

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)		2 Total pages filed: 47	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Sukh	MI	OFFICE USE ONLY	
	NICKNAME	LAST Kaur	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 814 W Craig Pl San Antonio TX 78212			Date Received	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 236-0580	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Bobby	MI	Receipt #	Amount \$
	NICKNAME	LAST Mendez	SUFFIX	Date Processed	
				Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 455 Sharon Dr San Antonio TX 78216				
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 388-1555	EXTENSION		
9 REPORT TYPE	30th Day Before General Election				
10 PERIOD COVERED	Month Day Year 1/1/2023		THROUGH	Month Day Year 3/27/2023	
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/6/2023	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 1		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Sukh Kaur

15 Filer ID (Ethics Commission Filers)

16 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. 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

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 13040.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 29514.02

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 31253.65

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 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.

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sukh Kaur, this the 6th day of April, 2023, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Sukh Kaur		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13040.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 29514.02
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
1/3/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sofia Lupian

7 Amount of contribution (\$)
30.00

6 Contributor address; City; State; Zip Code
**1930 12th Ave
San Francisco, CA 94116**

8 Principal occupation / Job title (See instructions)
Graphics

9 Employer (See instructions)
Folgers

Date
1/5/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ambika Dani

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**603 Merida Street
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Educator

Employer (See instructions)
Promesa

Date
1/9/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nick Parenteau

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**6202 Welles Edge Cir
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Advisory

Employer (See instructions)
KPMG

Date
1/10/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Arvinder Goomer

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2403 Connor Cir
Mount Airy, MD 21771**

Principal occupation / Job title (See instructions)
Insurance Agent

Employer (See instructions)
Singh Brokerage

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 2 of 20
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 1/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David P Woolfolk 6 Contributor address; City; State; Zip Code 8707 Falcon Place San Antonio, TX 78256	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Documation, Inc.
Date 1/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Latral Walker Contributor address; City; State; Zip Code 13851 Bonner Bluff Houston, TX 77047	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Education		Employer (See instructions) Houston ISD
Date 1/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gurleen Grewal Contributor address; City; State; Zip Code 8226 Southeast 19th Avenue Portland, OR 97202	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Physical therapist		Employer (See instructions) Self employed
Date 1/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gurpreet Singh Contributor address; City; State; Zip Code 8226 SE 19th Ave Portland, OR 97202	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Northwest Permanente
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
2/6/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Khanak kaur

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**418 pueblo pinatdo
HELOTES, TX 78023**

8 Principal occupation / Job title (See instructions)
student

9 Employer (See instructions)
student

Date
2/6/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Suhavi Kaur

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**418 pueblo pinatdo
HELOTES, TX 78023**

Principal occupation / Job title (See instructions)
student

Employer (See instructions)
student

Date
2/19/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Madeleine Peery

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**808 W Mulberry Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
homemaker

Employer (See instructions)
homemaker

Date
2/20/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sara Villarreal

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**218 East Melrose Drive
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Principal

Employer (See instructions)
Catalyst Property Partners

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 20

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
2/24/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Doug Dawson

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**8003 Lennon Dr
Austin, TX 78744**

8 Principal occupation / Job title (See instructions)
Education

9 Employer (See instructions)
NA

Date
2/25/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ernest W Bromley

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**19 Westelm Circle
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Managing Partner

Employer (See instructions)
Pescador Public Strategies, LLC

Date
2/26/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cadence Thorne

Amount of contribution (\$)
10.00

Contributor address; City; State; Zip Code
**126 Bayville Dr
San Antonio, TX 78226**

Principal occupation / Job title (See instructions)
Toddler Teacher

Employer (See instructions)
Primrose Schools

Date
2/26/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mary-Alice Drury

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**2317 McCullough Avenue
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Teacher

Employer (See instructions)
Mary-Alice Drury

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 20

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
2/26/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Colleen A Quirk

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**1715 Elk Canyon Drive
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
Teacher

9 Employer (See instructions)
SAISD

Date
2/26/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jessica Mueller

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**929 W Mulberry Ave
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Program Director

Employer (See instructions)
SAHCC

Date
2/26/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alexandra Rodriguez

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**204 E Arsenal
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Partnership Specialist

Employer (See instructions)
CAST Schools Network

Date
2/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Patricia G Luna

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2909 Piping Rock
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
CAO

Employer (See instructions)
Division Laundry

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
2/28/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jason Mims

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1614 Lone Oak Ave
San Antonio, TX 78220**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
retired

Date
2/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniel Kellum

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**330 E Summit Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Doctor/Owner

