

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00085598	2 Total pages filed: 84		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST The Honorable Salman	MI	OFFICE USE ONLY		
	NICKNAME	LAST Bhojani	SUFFIX	Date Received ELECTRONICALLY FILED 01/14/2026		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 392			Date Hand-delivered or Date Postmarked		
	Euless, TX 76039			Receipt #	Amount	
				Date Processed		
				Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Mr.	MI			
	NICKNAME	LAST Brian D.	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 3004 Starlight Ct		APT / SUITE #;	CITY;	STATE;	ZIP CODE
	Euless, TX 76039					
7 CAMPAIGN TREASURER PHONE	AREA CODE (203)	PHONE NUMBER 675-8821	EXTENSION			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)					
9 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
10 ELECTION	ELECTION DATE Month 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any) State Representative District 92			12 OFFICE SOUGHT (if known) State Representative District 92		

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

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13 C / OH NAME	Bhojani, Salman (The Honorable)		14 Filer ID (Ethics Commission Filers) 00085598
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input checked="" type="checkbox"/> Additional Pages	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME TREPAC	
		COMMITTEE ADDRESS PO Box 2246	
		Austin, TX 78768	
		COMMITTEE CAMPAIGN TREASURER NAME Cantu, Leslie	
		COMMITTEE CAMPAIGN TREASURER ADDRESS PO Box 2246	
		Austin, TX 78768	
16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)		\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 63,816.95
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES		\$ 31,850.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 34,525.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00

17 AFFIDAVIT

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

The Honorable Salman Bhojani

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT
SUPPORT & TOTALS****FORM C/OH
ADDENDUM**

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C / OH NAME	Bhojani, Salman (The Honorable)		Filer ID (Ethics Commission Filers) 00085598
17 NOTICE FROM POLITICAL COMMITTEE(S)	.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures ..		
	COMMITTEE TYPE <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME Moak Casey PAC	
		COMMITTEE ADDRESS 1001 Congress Ave Ste 250 Austin, TX 78701	
		COMMITTEE CAMPAIGN TREASURER NAME Murray, Ginger	
		COMMITTEE CAMPAIGN TREASURER ADDRESS 1001 Congress Ave Ste 250 Austin, TX	

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

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18 FILER NAME	19 Filer ID	(Ethics Commission Filers)
Bhujani, Salman (The Honorable)	00085598	
20 SCHEDULE SUBTOTALS	NAME OF SCHEDULE	
	SUBTOTAL AMOUNT	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	55,550.45
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	8,266.50
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	2,500.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	18,852.41
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	175,000.00
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	13,214.12
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	423.57
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	1,805.70

