parking Fee								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held							
PAYMENT	(a) Amount Charged \$16.80	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issue 10/22/2024	r Paid							
PAYEE	(a) Payee name River Oaks Shoppir	ng Center	(b) Payee address; 1964 W Gray St Houston, TX 77019	City,	State,	Zip Code					
PURPOSE OF EXPENDITURE X Political	(b) Description Parking Fee										
Non-Political	Check if Austin, TX,	, officeholder living exp	ense								
Complete ONLY if direct expenditure to benefit C/OH	e sought	Office held									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica			-	THER (enter a category	not listed ab	oove)
		ruction Guide explains how	to complete this form.	I		
1 Total pages Schedule F4:				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 37/68 Rpt: 62/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	6	339.4	ıc
ISSUER	see pi	revious	EXPENDITURES CHARGED TO A CREDIT	\$	339.4	Ю
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$26.23	09/14/2024	10/04/2024			
	¥=0.=0					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			718 W 18th St			
	Snooze - Heights					
			Houston, TX 77008			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Meal with JP			
X Political	Food/Beverage Expe	nse				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expe		
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held	.1130	
expenditure to benefit C/OH	Caralacto, Cinicoriolaci	That To Still of	o oodgin.	Omoo noid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
			11/15/2024	. r ala		
	\$5.60	11/08/2024				
PAYEE	(a) Davisa nama		(h) Dayaa adduaaa	City	Ctata	Zin Cada
PAILE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Southwest Airlines		2702 Love Field			
			Dollog TV 75225			
PURPOSE OF	(a) Category		Dallas, TX 75235 (b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel from Harlingen to F	Houston		
X Political	Travel Out of District		Traver nom riamingen to r	louston		
			<u> </u>			
Non-Political	1	of Texas. Complete Schedule T.		officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH			1			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 10/22/2024	r Paid		
	\$315.59	10/15/2024	10/22/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Cnoo		1900 S Shepherd Dr			
	Specs					
			Houston, TX 77019			
PURPOSE OF	(a) Category	of this sobodule)	(b) Description		_	
EXPENDITURE 	(See Categories listed at the top Gift/Awards/Memorial		Law Clerk Gift			
X Political	C. W. Waldon Wolfford	cpoco				
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						
expenditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete thi	s form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 38/68 Rpt: 63/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$50.11	10/30/2024	11/15/2024	+			
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code
	Stanton's City Bites	3	1420 Edwa				
			Houston, T				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	on			
X Political	Food/Beverage Exper		Staff meal				
Non-Political	(6) 61.000.11.00.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.000.11.0000.11.000.11.000.11.000.11.000.11.0000.11.000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0000.11.0					ense	
9 Complete ONLY if direct					Office held		
expenditure to benefit C/OH							
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Iss 10/22/2024					Paid		
	\$75.00	10/05/2024	10/22/2024	1			
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code
	State Bar of Texas		1414 Color	ado Street			
			Austin, TX	78701			
PURPOSE OF	(a) Category		(b) Description	on			
EXPENDITURE	(See Categories listed at the top Fees	of this schedule)	Fee				
X Political	<u> </u>		_	_			
Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	· Paid		
	\$2,025.71	10/07/2024	10/22/2024				
	Ψ2,023.71	10/01/2024					
PAYEE	(a) Payee name	l	(b) Payee ac	ldress;	City,	State,	Zip Code
			4444 West	heimer Rd			
	Steak 48						
			Houston, T	X 77027			
PURPOSE OF (a) Category (b) Description EXPENDITURE (See Categories listed at the top of this schedule) Thank you meal for just							
EXPENDITURE	Food/Beverage Expe		Thank you	meal for judges	s and CLE pres	enters	
X Political							
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	·				Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 39/68 Rpt: 64/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$100.30	10/10/2024	10/22/2024	4			
7 PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	Tavern by Hearsay		737 Presto	n St			
			Houston, T				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
X Political	Food/Beverage Exper	/Beverage Expense					
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	ceholder name Office sought			Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issue	r Paid		
	\$21.97	10/24/2024	11/15/2024	4			
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	Tenfold Coffee Con	mpany	101 Aurora	a St			
			Houston, T	X 77008			
PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	· ·	Breakfast ı	meeting			
X Political	production of the state of the						
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH		I					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 10/04/2024	Credit Card Issuer	r Paid		
	\$1,001.06	09/24/2024	10/04/2024	*			
PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code
	To a State Lab		P O Box 12	2066			
	Texas District Judg	es					
			Austin, TX				
EVENDITUEE (Con Cotogories listed at the top of this school up)			(b) Descripti	on			
l <u>—</u>	Fees	of this scriedule)	Fee				
X Political	<u> </u>						
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct					Office held		
expenditure to benefit C/OH	expenditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l		The Inst	ruction Guide explains how	to complete this	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 40/68 Rpt: 65/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI [*]	UNITEMIZED TURES TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$1,001.06	(b) Date of Charge 09/24/2024	(c) Date(s) C 10/04/2024	redit Card Issuer	Paid		
7	PAYEE	(a) Payee name Texas District Judg	es	(b) Payee ad P O Box 12	066	City,	State,	Zip Code
Ļ		() 0 :		Austin, TX				
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Description Fee	on			
l					officeholder living exp	ense		
9	Complete ONLY if direct Candidate/Officeholder name Office sought			e sought		Office held		