Employer (See instructions)
Kellum Medical Group

Date
2/28/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rose Kellum

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**330 E Summit Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Diabetes Sales Specialist

Employer (See instructions)
Eli Lilly and Company

Date
3/1/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marisa Cannata

Amount of contribution (\$)
40.00

Contributor address; City; State; Zip Code
**2104 18th Ave S
Nashville, TN 37212**

Principal occupation / Job title (See instructions)
Professor

Employer (See instructions)
Vanderbilt University

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
7 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/2/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Maria Sokol

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**1919 Orchid Street
Sarasota, FL 34239**

8 Principal occupation / Job title (See instructions)
Ed Consultant

9 Employer (See instructions)
Independent/Self

Date
3/6/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Andy Palacios

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**206 Brooklyn Ave
San Antonio, TX 78215**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Tonys Siesta

Date
3/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lindsey Walker

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**1631 Lee Hall Street
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Student Services Coordinator

Employer (See instructions)
Charter School

Date
3/8/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tamra Fisher

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13403 Vista Bonita
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Office of the Texas Attorney General

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8 of 20
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/8/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rebecca Page 6 Contributor address; City; State; Zip Code 16734 Worthington San Antonio, TX 78248	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Watts Guerra
Date 3/8/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myca Lopez Contributor address; City; State; Zip Code 903 Potomac San Antonio, TX 78202	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Special Education Coordinator		Employer (See instructions) Promesa Academy
Date 3/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cynthia Langston Contributor address; City; State; Zip Code 1106 W Magnolia Ave San Antonio, TX 78201	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Fundraiser		Employer (See instructions) Self
Date 3/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) C. E Cummins Contributor address; City; State; Zip Code 104 El Monte Blvd San Antonio, TX 78212	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Texas Lead for Innovation		Employer (See instructions) MITRE
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/10/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Leticia Gonzales

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**9422 Mariposa Pass
San Antonio, TX 78251**

8 Principal occupation / Job title (See instructions)
Vice President

9 Employer (See instructions)
GFCU

Date
3/11/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Vicki Perkins

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**527 Leigh St.
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
retired

Date
3/12/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kathleen Laborde

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**800 East Guenther Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Professor

Employer (See instructions)
The University of Texas at San Antonio

Date
3/12/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jaspreet Ahuja

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**11520 Lake Potomac Dr
Potomac, MD 20854**

Principal occupation / Job title (See instructions)
Nutritionist

Employer (See instructions)
USDA

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10 of 20
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jessica Miller 6 Contributor address; City; State; Zip Code 3038 Oneida San Antonio, TX 78230	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) Teacher		9 Employer (See instructions) St. George
Date 3/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ajeya joshi Contributor address; City; State; Zip Code 70 Three Lakes Drive San Antonio, TX 78248	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) physician		Employer (See instructions) Ajeya Joshi MD PA
Date 3/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Saud Contributor address; City; State; Zip Code 640 SW Golden Hills Drive ##D101 Pullman, WA 99163	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Educator		Employer (See instructions) WSU
Date 3/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neel Lane Contributor address; City; State; Zip Code 626 Mission Street San Antonio, TX 78210	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Norton Rose Fulbright
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11 of 20
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/17/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ravinder Birgi 6 Contributor address; City; State; Zip Code 8613 Saddleback Pl Laurel, MD 20723	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Misc		9 Employer (See instructions) Misc
Date 3/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neeta Singh Contributor address; City; State; Zip Code 10006 Wincopia Farms Way Laurel, MD 20723	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Realtor with Compass		Employer (See instructions) Self employed
Date 3/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martha Baron Contributor address; City; State; Zip Code 114 Camp Street ##105 San Antonio, TX 78204	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 3/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allan Polunsky Contributor address; City; State; Zip Code 17806 I.H. 10 West Expressway ##450 San Antonio, TX 78257	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Polunsky Beitel Green, LLP
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12 of 20
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jack Vexler 6 Contributor address; City; State; Zip Code PO Box 241509 san antonio, TX 78224	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See instructions) Business		9 Employer (See instructions) Monterrey Iron & Metal
Date 3/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tinsley Cheatham Smith Contributor address; City; State; Zip Code 123 Cloverleaf Ave San Antonio, TX 78209	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Director		Employer (See instructions) Zachry
Date 3/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mohinder Khangura Contributor address; City; State; Zip Code 205 West Summit Avenue San Antonio, TX 78212	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 3/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melody Hull Contributor address; City; State; Zip Code 324 West Rosewood Avenue San Antonio, TX 78212	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/23/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James Stoneking