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/20 Rpt: 5/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aceti, Janet	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Brookline, MA 02445	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Debbie	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Taos, NM 87471	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aarfsten, Patricia	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Costa Mesa, CA 92626	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arlington Firefighters PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Keller, TX 76248	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azadpour, Aram	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Grapevine, TX 76099	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) SMS Infocomm Corp.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/20 Rpt: 6/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azadpour, Aram	7 Amount of Contribution (\$) \$26.41
	6 Contributor address; City; State; Zip Code Grapevine, TX 76099	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) SMS Infocomm Corp.
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BNSF RAILPAC	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76161	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bach, Gabriel	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Euless, TX 76039	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sunnyvale, CA 94087	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/20 Rpt: 7/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barndt, Patricia	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Harleysville, PA 19438	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ben E. Keith Company Texas PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhojani, Salman	Amount of Contribution (\$) \$639.58
	Contributor address; City; State; Zip Code Arlington, TX 76005	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bhojani Law PLLC
Date 07/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Eric	Amount of Contribution (\$) \$104.70
	Contributor address; City; State; Zip Code Arlington, TX 76010	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brotherhood of Locomotive Engineers and Trainmen TX PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Justin, TX 76247	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/20 Rpt: 8/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/13/2025	5 Full name of contributor Chipps, Mary	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Ava, MO 65608	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/06/2025	Full name of contributor Chirlin, Gary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Derwood, MD 20855	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/05/2025	Full name of contributor ConocoPhillips Spirit PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/03/2025	Full name of contributor Dara, Mahesh	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Frisco, TX 75035	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) MoonITSolutions
Date 10/23/2025	Full name of contributor Faizan, Mirza	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Plano, TX 75094	
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Innowaytors Llc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/20 Rpt: 9/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 07/07/2025	5 Full name of contributor Fields, David	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75203	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Haynes Boone, LLP
Date 08/09/2025	Full name of contributor Ford, Y	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor Fort Worth Firefighters Committee for Responsible Government	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76107	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2025	Full name of contributor Friends Of UT Dallas PAC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75240	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2025	Full name of contributor Garcia, Brandon	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Manor, TX 78653	
Principal occupation / Job title (See Instructions) Government Relations		Employer (See Instructions) TPCSA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/20 Rpt: 10/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/14/2025	5 Full name of contributor Gardner Sr., Richard	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code CHICAGO, IL 60620	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 12/08/2025	Full name of contributor General Motors Company Political Action Committee	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Washington, DC 20001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/13/2025	Full name of contributor Gentry, Laurie	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Fallon, NV 89406	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor Greenberg, Don	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sebastopol, CA 95472	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/10/2025	Full name of contributor HOMEPAc of Texas	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/20 Rpt: 11/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Dosier	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Princeton, NJ 08542	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haygood, Leah	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Silver Spring, MD 20902	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) BuzzWord Inc.
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofland, Amy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75228	
Principal occupation / Job title (See Instructions) Museum Director		Employer (See Instructions) UT Dallas
Date 12/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofland, Amy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75228	
Principal occupation / Job title (See Instructions) Museum Director		Employer (See Instructions) UT Dallas
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornung, Clarence	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Louisville, KY 40219	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/20 Rpt: 12/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotel PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Donald Contributor address; City; State; Zip Code Shelton, WA 98584	Amount of Contribution (\$) \$1.64
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hvoschinsky, Barbara Contributor address; City; State; Zip Code Redwood City, CA 94065	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Travel Agent		Employer (See Instructions) Self-Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isis, Melanie Contributor address; City; State; Zip Code Silver Spring, MD 20910	Amount of Contribution (\$) \$2.05
Principal occupation / Job title (See Instructions) Gardener		Employer (See Instructions) Self-Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jacalyn Contributor address; City; State; Zip Code Eugene, OR 97404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/20 Rpt: 13/84
2 FILER NAME Bhujani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadish, Lenore	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Oro Valley, AZ 85737	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerr, Mary	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Minneapolis, MN 55404	
Principal occupation / Job title (See Instructions) house cleaning		Employer (See Instructions) Two Bettys Green Cleaning
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuykendall, Deanna	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Austin, TX 78757	
Principal occupation / Job title (See Instructions) Legislative Consultant		Employer (See Instructions) Self-employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawler, Martha	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code La Pine, OR 97739	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laycock, David	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Chester, NJ 07930	
Principal occupation / Job title (See Instructions) Driver		Employer (See Instructions) UPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/20 Rpt: 14/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legacy 44 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson LLP Contributor address; City; State; Zip Code Austin, TX 78760	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date 10/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mahrouq, Sam Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$5,000.00
	Principal occupation / Job title (See Instructions) CEO	Employer (See Instructions) MEI Inc
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAdams, Will Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Lobbyist	Employer (See Instructions) Texas Lobby Strategy
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire Revocable Trust Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$1,500.00
	Principal occupation / Job title (See Instructions)	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/20 Rpt: 15/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire Woods PAC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Richmond, VA 23219	
8 Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions) Capital Health
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mealy, Patti	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Trenton, NJ 08628	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) K-State U
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaud, John-Paul	Amount of Contribution (\$) \$1.67
	Contributor address; City; State; Zip Code Hays, KS 67601	
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) UC San Diego
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/20 Rpt: 16/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moilanen, Erin	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Santa Rosa, CA 95404	
8 Principal occupation / Job title (See Instructions) Family Nurse Practitioner		9 Employer (See Instructions) Santa Rosa Community Health Centers
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muhammad, Rashid	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muhammad, Rashid	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muhammad, Rashid	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) muhammadmustafarashid ltd co.
Date 08/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Debbie	Amount of Contribution (\$) \$1.67
	Contributor address; City; State; Zip Code Charlotte, NC 28277	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Microsoft

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/20 Rpt: 17/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NRG Energy Political Action Committee Contributor address; City; State; Zip Code Princeton, NJ 08540	7 Amount of Contribution (\$) \$1,000.00
	8 Principal occupation / Job title (See Instructions) Not Employed	9 Employer (See Instructions)
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nelson, Therese Contributor address; City; State; Zip Code Chicago, IL 60615	Amount of Contribution (\$) \$8.20
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Oncor Texas State Political Action Committee of Oncor State Electric Contributor address; City; State; Zip Code Dallas, TX 75202	Amount of Contribution (\$) \$1,500.00
	Principal occupation / Job title (See Instructions) Not Employed	Employer (See Instructions) Not Employed
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Padilla, Eric Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$1,000.00
	Principal occupation / Job title (See Instructions) Director Public Policy	Employer (See Instructions) Vistra Corp
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Pelletier, Colin Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$10.00
	Principal occupation / Job title (See Instructions) Engineer	Employer (See Instructions) Ecobat