E	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 08/23/2024	(c) Date(s) C 08/27/2024	redit Card Issuer	· Paid		
	PAYEE	(a) Payee name (b) Payee address;			dress;	City,	State,	Zip Code
		Texas Lyceum Ass	ociation	1321 Antoir				
L				Houston, T				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Contributions/Donatio	ns Made By	(b) Description	n			
l		Candidate/Officeholde		<u> </u>				
L	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
€	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held		
	PAYMENT	(a) Amount Charged \$150.00	(b) Date of Charge 11/09/2024	(c) Date(s) C 11/15/2024	redit Card Issuer	Paid		
	PAYEE	(a) Payee name Texas Lyceum Ass	ociation	(b) Payee ad 1321 Antoir Houston, T	ne Drive	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee			on			
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense	
ε	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 41/68 Rpt: 66/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$127.08	(b) Date of Charge 10/24/2024	(c) Date(s) 11/15/20	Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name The '401 Table			address; ris St #150 TX 77401	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip	otion			
					officeholder living exp	ense		
	Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer			Office held				
	PAYMENT	(a) Amount Charged \$272.26	(b) Date of Charge 11/12/2024	(c) Date(s) 11/15/20		r Paid		
	PAYEE	(a) Payee name The Pit Room			address; hmond Ave TX 77006	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip Staff mea	otion			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$36.87	(b) Date of Charge 11/07/2024	(c) Date(s) 11/15/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Tio Trompo		(b) Payee 316 Shep Houston,		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descrip Meal with	court reporter			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.					Check if Austin, TX	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 42/68 Rpt: 67/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$113.22	(b) Date of Charge 07/31/2024	(c) Date(s) 08/04/20	Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name T-Mobile		(b) Payee PO Box 3		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descrip	otion			
L					officeholder living exp	ense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought				Office held			
	PAYMENT	(a) Amount Charged \$132.64	(b) Date of Charge 09/27/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name T-Mobile		(b) Payee PO Box 3		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	otion			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$784.49	(b) Date of Charge 09/26/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Toulouse Houston			address; stheimer Rd Ste TX 77027	City, E 100	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descrip Meeting v	with GALS			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				0.001:06*	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 43/68 Rpt: 68/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$101.39	(b) Date of Charge 10/07/2024	(c) Date(s) 10/22/20) Credit Card Issuei 124	r Paid		
7 PAYEE	(a) Payee name Toulouse Houston			estheimer Rd Ste	City, E 100	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe		Donor m	eeting			
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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuei	r Paid		
	\$11.75	07/07/2024	08/04/20				
PAYEE (a) Payee name (b) Payee address;				address;	City,	State,	Zip Code
	Uber		1725 3rd	Street			
			San Fran	ncisco, CA 94158			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi	otion ice to dinner ever	nt		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	·	e sought	ш	Office held		
PAYMENT	(a) Amount Charged \$12.24	(b) Date of Charge 07/07/2024	(c) Date(s) 08/04/20) Credit Card Issuer 124	r Paid		
PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd	•	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)			
	Sch: 44/68 Rpt: 69/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	339.4	16			
6	PAYMENT	(a) Amount Charged \$20.30	(b) Date of Charge 07/13/2024	(c) Date(s) 08/04/20	Credit Card Issue 24	er Paid					
7	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip							
					, officeholder living ex	pense					
	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought				Office held						
	PAYMENT	(a) Amount Charged \$12.91	(b) Date of Charge 07/18/2024	(c) Date(s) 08/04/20	Credit Card Issue 24	er Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd	Street	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	ncisco, CA 94158 otion ce to Happy Hou						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense				
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
	PAYMENT	(a) Amount Charged \$5.06	(b) Date of Charge 07/21/2024	(c) Date(s) 08/04/20) Credit Card Issue 24	er Paid					
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	•	(b) Descrip Cancella	tion fee						
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0.001:26+	Check if Austin, TX	, officeholder living ex	pense				
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
I											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete this	s form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)
	Sch: 45/68 Rpt: 70/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI [*]	UNITEMIZED TURES O TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$23.70	(b) Date of Charge 07/21/2024	(c) Date(s) Ci 08/04/2024	redit Card Issuer	Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee add	treet	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francis (b) Descriptio Car service				
				officeholder living exp	ense			
	9 Complete ONLY if direct candidate/Officeholder name Office sought expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (c) Date(s) Credit C				Office held			
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer \$12.66 07/24/2024 08/04/2024				Paid			
	PAYEE	(a) Payee name Uber		(b) Payee add 1725 3rd St San Francis		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service	n			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$12.51	(b) Date of Charge 07/24/2024	(c) Date(s) Ci 08/04/2024	redit Card Issuer	Paid		
PAYEE (a) Payee name (b) Payee address; 1725 3rd Street Uber San Francisco, CA		treet	City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description		dinner event			