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**325 MADISON
San Antonio, TX 78204**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Bracewell LLP

Date
3/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Linda Ruiz

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**410 Cliff Avenue
San Antonio, TX 78214**

Principal occupation / Job title (See instructions)
Painting

Employer (See instructions)
LJC Painting

Date
3/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Manjit Kaur Singh

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2912 Fairland Road
Silver Spring, MD 20904**

Principal occupation / Job title (See instructions)
Business Owner

Employer (See instructions)
Takoma Montessori School

Date
3/23/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Steve Markey

Amount of contribution (\$)
300.00

Contributor address; City; State; Zip Code
**202 E Agarita Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Wealth management

Employer (See instructions)
Whitestone wealth management

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
14 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/25/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Michael De La Garza

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**5314 Arrowhead Drive
San Antonio, TX 78228**

8 Principal occupation / Job title (See instructions)
Executive Director

9 Employer (See instructions)
Edwards Aquifer Authority

Date
3/26/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lamar Sawyer

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**832 W Mistletoe Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
retired

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul Bishop

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**923 Ogden St.
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Paul Bishop

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sheena Connell

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**175 Harrigan Court ##4
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Educator

Employer (See instructions)
UIW

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
15 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kimberly Biffle

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**300 East Basse Road ##1110
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Event planner

9 Employer (See instructions)
Biffle Events

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
diane zamora

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**643 w elmira
SAN ANTONIO, TX 78212**

Principal occupation / Job title (See instructions)
Accountant

Employer (See instructions)
Ereg

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harsharan Kaur

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3643 Grosvenor Drive
Ellicott City, MD 21042**

Principal occupation / Job title (See instructions)
Executive Director at nonprofit

Employer (See instructions)
SHDF

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jasprit Matta

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**11850 Farside Road
Ellicott City, MD 21042**

Principal occupation / Job title (See instructions)
homemaker

Employer (See instructions)
homemaker

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
16 of 20

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lisa Andrade Gonima

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
222 West Mulberry Avenue
San Antonio, TX 78212

8 Principal occupation / Job title (See instructions)
Owner/Partner

9 Employer (See instructions)
Del Rey Transportation LLC

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Erika Gonzalez

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
238 West Kings Highway
San Antonio, TX 78212

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
STAAMP

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wade Becker

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
323 W. Gramercy Pl
San Antonio, TX 78212

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Texas Institute for Graduate Medical Education

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Arthur Campsey

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
323 W. Gramercy Pl
San Antonio, TX 78212

Principal occupation / Job title (See instructions)
Physician assistant

Employer (See instructions)
Kellum Physician Partners

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
17 of 20

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Donovan Becker

7 Amount of contribution (\$)
20.00

6 Contributor address; City; State; Zip Code
**408 Lewis St
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Product Manager

9 Employer (See instructions)
Telmetrix

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Joey Trinidad

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**162 Greenlawn Drive
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
FEMA Housing Inspector

Employer (See instructions)
WSP USA

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anne-Marie Grube

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2136 W Summit Ave
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
COO

Employer (See instructions)
Northwestern Mutual

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lori Castillo

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**231 Adams Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
VP Marketing

Employer (See instructions)
NS Brands

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
18 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Melissa Sparks

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**9103 Tezel Bluff
San Antonio, TX 78250**

8 Principal occupation / Job title (See instructions)
Communications

9 Employer (See instructions)
Caterpillar

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harliv Kaur

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**8526 Camp Verde Rio
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)
Commercial Realtor

Employer (See instructions)
Singh Commercial

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Matt Barry

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**14007 Panther Valley
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Manager

Employer (See instructions)
PrintGlobe LLC

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
james lazarus

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**631 East Gunther Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
19 of 20

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jassi Ahuja

7 Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1102 Saddle Creek Ct
Sparks Glencoe, MD 21152**

8 Principal occupation / Job title (See instructions)
Substitute Teacher

9 Employer (See instructions)
Baltimore County public schools

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kaitlin OConnell

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**301 East Cevallos ##304
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)
Govt

Employer (See instructions)
Govt

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alexandra Andrews

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1200 Avenue B
San Antonio, TX 78215**

Principal occupation / Job title (See instructions)
Pharmaceutical Sales Rep

Employer (See instructions)
Thea Pharma

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jennifer Rosas

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**202 Mary Louise Dr
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Academics Director

Employer (See instructions)
TNTP

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
20 of 20

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date
3/27/2023

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kara Hill

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**14619 Porterhouse
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)
Physician