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/20 Rpt: 18/84
2 FILER NAME Bhujani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quadlander, Pat	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code EULESS, TX 76039	
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) unemployed
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasti, Kelly	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code San Antonio, TX 78256	
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Texas Association of School Boards
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Carol	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Manchester, NH 03104	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodine, Richard	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Barry	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code STORMVILLE, NY 12582	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/20 Rpt: 19/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rothstein, Susan	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code Brookline, MA 02445	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Hammond Real Estate
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sebazco, Susan	Amount of Contribution (\$) \$104.70
	Contributor address; City; State; Zip Code Bedford, TX 76021	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Tom	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code San Jose, CA 95126	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegel, Naomi	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Pittsburgh, PA 15238	
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockard, Natalie	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code St. Petersburg, FL 33701	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/20 Rpt: 20/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 11/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TBA Bank PAC	7 Amount of Contribution (\$) \$3,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC - Texas Association of Realtors Political Action Committee	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Austin, TX 78768	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC - Texas Association of Realtors Political Action Committee	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Austin, TX 78768	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Automobile Dealers Association PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Food & Fuel Association PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/20 Rpt: 21/84
2 FILER NAME Bhujani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
	8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Oil and Gas Association Good Government Committee Austin, TX 78701	Amount of Contribution (\$) \$750.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date 09/11/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00123612) Textron Inc. Political Action Committee Providence, RI 02903	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/20 Rpt: 22/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Posey Law Firm, PC	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002766) United Food and Commercial Workers International Union Active Ballot	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Washington, DC 20006	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VISTRA Employee PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Irving, TX 75039	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Becky	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Prof		Employer (See Instructions) aCC
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Pedro	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Ingram, TX 78025	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/20 Rpt: 23/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/28/2025	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00093054) WALPAC For Responsible Government, Walmart Inc. 6 Contributor address; City; State; Zip Code Bentonville, AR 72716	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werstein, Lori Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Adjunct Faculty		Employer (See Instructions) LCAD
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilensky, Sharon Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Susanne Contributor address; City; State; Zip Code Lafayette, CA 94549	Amount of Contribution (\$) \$1.64
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Oil Change International

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/20 Rpt: 24/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 12/22/2025	5 Full name of contributor briggs, vikki 6 Contributor address; City; State; Zip Code Euless, TX 76039	7 Amount of Contribution (\$) \$21.19
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 1/3 Rpt: 25/84</p>
<p>2 FILER NAME Bhojani, Salman (The Honorable)</p>				<p>3 Filer ID (Ethics Commission Filers) 00085598</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 09/01/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>8 Amount of contribution (\$) \$1,300.00</p>	<p>9 In-kind contribution description Office space</p>
	<p>7 Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 08/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>Amount of contribution (\$) \$1,300.00</p>	<p>In-kind contribution description Office space</p>
	<p>Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 07/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>Amount of contribution (\$) \$1,300.00</p>	<p>In-kind contribution description Office space</p>
	<p>Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>		
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>		
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>		
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>				<p>1 Total pages Schedule A2: Sch: 2/3 Rpt: 26/84</p>
<p>2 FILER NAME Bhojani, Salman (The Honorable)</p>				<p>3 Filer ID (Ethics Commission Filers) 00085598</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>				\$
<p>5 Date 10/01/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>8 Amount of contribution (\$) \$1,300.00</p>	<p>9 In-kind contribution description</p>
	<p>7 Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>			<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 11/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>Amount of contribution (\$) \$1,300.00</p>	<p>In-kind contribution description Office space</p>
	<p>Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				
<p>Date 12/01/2025</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6301 ECC LLC</p>		<p>Amount of contribution (\$) \$1,300.00</p>	<p>In-kind contribution description Office space</p>
	<p>Contributor address; City; State; Zip Code Irving, TX 75063</p>			<p><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>			<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>			<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>			<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>				