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			chedule T. Check if Austin, TX, officeholder living expense				
е				e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

	Candidate/Officeriolder/Folitica	· ·	ruction Guide explains how	-	THEN (enter a category	Tiot listeu ai	oove)
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 46/68 Rpt: 71/96	Sandill, Ravi K. (Th	e Honorable)		00061997		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$17.90	(b) Date of Charge 07/25/2024	(c) Date(s) Credit Card Issue 08/04/2024	r Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from dinner	,		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
	· —	Candidate/Officeholder	name Office	e sought	Office held		
е	expenditure to benefit C/OH						
	PAYMENT	(a) Amount Charged \$23.66	(b) Date of Charge 08/06/2024	(c) Date(s) Credit Card Issue 08/27/2024	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94158 (b) Description Car service from CLE to c			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$159.02	(b) Date of Charge 08/07/2024	(c) Date(s) Credit Card Issue 08/27/2024	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from CLE to c	dinner		
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office					Office held		
l							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 47/68 Rpt: 72/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	1 6
6	PAYMENT	(a) Amount Charged \$20.42	(b) Date of Charge 08/07/2024	(c) Date(s) 08/27/20) Credit Card Issue 24	r Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	otion			
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$68.49	(b) Date of Charge 08/10/2024	(c) Date(s) 08/27/20) Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd		City,	State,	Zip Code
L					ncisco, CA 94158	l		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi				
	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 expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$20.36	(b) Date of Charge 08/10/2024	(c) Date(s) 08/27/20) Credit Card Issue 24	r Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Frar	•	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi	otion ce to hotel			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	is form.			
1 Total pages Schedule F4:	al pages Schedule F4: 2 FILER NAME				3 Filer ID (Ethio	cs Commiss	ion Filers)
Sch: 48/68 Rpt: 73/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$12.26	(b) Date of Charge 08/17/2024	(c) Date(s) C 08/27/2024	Credit Card Issuer 4	Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee at 1725 3rd S		City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descripti				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged \$20.78	(b) Date of Charge 08/24/2024	(c) Date(s) C 08/27/2024	Credit Card Issuer 4	Paid		
PAYEE	(a) Payee name Uber		(b) Payee at 1725 3rd S		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description	on			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	_	Office held		
PAYMENT	(a) Amount Charged \$18.88	(b) Date of Charge 08/30/2024	(c) Date(s) C 10/04/2024	Credit Card Issuer 4	Paid		
PAYEE	(a) Payee name Uber		(b) Payee ac 1725 3rd S San Franci		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description	on			
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH					Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)		
	Sch: 49/68 Rpt: 74/96	Sandill, Ravi K. (Th	e Honorable)			00061997				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$	339.4	16		
6	PAYMENT	(a) Amount Charged \$36.30	(b) Date of Charge 09/06/2024	(c) Date(s)	Credit Card Issue 24	er Paid				
7	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip						
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense			
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$69.86	(b) Date of Charge 09/20/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	er Paid				
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd	Street	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	icisco, CA 94158 otion ce to airport	3				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	, officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$29.21	(b) Date of Charge 09/21/2024	(c) Date(s) 10/04/20) Credit Card Issue 24	er Paid				
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	•	(b) Descri Car servi	ce to airport in A					
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0 001	Check if Austin, TX	, officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
I										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethio	cs Commiss	sion Filers)			
Sch: 50/68 Rpt: 75/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITU CHARGED T CARD	RES	\$	339.4	16			
6 PAYMENT	(a) Amount Charged \$34.51	(b) Date of Charge 09/21/2024	(c) Date(s) Cred 10/04/2024	lit Card Issuer	Paid					
7 PAYEE	(a) Payee name Uber		(b) Payee addre	et	City,	State,	Zip Code			
			San Francisco	o, CA 94158						
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from airport in CLE							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Cr	neck if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought					Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$18.04	(b) Date of Charge 09/21/2024	(c) Date(s) Cred 10/04/2024	lit Card Issuer	Paid					
PAYEE	(a) Payee name	(b) Payee address;			City,	State,	Zip Code			
	Uber		1725 3rd Stree	et						
			San Francisco, CA 94158							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service from	om CLE to lu	ınch					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		neck if Austin, TX.	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Took ii 7 taotii ii, 17t,	Office held					
expenditure to benefit C/OH			· ·							
PAYMENT	(a) Amount Charged \$56.53	(b) Date of Charge 09/21/2024	(c) Date(s) Cred 10/04/2024	lit Card Issuer	Paid					
PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158		City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political				(b) Description Car service from airport to home						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH Complete ONLY if direct expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 51/68 Rpt: 76/96	Sandill, Ravi K. (Th	e Honorable)		00061997		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$15.16	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issue 10/04/2024	er Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94158 (b) Description Car service to home	3		