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: Sch: 3/3 Rpt: 27/84</p>	
<p>2 FILER NAME Bhojani, Salman (The Honorable)</p>		<p>3 Filer ID (Ethics Commission Filers) 00085598</p>	
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>	
<p>5 Date 12/08/2025</p>	<p>6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC 7 Contributor address; City; State; Zip Code Austin, TX 78701</p>	<p>8 Amount of contribution (\$) \$216.50 9 In-kind contribution description Food, drink, space rental for fundraiser <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>	
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>			
<p>Date 10/10/2025</p>		<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TREPAC - Texas Association of Realtors Political Action Committee Contributor address; City; State; Zip Code Austin, TX 78768</p>	<p>Amount of contribution (\$) \$250.00 In-kind contribution description Advertising for fundraising event <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>	
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>	
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>	
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 28/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 09/17/2025	7 Name of lender Bhojani, Salman	8 <input type="checkbox"/> out-of-state PAC (ID#: _____)
6 Is lender a financial institution? No	9 Loan Amount (\$) \$2,500.00	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Bhojani Law PLLC
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/> (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	18 Guarantor address; City; State; Zip Code
		19 Amount Guaranteed (\$)
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/13 Rpt: 29/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 12/31/2025	5 Payee name ActBlue	
6 Amount (\$) \$359.49	7 Payee address; City; PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Bhojani, Salman	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Arlington, TX 76005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Repayment of personal loan
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/18/2025	Payee name Bhojani, Salman	
Amount (\$) \$141.29	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Arlington, TX 76005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for hotel stay paid by personal credit card
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 30/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 12/22/2025	5 Payee name Bhojani, Salman	
6 Amount (\$) \$282.28	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Arlington, TX 76005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of toll tag fees paid by personal credit card
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/11/2025	Payee name Bigvu Inc.	
Amount (\$) \$99.99	Payee address; City; State; Zip Code 135 WEST 50 STREET NEW YORK, NY 10020	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Teleprompter
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/22/2025	Payee name Citibank	
Amount (\$) \$4,141.78	Payee address; City; State; Zip Code 6460 Las Colinas Blvd Irving, TX 75039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/13 Rpt: 31/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 08/22/2025	5 Payee name Citibank		
6 Amount (\$) \$1,187.51	7 Payee address; City; 6460 Las Colinas Blvd Irving, TX 75039	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/22/2025	Payee name Citibank		
Amount (\$) \$710.68	Payee address; City; 6460 Las Colinas Blvd Irving, TX 75039	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/22/2025	Payee name Citibank		
Amount (\$) \$2,597.66	Payee address; City; 6460 Las Colinas Blvd Irving, TX 75039	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 32/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 11/24/2025	5 Payee name Citibank	
6 Amount (\$) \$3,096.50	7 Payee address; City; 6460 Las Colinas Blvd Irving, TX 75039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/22/2025	Payee name Citibank	
Amount (\$) \$1,788.58	Payee address; City; 6460 Las Colinas Blvd Irving, TX 75039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/14/2025	Payee name Comerica Bank	
Amount (\$) \$13.00	Payee address; City; PO Box 650282 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/13 Rpt: 33/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 12/31/2025	5 Payee name DonorBox		
6 Amount (\$) \$54.44	7 Payee address; City; 601 King St Suite 200 Alexandria, VA 22314	State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution processing fees	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/01/2025	Payee name Google		
Amount (\$) \$76.75	Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Suite	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/02/2025	Payee name Google		
Amount (\$) \$26.00	Payee address; City; 1600 Amphitheatre Pkwy Mountain View, CA 94043	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/13 Rpt: 34/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 07/07/2025	5 Payee name Google	
6 Amount (\$) \$7.68	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/01/2025	Payee name Google	
Amount (\$) \$86.24	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Suite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Google	
Amount (\$) \$26.00	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/13 Rpt: 35/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/05/2025	5 Payee name Google	
6 Amount (\$) \$8.61	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Google	
Amount (\$) \$26.06	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/02/2025	Payee name Google	
Amount (\$) \$89.54	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Suite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/13 Rpt: 36/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 09/05/2025	5 Payee name Google	
6 Amount (\$) \$8.95	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name Google	
Amount (\$) \$26.02	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/02/2025	Payee name Google	
Amount (\$) \$82.98	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Suite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 37/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 10/06/2025	5 Payee name Google	
6 Amount (\$) \$8.95	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Google	
Amount (\$) \$26.16	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/03/2025	Payee name Google	
Amount (\$) \$84.91	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Suite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 38/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 11/05/2025	5 Payee name Google	
6 Amount (\$) \$8.95	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Google	
Amount (\$) \$26.16	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Voice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/05/2025	Payee name Google	
Amount (\$) \$8.95	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web domain
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/13 Rpt: 39/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/21/2025	5 Payee name Micropix Creations	
6 Amount (\$) \$98.45	7 Payee address; City; 4003 Jasmine Fox Ln Arlington, TX 76005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs and certificates for graduating high school seniors
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/03/2025	Payee name Public Storage	
Amount (\$) \$85.00	Payee address; City; 1520 W Irving Blvd Irving, TX 75061	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Public Storage	
Amount (\$) \$85.00	Payee address; City; 1520 W Irving Blvd Irving, TX 75061	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 40/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 09/03/2025	5 Payee name Public Storage	
6 Amount (\$) \$85.00	7 Payee address; City; State; Zip Code 1520 W Irving Blvd Irving, TX 75061	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Storage rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/02/2025	Payee name Scale to Win	
Amount (\$) \$85.32	Payee address; City; State; Zip Code 13742 Harper St Santa Anna, CA 92703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting platform
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Tarrant County Democratic Party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 685 John B Sias Memorial Pkwy Ste 400 Fort Worth, TX 76134	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/13 Rpt: 41/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 07/18/2025	5 Payee name Virani, Hussain	
6 Amount (\$) \$16.73	7 Payee address; City; 3505 Delphi Ct Corinth, TX 76208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff mileage reimbursement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Virani, Hussain	Office sought Office held
Date 09/12/2025	Payee name Virani, Hussain	
Amount (\$) \$25.20	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Corinth, TX 76208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Virani, Hussain	Office sought Office held
Date 09/17/2025	Payee name Virani, Hussain	
Amount (\$) \$19.60	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Corinth, TX 76208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff mileage reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Virani, Hussain	Office sought Office held

PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule F3: Sch: 1/1 Rpt: 42/84
2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 Date 09/17/2025	5 Name of person from whom investment is purchased Comerica Bank	
	6 Address of person from whom investment is purchased; City; State; Zip Code PO Box 650282	
	7 Description of investment Purchase of certificate of deposit	
	8 Amount of investment (\$) 175,000.00	

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 1/31 Rpt: 43/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution Citibank		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$279.58	(b) Date of Charge 11/06/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Musaafar		(b) Payee address; City, State, Zip Code 5115 Westheimer Rd Ste C-3500 Houston, TX 77056
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 12/20/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$10.83	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for Capitol office
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 2/31 Rpt: 44/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$3.00	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name X Corp		(b) Payee address; City, State, Zip Code 865 FM 1209 Building 2 Bastrop, TX 78062
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description X Premium subscription
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$89.54	(b) Date of Charge 12/12/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Google Suite
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$175.89	(b) Date of Charge 12/02/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name PhoneBurner Inc		(b) Payee address; City, State, Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92641
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Fundraising platform
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/31 Rpt: 45/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Rehmet, Taylor		(b) Payee address; City, State, Zip Code PO Box 470812 Fort Worth, TX 76147
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation to candidate
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Mailchimp		(b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 12/01/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Partnerships for Children		(b) Payee address; City, State, Zip Code 14000 Summit Dr Ste 100 Austin, TX 78727
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation to charitable organization
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 4/31 Rpt: 46/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.00	(b) Date of Charge 09/30/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 1520 W Irving Blvd Irving, TX 75061
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage rental
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$173.25	(b) Date of Charge 10/02/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name PhoneBurner Inc		(b) Payee address; City, State, Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92641
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Fundraising platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$65.24	(b) Date of Charge 10/09/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Shell		(b) Payee address; City, State, Zip Code 1111 S Ball St Grapevine, TX 76051
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel to/from legislative mixer
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 5/31 Rpt: 47/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$85.00	(b) Date of Charge 12/03/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 1520 W Irving Blvd Irving, TX 75061
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage rental
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$385.00	(b) Date of Charge 09/25/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Hurst Euless Bedford Chamber of		(b) Payee address; City, State, Zip Code 2109 Martin Dr Bedford, TX 76021
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Chamber of commerce membership
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
PAYMENT	(a) Amount Charged \$99.00	(b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Citibank		(b) Payee address; City, State, Zip Code 6460 Las Colinas Blvd Irving, TX 75039
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Credit card annual fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought
			Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 6/31 Rpt: 48/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$257.50	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Akanksha Education Fund		(b) Payee address; City, State, Zip Code 100 Crosby St Ste 301 New York, NY 10012
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Sponsorship for Charity Gala
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$175.89	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name PhoneBurner Inc		(b) Payee address; City, State, Zip Code 1968 S. Coast Hwy, Suite 1800 Laguna Beach, CA 92641
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Fundraising platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$14.22	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Sheet Labels		(b) Payee address; City, State, Zip Code 24 Native Rd Queensbury, NY 12804
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Mailing labels for holiday gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 7/31 Rpt: 49/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1,052.00	(b) Date of Charge 09/26/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Aga Khan Foundation		(b) Payee address; City, State, Zip Code 1825 K Street, NW Ste 901 Washington, DC 20006
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Charity walk/run sponsorship
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 10/03/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Mailchimp		(b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$28.13	(b) Date of Charge 10/17/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Ornaments for district holiday ornament design contest
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 8/31 Rpt: 50/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$51.78	(b) Date of Charge 10/21/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Quick Trip		(b) Payee address; City, State, Zip Code 7575 N Beltline Rd Irving, TX 75063
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel to/from invited appearance at religious freedom summit
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$108.24	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Microphone for video production
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$9.82	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for Capitol office
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/31 Rpt: 51/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$58.26	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Shell		(b) Payee address; City, State, Zip Code 12275 TX-36 Brenham, TX 77833
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from district to Capitol
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$261.36	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Simply to Impress		(b) Payee address; City, State, Zip Code 23801 Calabasas Rd Ste 2005 Calabasas, CA 91302
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Holiday gifts
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 09/29/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Rehmet, Taylor		(b) Payee address; City, State, Zip Code PO Box 470812 Fort Worth, TX 76147
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation to candidate
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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 Bhojani, Salman (The Honorable)			3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged \$4.33	(b) Date of Charge 10/10/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025	
7 PAYEE	(a) Payee name Platinum Parking		(b) Payee address; 719 Olive St Dallas, TX 75201	City, State, Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Parking at fundraiser	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$198.87	(b) Date of Charge 10/10/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025	
PAYEE	(a) Payee name Enoteca Italia		(b) Payee address; 3102 Oak Lawn Ave #116 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Restaurant for fundraiser	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025	
PAYEE	(a) Payee name Mailchimp		(b) Payee address; 405 N Angier Ave NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 11/31 Rpt: 53/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$21.55	(b) Date of Charge 11/14/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Thompson Dallas by Hyatt		(b) Payee address; City, State, Zip Code 205 N Akard St Dallas, TX 75201
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Parking at Asian Chamber of Commerce event