Non-Political	(c) Great a tatal salata si i			, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	expenditure to benefit C/OH			Office held		
PAYMENT	(a) Amount Charged \$23.07	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issue 10/04/2024	er Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service to CLE			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$16.57	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issue 10/04/2024	er Paid		
PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service to CLE recep	tion		
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Complete ONLY if direct					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)			
	Sch: 52/68 Rpt: 77/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4	CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	339.4	16			
6	PAYMENT	(a) Amount Charged \$13.41	(b) Date of Charge 09/27/2024	(c) Date(s) C 10/04/2024	redit Card Issuer 1	Paid					
7	PAYEE	(a) Payee name Uber		(b) Payee ad 1725 3rd S	treet	City,	State,	Zip Code			
Ļ	DUDDOOF OF	(a) Catagony			sco, CA 94158						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense				
9				e sought		Office held					
е	expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$18.50	(b) Date of Charge 09/28/2024	(c) Date(s) C 10/04/2024	redit Card Issuer 1	Paid					
	PAYEE	(a) Payee name	•	(b) Payee ad	ldress;	City,	State,	Zip Code			
		Uber		1725 3rd S	treet						
				San Franci	sco, CA 94158						
	PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chock if Austin TV	officeholder living expe	oneo				
┝	Complete ONLY if direct	Candidate/Officeholder	·	e sought	Check ii Austini, 1X,	Office held					
l e	expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged \$18.43	(b) Date of Charge 09/28/2024	(c) Date(s) C 10/04/2024	redit Card Issuer 1	Paid					
	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158		City,	State,	Zip Code			
	PURPOSE OF EXPENDITURE X Political	PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Car si Travel In District		(b) Description Car service							
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin,				Check if Austin, TX,	officeholder living expe	ense				
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought						Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
Sch: 53/68 Rpt: 78/96	Sandill, Ravi K. (Th	ie Honorable)			00061997		
4 CREDIT CARD ISSUER	Name of fina	ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged \$22.69	(b) Date of Charge 10/03/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	er Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee a 1725 3rd San Fran	•	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi	tion ce to dinner			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living e	expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held		
PAYMENT	(a) Amount Charged \$30.48	(b) Date of Charge 10/03/2024	(c) Date(s) 10/04/20	Credit Card Issue 24	er Paid		
PAYEE	(a) Payee name Uber		(b) Payee a 1725 3rd	Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94158 (b) Description Car service from event				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living e	expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held		
PAYMENT	(a) Amount Charged \$13.46	(b) Date of Charge 10/08/2024	(c) Date(s) 10/22/202	Credit Card Issue 24	er Paid		
PAYEE	(a) Payee name Uber	1	(b) Payee a 1725 3rd San Fran		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip			event	
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living e	expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	ce sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 54/68 Rpt: 79/96	Sandill, Ravi K. (Th	e Honorable)			00061997					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$	339.4	16			
6 PAYMENT	(a) Amount Charged \$14.51	(b) Date of Charge 10/08/2024	(c) Date(s) 10/22/20	Credit Card Issuel 24	r Paid					
7 PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	penditure to benefit C/OH				Office held					
PAYMENT	(a) Amount Charged \$27.93	(b) Date of Charge 10/10/2024	(c) Date(s) 10/22/20	Credit Card Issuel 24	r Paid					
PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd	Street	City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip	cisco, CA 94158 otion ce to event						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	I	Check if Austin, TX,	officeholder living exp	pense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
PAYMENT	(a) Amount Charged \$17.01	(b) Date of Charge 10/10/2024	(c) Date(s) 10/22/20	Credit Card Issuel 24	r Paid					
PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip Car servi	otion ce to fundraising	event					
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense				
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	cs Commis	sion Filers)				
Sch: 55/68 Rpt: 80/96	Sandill, Ravi K. (Th	ie Honorable)		00061997						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CRED CARD	\$	339.4	16				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issi	uer Paid						
	\$18.42	10/12/2024	10/22/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Uber		1725 3rd Street							
			San Francisco, CA 941	58						
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE X Political	(See Categories listed at the top Travel In District	or this schedule)	Car service from event to home							
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	name Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid						
	\$12.05	10/18/2024	10/22/2024							
PAYEE	(a) Payee name (b) Payee address;			City,	State,	Zip Code				
	Uber		1725 3rd Street							
			San Francisco, CA 941	58						
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description							
EXPENDITURE X Political	Travel In District	of this scriedule)	Car service to meeting	with Law School						
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 Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issi	uer Paid						
	\$18.98	10/18/2024	10/22/2024							
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code				
			1725 3rd Street							
	Uber									
			San Francisco, CA 941	58						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Travel In District	of this schedule)	Car service from meeting	ng						
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this	s form.			
1 Total pages Schedule F4:	Total pages Schedule F4: 2 FILER NAME					s Commiss	sion Filers)
Sch: 56/68 Rpt: 81/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$	339.4	16
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		redit Card Issuer	Paid		
	\$28.49	10/23/2024	11/15/2024				
7 PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
	Uber		1725 3rd S	treet			
				sco, CA 94158			
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Description				
EXPENDITURE X Political	Travel In District	or tris scriedule)	Car service to fundraising event				
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	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$24.52	(b) Date of Charge 10/23/2024	(c) Date(s) C 11/15/2024	redit Card Issuer I	· Paid		
PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
	Uber		1725 3rd S	treet			
			San Francis	sco, CA 94158			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service to event for Business Courts				
X Political	Traver in Bistrict						
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	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$28.78	(b) Date of Charge 10/23/2024	(c) Date(s) C 11/15/2024	redit Card Issuer I	· Paid		
PAYEE	(a) Payee name	L	(b) Payee ad	dress;	City,	State,	Zip Code
	Liber		1725 3rd S	treet			
	Uber						
				sco, CA 94158			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Travel In District	or this scriedule)	Car service	to home			
X Political							
Non-Political	· · · · —	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	nics Commiss	sion Filers)
	Sch: 57/68 Rpt: 82/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$6.42	(b) Date of Charge 11/09/2024	(c) Date(s) 11/15/20) Credit Card Issue 024	er Paid		
7	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service at Lyceum conference				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	K, officeholder living ex	rpense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$40.52	(b) Date of Charge 11/10/2024	(c) Date(s)) Credit Card Issue 124	er Paid		
	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd	Street	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	ncisco, CA 9415 ption ice from airport t			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	K, officeholder living ex	pense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 10/17/2024	(c) Date(s) 10/22/20) Credit Card Issue 024	er Paid		
	PAYEE	(a) Payee name UH Law			address; rtin Luther King , TX 77204	City, Blvd	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political Non-Political	(a) Category (See Categories listed at the top Contributions/Donatio Candidate/Officeholde (c) Check if travel outside	ns Made By	(b) Descrip Donation		 officeholder living ex 	(nense	
\vdash	Complete ONLY if direct	Candidate/Officeholder	·	e sought		Office held		
е	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)						
Sch: 58/68 Rpt: 83/96	Sandill, Ravi K. (Th	e Honorable)		00061997						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 339.46						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$100.00	10/18/2024	10/22/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code						
	UH Law		4170 Martin Luther King I	Blvd						
			Houston, TX 77204							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this cohodula)	(b) Description							
EXPENDITURE	Contributions/Donation		Donation							
X Political		er/Political Committee								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense						
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 08/04/2024	er Paid						
	\$17.20	07/18/2024								
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code						
	Linite of Airlines		233 S. Wacker Drive							
	United Airlines									
			Chicago, IL 60606							
PURPOSE OF	(a) Category	of this cohodule)	(b) Description							
EXPENDITURE 	(See Categories listed at the top Travel Out of District	of this schedule)	Travel fee							
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 Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid						
	\$249.00	07/31/2024	08/04/2024							
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code						
I TAILL	(a) Payee name		233 S. Wacker Drive	City, State, Zip Code						
	United Airlines		255 5. Wacker Drive							
			Chicago, IL 60606							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top	of this schedule)	Travel							
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						
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held						
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	thi	s form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 59/68 Rpt: 84/96	Sandill, Ravi K. (Th	e Honorable)				00061997		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	NDI	F UNITEMIZED TURES D TO A CREDIT	\$	339.4	16
6	PAYMENT	(a) Amount Charged \$190.47	(b) Date of Charge 08/14/2024	(c) Date(s 08/27/20		redit Card Issuer 1	Paid		
7	PAYEE	(a) Payee name United Airlines		(b) Payee 233 S. W Chicago	Vad	cker Drive	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Round trip to and from San Antonio					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$228.48	(b) Date of Charge 08/23/2024	(c) Date(s) 08/27/20		redit Card Issuer 1	Paid		
	PAYEE	(a) Payee name United Airlines		(b) Payee 233 S. W Chicago	Vad	cker Drive	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri	ptio		ıllas		
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
	PAYMENT	(a) Amount Charged \$49.00	(b) Date of Charge 08/24/2024	(c) Date(s 08/27/20		redit Card Issuer I	Paid		
	PAYEE	(a) Payee name United Airlines		(b) Payee 233 S. W Chicago,	Vad	cker Drive	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	,	(b) Descri Round tr	•	to and from Sa			
$ldsymbol{ldsymbol{ldsymbol{eta}}}$	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	0 001.55	L	Check if Austin, TX,	Office hold	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought			Office held		
ı									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Co	mmission Filers)							