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$62.22	(b) Date of Charge 11/16/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Quick Trip		(b) Payee address; City, State, Zip Code 2905 E Southlake Blvd Southlake, TX 76092
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel to/from seminar on running for public office
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$105.00	(b) Date of Charge 10/15/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name United States Postal Service		(b) Payee address; City, State, Zip Code 210 N Ector Dr Euless, TX 76039
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Post office box rental
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 12/31 Rpt: 54/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$56.26	(b) Date of Charge 10/17/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Ornaments for district holiday ornament design contest
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$85.00	(b) Date of Charge 11/03/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Public Storage		(b) Payee address; City, State, Zip Code 1520 W Irving Blvd Irving, TX 75061
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Storage rental
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 11/20/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/31 Rpt: 55/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1,033.59	(b) Date of Charge 07/05/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
7 PAYEE	(a) Payee name Community Foundation of the		(b) Payee address; City, State, Zip Code 241 Earl Garrett St Kerrville, TX 78028
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation for flood recovery
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$30.00	(b) Date of Charge 07/09/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
PAYEE	(a) Payee name Hilton Anatole Hotel Dallas		(b) Payee address; City, State, Zip Code 2201 N Stemmons Fwy Dallas, TX 75207
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Parking for invited address at conference
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 07/20/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 14/31 Rpt: 56/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$58.81	(b) Date of Charge 07/30/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name Buc-ee's		(b) Payee address; City, State, Zip Code 165 US-77 Hillsboro, TX 76645
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from district to Capitol
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$28.82	(b) Date of Charge 07/30/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ground transportation during House Democratic caucus trip to New Mexico
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$94.76	(b) Date of Charge 07/31/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name The Downright, a Renaissance		(b) Payee address; City, State, Zip Code 701 E 11th St Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel in Austin
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 15/31 Rpt: 57/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$62.90	(b) Date of Charge 08/02/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name Exxon Gateway of Euless		(b) Payee address; City, State, Zip Code 3050 Hwy 360 Euless, TX 76039
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from Capitol to district
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 08/03/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Mailchimp		(b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta, GA 30308
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$30.00	(b) Date of Charge 08/04/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name ConferenceDirect		(b) Payee address; City, State, Zip Code 193 Blue Ravine Ste 190 Folsom, TX 95630
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Cancelation fee for travel for National Conference of State Legislators
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 16/31 Rpt: 58/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$10.00	(b) Date of Charge 08/16/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name Los Mangos		(b) Payee address; City, State, Zip Code 5706 Cermak Rd Cicero, IL 60804
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during House Democratic caucus trip to Chicago
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$18.95	(b) Date of Charge 08/16/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ground transportation during House Democratic caucus trip to Chicago
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$35.31	(b) Date of Charge 08/16/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ground transportation during House Democratic caucus trip to Chicago
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 17/31 Rpt: 59/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$68.43	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name DoubleTree Suites by Hilton		(b) Payee address; City, State, Zip Code 303 W 15th St Austin, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel in Austin
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$2.65	(b) Date of Charge 08/01/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for Capitol office
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$15.96	(b) Date of Charge 08/12/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ground transportation during House Democratic caucus trip to Chicago
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 18/31 Rpt: 60/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 08/20/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$7.78	(b) Date of Charge 08/27/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Jimmy John's		(b) Payee address; City, State, Zip Code 950 W University Ave Ste 201 Georgetown, TX 78626
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$27.25	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Ground transportation during House IT Caucus event
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 19/31 Rpt: 61/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 09/15/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
7 PAYEE	(a) Payee name Tarrant County Democratic Party		(b) Payee address; City, State, Zip Code 685 John B Sias Memorial Pkwy Ste 400 Fort Worth, TX 76134
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$600.00	(b) Date of Charge 09/23/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Northeast Leadership Forum		(b) Payee address; City, State, Zip Code 2109 Martin Dr Bedford, TX 76021
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Membership dues
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$33.00	(b) Date of Charge 07/11/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
PAYEE	(a) Payee name Hilton Anatole Hotel Dallas		(b) Payee address; City, State, Zip Code 2201 N Stemmons Fwy Dallas, TX 75207
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Parking for invited address at conference
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 20/31 Rpt: 62/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 09/03/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
7 PAYEE	(a) Payee name Mailchimp		(b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta, GA 30308
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$64.20	(b) Date of Charge 09/13/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Quick Trip		(b) Payee address; City, State, Zip Code 1500 Precinct Line Rd Hurst, TX 76054
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel to benefit concert for NiHao Food Bank Initiative
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$79.95	(b) Date of Charge 07/03/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
PAYEE	(a) Payee name Mailchimp		(b) Payee address; City, State, Zip Code 405 N Angier Ave NE Atlanta, GA 30308
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Email platform
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 21/31 Rpt: 63/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$33.00	(b) Date of Charge 07/12/2025	(c) Date(s) Credit Card Issuer Paid 08/22/2025
7 PAYEE	(a) Payee name Hilton Anatole Hotel Dallas		(b) Payee address; City, State, Zip Code 2201 N Stemmons Fwy Dallas, TX 75207
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Parking for invited address at conference
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$23.65	(b) Date of Charge 07/30/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Fresquez Concessions		(b) Payee address; City, State, Zip Code 2200 Sunport Blvd Albuquerque, NM 87106