Sch: 60/68 Rpt: 85/96	Sandill, Ravi K. (Th	e Honorable)		00061997								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	T	339.46							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid								
	\$15.63	08/24/2024	08/27/2024									
7 PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code							
	United Airlines		233 S. Wacker Drive									
			Chicago, IL 60606									
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description									
X Political	Travel Out of District	or this scriedule)	Travel from Dallas to Houston									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense								
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 Issue	r Paid								
	\$252.13	08/26/2024	08/27/2024									
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code							
	United Airlines		233 S. Wacker Drive									
			Chicago, IL 60606									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description									
X Political	Travel Out of District	or triis scriedule)	Travel from Austin to Hou	iston								
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 Offic	e sought	Office held								
expenditure to benefit C/OH												
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid								
	\$234.48	09/03/2024	10/04/2024									
PAYEE	(a) Payee name	l	(b) Payee address;	City, St	ate, Zip Code							
			233 S. Wacker Drive									
	United Airlines											
			Chicago, IL 60606									
PURPOSE OF	(a) Category		(b) Description									
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Travel from Austin to Hou	ıston								
X Political	Traver out or District											
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 Offic	e sought	Office held								
expenditure to benefit C/OH												

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)				
Sch: 61/68 Rpt: 86/96	Sandill, Ravi K. (Th	e Honorable)		00061997						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16				
6 PAYMENT	(a) Amount Charged \$67.99	(b) Date of Charge 09/03/2024	(c) Date(s) Credit Card Issuer 10/04/2024	Paid						
7 PAYEE	(a) Payee name United Airlines		(b) Payee address; 233 S. Wacker Drive	City,	State,	Zip Code				
0. DUDDOOF OF	(a) Catagony		Chicago, IL 60606							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Round trip to and from Sa	n Antonio						
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	e sought	Office held								
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$4.99	(b) Date of Charge 09/04/2024	(c) Date(s) Credit Card Issuer 10/04/2024	[•] Paid						
PAYEE	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code				
	United Airlines		233 S. Wacker Drive							
			Chicago, IL 60606							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Travel fee							
Non-Political	(a) Charleithean all autaids	of Towns Organizate Coloradado T	Charlett Avetin TV	-#C						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Carididate/Officeriolder	maric Office	c sought	Office field						
PAYMENT	(a) Amount Charged \$194.47	(b) Date of Charge 09/09/2024	(c) Date(s) Credit Card Issuer 10/04/2024	Paid						
PAYEE	(a) Payee name United Airlines		(b) Payee address; 233 S. Wacker Drive Chicago, IL 60606	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Travel							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 62/68 Rpt: 87/96	Sandill, Ravi K. (Th	e Honorable)			00061997				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$	339.4	16		
6	PAYMENT	(a) Amount Charged \$156.86	(b) Date of Charge 08/10/2024	(c) Date(s) 08/27/20	Credit Card Issue 24	er Paid				
7	PAYEE	(a) Payee name Vic & Anthony's		(b) Payee 1510 Tex		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip Meal with	otion					
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$91.45	(b) Date of Charge 09/14/2024	(c) Date(s)	Credit Card Issue 24	r Paid				
	PAYEE	(a) Payee name Vic & Anthony's		(b) Payee 1510 Tex		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descrip Meal with	otion					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	, officeholder living exp	ense			
<u>_</u>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$309.00	(b) Date of Charge 11/11/2024	(c) Date(s)	Credit Card Issue 24	er Paid				
	PAYEE	(a) Payee name Viva	<u> </u>	(b) Payee 202 W W South Pa		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descrip	Meal —					
lacksquare	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	o cought	Check if Austin, TX	, officeholder living exp	ense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
l										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)	
Sch: 63/68 Rpt: 88/96	Sandill, Ravi K. (Th	e Honorable)		00061997			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$70.35	07/20/2024	08/04/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Wall Street Journal		1211 Avenue of the Amer	ricas			
			New York, NY 10036				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Office Overhead/Rent		Newspaper subscription				
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 Office sought				Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$70.35	08/25/2024	08/27/2024				
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code	
	Wall Street Journal		1211 Avenue of the Amer	ricas			
			New York, NY 10036				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
X Political	Office Overhead/Rent		Newspaper subscription				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse		
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$70.35	09/22/2024	10/04/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			1211 Avenue of the Amer	ricas			
	Wall Street Journal						
			New York, NY 10036				
PURPOSE OF	(a) Category	of this schodule)	(b) Description Newspaper subscription				
	XPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense						
X Political		1					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	officeholder living expe	nse		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commiss	ion Filers)				