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during House Democratic caucus trip to New Mexico
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$10.00	(b) Date of Charge 08/16/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Los Mangos		(b) Payee address; City, State, Zip Code 5706 Cermak Rd Cicero, IL 60804
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during House Democratic caucus trip to Chicago
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 22/31 Rpt: 64/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$45.94	(b) Date of Charge 08/17/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
7 PAYEE	(a) Payee name Chicago Marriott Suites O'Hare		(b) Payee address; City, State, Zip Code 6155 N River Rd Rosemont, IL 60018
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel during House Democratic caucus trip to Chicago
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$50.92	(b) Date of Charge 08/21/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Buc-ee's		(b) Payee address; City, State, Zip Code 165 US-77 Hillsboro, TX 76645
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from Capitol to district
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$10.64	(b) Date of Charge 08/18/2025	(c) Date(s) Credit Card Issuer Paid 09/22/2025
PAYEE	(a) Payee name Austin Airport F&B		(b) Payee address; City, State, Zip Code 3600 Presidential Blvd Austin, TX 78719
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during House Democratic caucus trip to Chicago
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 23/31 Rpt: 65/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$130.44	(b) Date of Charge 08/27/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
7 PAYEE	(a) Payee name DoubleTree Suites by Hilton		(b) Payee address; City, State, Zip Code 303 W 15th St Austin, TX 78701
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel in Austin
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$10.83	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for Capitol office
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$56.27	(b) Date of Charge 09/09/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave N Seattle, WA 98109
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office supplies
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 24/31 Rpt: 66/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 09/20/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
7 PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$64.47	(b) Date of Charge 08/27/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Exxon 7-Eleven		(b) Payee address; City, State, Zip Code 9401 N Interstate Hwy 35 Austin, TX 78753
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from Capitol to district
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$450.00	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name Qadri, Zo		(b) Payee address; City, State, Zip Code P.O. Box 1088 Austin, TX 78767
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation to candidate
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 25/31 Rpt: 67/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$21.51	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
7 PAYEE	(a) Payee name Austin Airport F&B		(b) Payee address; City, State, Zip Code 3600 Presidential Blvd Austin, TX 78719
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during travel for House IT Caucus event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$71.79	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025 10/22/2025
PAYEE	(a) Payee name DoubleTree Suites by Hilton		(b) Payee address; City, State, Zip Code 303 W 15th St Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel during House IT Caucus event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$27.40	(b) Date of Charge 09/02/2025	(c) Date(s) Credit Card Issuer Paid 10/22/2025
PAYEE	(a) Payee name The Capitol Grill		(b) Payee address; City, State, Zip Code 1400 Congress Ave Ste E1. 002 Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Officeholder meal during travel for House IT Caucus event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 26/31 Rpt: 68/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$9.82	(b) Date of Charge 10/01/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S I-35 Frontage Rd Austin, TX 78747
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Water for Capitol office
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$400.00	(b) Date of Charge 10/09/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name University of Texas Office of		(b) Payee address; City, State, Zip Code 210 W 7th St Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Football game tickets for fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$8.66	(b) Date of Charge 10/10/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
PAYEE	(a) Payee name Platinum Parking		(b) Payee address; City, State, Zip Code 719 Olive St Dallas, TX 75201
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Parking at fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 27/31 Rpt: 69/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 10/20/2025	(c) Date(s) Credit Card Issuer Paid 11/24/2025
7 PAYEE	(a) Payee name Canva		(b) Payee address; City, State, Zip Code 110 Kippax St Level 1 Surry Hills New South Wales 2010 Australia
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Design software
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$62.56	(b) Date of Charge 12/08/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Exxon		(b) Payee address; City, State, Zip Code 1020 S 5th St Waco, TX 76706
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from district to Austin for fundraiser
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$25.12	(b) Date of Charge 12/08/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Capitol Café		(b) Payee address; City, State, Zip Code 1001 Congress Ave #180 Austin, TX 78701
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal during fundraising trip
			(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 28/31 Rpt: 70/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$56.00	(b) Date of Charge 12/06/2025	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name 7-Eleven		(b) Payee address; City, State, Zip Code 1101 TX-114 Southlake, TX 76092
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Gas for travel from Austin to district after fundraiser
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 12/18/2025	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Turner, Chris		(b) Payee address; City, State, Zip Code 320 Westway PI Ste 501 Arlington, TX 76018
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Donation to candidate
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$4.99	(b) Date of Charge 10/24/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 29/31 Rpt: 71/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$12.97	(b) Date of Charge 11/02/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$40.82	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Real Thai Food		(b) Payee address; City, State, Zip Code 1108 E 12th St Austin, TX 78702
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$15.34	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Cuantos Tacos		(b) Payee address; City, State, Zip Code 1108 E 12th St Austin, TX 78702
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 30/31 Rpt: 72/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$8.93	(b) Date of Charge 11/01/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
7 PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 1455 Market St Ste 400 San Francisco, CA 94103
8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$267.00	(b) Date of Charge 11/05/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name North Italia		(b) Payee address; City, State, Zip Code 1700 Post Oak Ste 190 Houston, TX 77056
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$9.95	(b) Date of Charge 11/06/2025	(c) Date(s) Credit Card Issuer Paid 12/22/2025
PAYEE	(a) Payee name Curry and Grill		(b) Payee address; City, State, Zip Code 1082 FM830 Willis, TX 77318
PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Personal expense		(b) Description Personal expense accidentally paid with campaign credit card (reimbursed by filer)
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

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: Sch: 31/31 Rpt: 73/84	2 FILER NAME Bhojani, Salman (The Honorable)		3 Filer ID (Ethics Commission Filers) 00085598
4 CREDIT CARD ISSUER	Name of financial institution Capital One		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$141.29	(b) Date of Charge 08/24/2025	(c) Date(s) Credit Card Issuer Paid 09/20/2025
7 PAYEE	(a) Payee name DoubleTree Suites by Hilton		(b) Payee address; City, State, Zip Code 303 W 15th St Austin, TX 78701
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Hotel in Austin (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/10 Rpt: 74/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 09/20/2025	5 Payee name Capital One		
6 Amount (\$) \$141.29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 60599 City of Industry, CA 91716		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for Austin hotel stay paid by personal credit card	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/16/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$2.03 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Tarrant Area Food Bank mobile pantry event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/11/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$5.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - fundraising event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/10 Rpt: 75/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 12/08/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$12.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - district to Austin for fundraiser	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/08/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$19.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Austin to district after fundraiser	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 12/06/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$10.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Grand Prairie Christmas tour & Sindhi Cultural Day	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/10 Rpt: 76/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 12/02/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$30.25	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Southern Glazer's tour	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/17/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$2.77	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - town hall meeting at Viridian Elementary	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 11/16/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$3.10	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - seminar on running for office	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/10 Rpt: 77/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 11/05/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$12.55 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - district to Austin for event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/08/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$2.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - lobbyist meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/23/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$17.49 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - invited appearances at summit on religious freedom & Mid-Cities Democrats	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/10 Rpt: 78/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 10/19/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$4.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - press conference	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/18/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$15.54 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Muslim Legal Foundation of America banquet	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/18/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$4.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Taiwan Day event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/10 Rpt: 79/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 10/10/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$4.73 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - fundraiser	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/08/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$2.37 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Rodriguez Junior High School dedication	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/01/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$0.74 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Greater Fort Worth Association of Realtors events	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 7/10 Rpt: 80/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 09/30/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$3.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Dallas Regional Chamber event	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/18/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$7.37 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - North Texas Technology Sector Partnership event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 09/13/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$4.30 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag chage - Tarrant County Democratic Party event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 8/10 Rpt: 81/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598
4 Date 08/27/2025	5 Payee name North Texas Tollway Authority	
6 Amount (\$) \$19.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Austin to district
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/25/2025	Payee name North Texas Tollway Authority	
Amount (\$) \$18.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - district to Austin
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 08/21/2025	Payee name North Texas Tollway Authority	
Amount (\$) \$17.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Austin to district
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 9/10 Rpt: 82/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 08/19/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$19.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - district to Austin	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/31/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$23.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - Austin to district	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 07/30/2025	Payee name North Texas Tollway Authority		
Amount (\$) \$17.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel Out of District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - district to Austin	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 10/10 Rpt: 83/84	2 FILER NAME Bhojani, Salman (The Honorable)	3 Filer ID (Ethics Commission Filers) 00085598	
4 Date 07/12/2025	5 Payee name North Texas Tollway Authority		
6 Amount (\$) \$1.94	7 Payee address; City; State; Zip Code P.O. Box 260928 Plano, TX 75026		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Toll tag charge - invited appearance at conference	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: Sch: 1/1 Rpt: 84/84</p>
<p>2 FILER NAME Bhojani, Salman (The Honorable)</p>		<p>3 Filer ID (Ethics Commission Filers) 00085598</p>
<p>4 Date 10/17/2025</p>	<p>5 Name of person from whom amount is received Comerica Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75265</p>	<p>8 Amount (\$) \$599.79</p>
	<p>7 Purpose for which amount is received Interest on certificate of deposit</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/17/2025</p>	<p>Name of person from whom amount is received Comerica Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75265</p>	<p>Amount (\$) \$601.99</p>
	<p>Purpose for which amount is received Interest on certificate of deposit</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/17/2025</p>	<p>Name of person from whom amount is received Comerica Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75265</p>	<p>Amount (\$) \$603.92</p>
	<p>Purpose for which amount is received Interest on certificate of deposit</p>	<input type="checkbox"/> Check if political contribution returned to filer