Sch: 64/68 Rpt: 89/96	Sandill, Ravi K. (Th	e Honorable)		00061997						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	339.4	16				
6 PAYMENT	(a) Amount Charged \$70.35	(b) Date of Charge 10/20/2024	(c) Date(s) Credit Card Issuer 11/15/2024	r Paid						
7 PAYEE	(a) Payee name Wall Street Journal		(b) Payee address; 1211 Avenue of the Ameri	City, icas	State,	Zip Code				
a purpose of	(a) Category		New York, NY 10036 (b) Description							
8 PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Newspaper subscription							
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	e sought	Office held							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$233.96	(b) Date of Charge 08/30/2024	(c) Date(s) Credit Card Issuer 10/04/2024	r Paid						
PAYEE	PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code				
	Westin Galleria Dal	las	13340 Dallas Pkwy							
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	Dallas, TX 75240 (b) Description Lodging							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						
PAYMENT	(a) Amount Charged \$621.60	(b) Date of Charge 11/10/2024	(c) Date(s) Credit Card Issuer 11/15/2024	r Paid						
PAYEE	(a) Payee name Whole Foods		(b) Payee address; 2955 Kirby Dr Houston, TX 77098	City,	State,	Zip Code				
PURPOSE OF EXPENDITURE X Political	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) I Sta		(b) Description Staff Meal							
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	nse					
Complete ONLY if direct expenditure to benefit C/OH	·									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(*	,	,
1 T	otal pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
s	ch: 65/68 Rpt: 90/96	Sandill, Ravi K. (Th	e Honorable)			00061997		
	REDIT CARD SSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	16
	AYMENT	(a) Amount Charged \$29.11	(b) Date of Charge 07/18/2024	(c) Date(s 08/04/20) Credit Card Issue 124	r Paid		
7 P	AYEE	(a) Payee name Tres Market Foods	LLC	(b) Payee 2620 Joa	anel St.	City,	State,	Zip Code
	UDDOOF OF	(a) Catagony			, TX 77019			
E	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri				
[Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 C	·					Office held		
exp	enditure to benefit C/OH							
P	AYMENT	(a) Amount Charged \$14.06	(b) Date of Charge 08/24/2024	(c) Date(s 08/27/20) Credit Card Issue 124	r Paid		
Р	AYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Uber		1725 3rd	Street			
				San Fran	ncisco, CA 94158	1		
	URPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	otion ice from event to	home		
li	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
	complete ONLY if direct enditure to benefit C/OH	Candidate/Officeholder	·	e sought		Office held		
P	AYMENT	(a) Amount Charged \$20.23	(b) Date of Charge 09/26/2024	(c) Date(s 10/04/20) Credit Card Issue 124	r Paid		
P	AYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran	•	City,	State,	Zip Code
E	URPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri				
[Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	omplete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	Candidate/Officerolder/Folitica	· ·	ruction Guide explains how	-	THEN (effer a category not lister	above)		
1	Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Comm	nission Filers)		
	Sch: 66/68 Rpt: 91/96	Sandill, Ravi K. (Th	e Honorable)		00061997	•		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 339	9.46		
6	PAYMENT	(a) Amount Charged \$18.55	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issue 10/22/2024	r Paid			
7	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street San Francisco, CA 94158	City, State	e, Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Description Car service to dinner from				
	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	e sought	Office held			
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$40.33	(b) Date of Charge 10/31/2024	(c) Date(s) Credit Card Issue 11/15/2024	r Paid			
	PAYEE	(a) Payee name Uber		(b) Payee address; 1725 3rd Street	City, State	e, Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	San Francisco, CA 94158 (b) Description Car service to Party office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged \$97.18	(b) Date of Charge 11/09/2024	(c) Date(s) Credit Card Issue 11/15/2024	r Paid			
	PAYEE	(a) Payee name Avis Rent-A-Car		(b) Payee address; 379 Interpace Parkway Parsippany, NJ 07054	City, State	e, Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Car rental for Lyceum cor	nference			
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)		
	Sch: 67/68 Rpt: 92/96	Sandill, Ravi K. (Th	e Honorable)			00061997				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$	339.4	46		
6	PAYMENT	(a) Amount Charged \$29.65	(b) Date of Charge 09/24/2024	(c) Date(s)) Credit Card Issue 24	r Paid				
7	PAYEE	(a) Payee name Uber		(b) Payee 1725 3rd San Fran		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip			vent			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$110.00	(b) Date of Charge 10/12/2024	(c) Date(s)) Credit Card Issue 24	r Paid				
	PAYEE	(a) Payee name Rivas, Luis			address; edar Sage St TX 77095	City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descrip						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$89.03	(b) Date of Charge 07/23/2024	(c) Date(s) 08/04/20) Credit Card Issue 24	r Paid				
	PAYEE	(a) Payee name Roma's Pizza		(b) Payee 233 Mair Houston		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	nse	(b) Descrip Jury mea	ıl 					
lacksquare	Non-Political	` 1	of Texas. Complete Schedule T.	0 001:24+	Check if Austin, TX,	Office hold	pense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
ı										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/A	Beverage Expense wards/Memorials Expense Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tra	vel in District vel Out of District HER (enter a categor		
		The	Instruction Guide explains	how to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	ion Filers)
	Sch: 68/68 Rpt: 93/96	Sandill, Ravi K.	(The Honorable)			00061997		
4	CREDIT CARD	Name of t	financial institution	5 TOTAL OF UNIT				
	ISSUER	se	e previous	EXPENDITURES		\$	339.4	6
			-	CHARGED TO A	A CREDIT			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer	Paid		
			1	10/04/2024				
		\$14.49	09/25/2024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
-		(a) i ayee name		185 Berry St Suit		City,	State,	Zip Codc
		Lyft		100 Berry St Suit	16 400			
				San Francisco C	CA 04107			
8	PURPOSE OF	(a) Category		San Francisco, C (b) Description	>₩ 94101			
O	EXPENDITURE	(See Categories listed at the	e top of this schedule)	Car service to bro	eakfast m	eeting		
	X Political	Travel In District		Cai scivice to bit	Januar III	oomig		
	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	side of Texas. Complete Schedul		if Austin, TX, o	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeho	ider name	Office sought		Office held		
	xpenditure to benefit C/OH							

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 1/3 Rpt: 94/96	
2	FILER NAME		3	Filer I	D (Ethics Commission	n Filers)
	Sandill, Ravi	K. (The Honorable)		0006	1997	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	11/04/2024	Eleventh Administration Judicial Region			σ / unount (φ)	\$922.00
	11/04/2024					Ψ322.00
		6 Address of person from whom amount is received; City; State; Zip Code				
		Houston, TX 77002				
		<u> </u>	politi	cal con	tribution returned to file	r
		Reimbursement of travel expenses				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/09/2024	Four Seasons Beverly Hills				\$390.99
		Address of person from whom amount is received; City; State; Zip Code				
		Los Angeles, CA 90048				
		Purpose for which amount is received Check if	politi	cal con	tribution returned to file	r
		Refund				
	Date	Name of person from whom amount is received			Amount (\$)	
	11/07/2024	Nickel City			Amount (\$)	\$519.60
	11/01/2024					Ψ313.00
		Address of person from whom amount is received; City; State; Zip Code				
		Houston, TX 77003				
			noliti	cal con		r
		Refund of deposit	ponti	cai coi	unbullon returned to lile	•
					T	
	Date	Name of person from whom amount is received			Amount (\$)	
	07/01/2024	Sandill, R.K.]	\$146.86
		Address of person from whom amount is received; City; State; Zip Code				
		Houston, TX 77256				
		Purpose for which amount is received Check if	politi	cal con	tribution returned to file	r
		Reimbursement				
	Date	Name of person from whom amount is received			Amount (\$)	
	08/01/2024	Sandill, R.K.				\$433.00
		Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is reserved, Grey, Glade, Elp Gode				
		Houston, TX 77256				
			politi	cal con	I tribution returned to file	r
		Reimbursement	P 21111	Jul 001		•

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	I		ages Schedule K: /3 Rpt: 95/96	
2	FILER NAME		3	Filer ID	(Ethics Commission Filer	´S)
	Sandill, Ravi	K. (The Honorable)		00061	997	
4	Date	5 Name of person from whom amount is received	I		8 Amount (\$)	
•	10/12/2024	Sandill, R.K.				1.14
	10/12/2024				Ψ3.	1.17
		6 Address of person from whom amount is received; City; State; Zip Code				
		Houston, TX 77256				
		7 Purpose for which amount is received	heck if politic	al contr	ibution returned to filer	
		Reimbursement				
	Date	Name of person from whom amount is received			Amount (\$)	
	10/27/2024	Sandill, R.K.				2.60
	10/2//2024				ΦΙΟ	2.00
		Address of person from whom amount is received; City; State; Zip Code				
		Houston, TX 77256				
		Purpose for which amount is received	heck if politic	al contr	ibution returned to filer	
		Reimbursement				
	Date	Name of person from whom amount is received			Amount (\$)	
	07/24/2024	Southwest Airlines				2.98
	0112412024				Ψ10	2.90
		Address of person from whom amount is received; City; State; Zip Code				
		D-II TV 75050				
		Dallas, TX 75253				
		-	heck if politic	al contr	ibution returned to filer	
		Refund				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/11/2024	Southwest Airlines			\$12	4.98
					,	
		Address of person from whom amount is received; City; State; Zip Code				
		Dallas, TX 75253				
			heck if politic	al contr	ibution returned to filer	
		Refund				
	Date	Name of person from whom amount is received			Amount (\$)	
	09/11/2024	Southwest Airlines			\$	5.01
		Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, City, State, 21p code				
		Dallas, TX 75253				
			neck if politic	al contr	ibution returned to filer	
		Refund				

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

SCHEDULE K

╙						
	The Instru	ction Guide explains how to complete this form.			ages Schedule K: /3 Rpt: 96/96	
2	FILER NAME		3	iler ID	(Ethics Commission	on Filers)
	Sandill, Ravi	K. (The Honorable)	(00061	997	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	11/05/2024	State Bar of Texas			()	\$249.84
		6 Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, Sity, State, 2ip Sode				
		Austin, TX 78701				
			litica	al contr	I ibution returned to fil	er
		Reimbursement of CLE travel expenses	muoc	ai conti	ibation retained to in	Ci
⊨						
	Date	Name of person from whom amount is received			Amount (\$)	# 500.45
	11/04/2024	State Bar of Texas				\$586.15
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78701				
			olitica	al contr	ibution returned to fil	er
		Reimbursement of CLE travel expenses				
	Date	Name of person from whom amount is received			Amount (\$)	
	11/04/2024	State Bar of Texas				\$514.65
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78701				
		Purpose for which amount is received	olitica	al contr	ibution returned to fil	er
		Reimbursement of CLE travel expenses				
F	Date	Name of person from whom amount is received			Amount (\$)	
	07/16/2024	United Airlines				\$375.23
		Address of person from whom amount is received; City; State; Zip Code				
		Chicago, IL 60606				
		Purpose for which amount is received Check if po	olitica	al contr	ibution returned to fil	er
		Refund				
Г						