9 Employer (See instructions)
BAMC

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Alison Wiesenthal

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**127 E Hermosa Dr
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Director

Employer (See instructions)
Port San Antonio

Date
3/27/2023

Full name of contributor ☐ out-of-state PAC (ID# _____)
Melissa Danielle

Amount of contribution (\$)
75.00

Contributor address; City; State; Zip Code
**803 W Lynwood Ave
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Chief of Staff

Employer (See instructions)
Childrens Shelter

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1	
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Contributor address; City; State; Zip Code		8 Amount of Contribution \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code		Amount of Contribution \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements			

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

15 ☐ Check if personal funds were deposited into political
account (See instructions)

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral
☐ none

☐ Check if personal funds were deposited into political
account (See Instructions)

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 1 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 1/3/2023	5 Payee name Mailchimp	
6 Amount (\$) 28.25	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE ##5000 ATLANTA, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email Newsletter
	(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 Sukh Kaur	Office sought Council District 1
		Office held
Date 1/4/2023	Payee name USPS PO 4879520204	
Amount (\$) 72.00	Payee address; City; State; Zip Code 1140 S Laredo St San Antonio, TX 78204	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Postage
	<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 Sukh Kaur	Office sought Council District 1
		Office held
Date 1/18/2023	Payee name GOOGLE *Domains	
Amount (\$) 12.72	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Website Hosting
	<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 Sukh Kaur	Office sought Council District 1
		Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 1/26/2023	5 Payee name USPS PO 4879640212		
6 Amount (\$) 63.00	7 Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Postage
	(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 Sukh Kaur Office sought Council District 1 Office held			
Date 1/31/2023	Payee name FROST BANK		
Amount (\$) 5.00	Payee address; City; State; Zip Code 111 W Houston St ##100 San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Bank Fee
	<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 Sukh Kaur Office sought Council District 1 Office held			
Date 2/2/2023	Payee name Mailchimp		
Amount (\$) 28.25	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE ##5000 ATLANTA, GA 30308		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Email Newsletter
	<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 Sukh Kaur Office sought Council District 1 Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 2/7/2023	5 Payee name KEY IDEAS INCORP		
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code 1002 N Flores St San Antonio, TX 78212		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Videos
	(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: Sukh Kaur Office sought: Council District 1 Office held:			
Date 2/9/2023	Payee name Jennifer Longoria		
Amount (\$) 1500.00	Payee address; City; State; Zip Code 403 Basswood Dr San Antonio, TX 78213		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor		Description Field Director
	<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: Sukh Kaur Office sought: Council District 1 Office held:			
Date 2/13/2023	Payee name CKE*TLAHC0 MEXICAN KIT		
Amount (\$) 56.11	Payee address; City; State; Zip Code 6702 San Pedro Ave San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Volunteer Food
	<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: Sukh Kaur Office sought: Council District 1 Office held:			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 2/15/2023	5 Payee name Patrick Orosco	
6 Amount (\$) 1672.00	7 Payee address; City; State; Zip Code 8015 W 2nd St Somerset, TX 78069	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Yard Signs
	(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 Sukh Kaur Office sought Council District 1 Office held		
Date 2/16/2023	Payee name Sandra Hernandez	
Amount (\$) 1573.96	Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Door Hangers
	<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 Sukh Kaur Office sought Council District 1 Office held		
Date 2/21/2023	Payee name GOOGLE *Domains	
Amount (\$) 12.72	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Website Hosting
	<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 Sukh Kaur Office sought Council District 1 Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 2/24/2023	5 Payee name JIFFYSHIRTS.COM US L.P	
6 Amount (\$) 199.09	7 Payee address; City; State; Zip Code 1000 N. West St. Wilmington, DE 19801	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Shirts
	(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 Sukh Kaur	Office sought Council District 1
Date 2/27/2023	Payee name REROOTED	
Amount (\$) 324.76	Payee address; City; State; Zip Code 623 Hemisfair Blvd ##106 San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Fundriaing Expense	Description Fundraising Event
	<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 Sukh Kaur	Office sought Council District 1
Date 2/28/2023	Payee name FROST BANK	
Amount (\$) 5.00	Payee address; City; State; Zip Code 111 W Houston St ##100 San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Bank Fee
	<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 Sukh Kaur	Office sought Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/1/2023	5 Payee name AMZN Mktp US*HD5O628F1		
6 Amount (\$) 45.99	7 Payee address; City; State; Zip Code 410 Terry Ave N Seattle, WA 98109		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Sign Driver
	(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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/2/2023	Payee name HARBOR FREIGHT TOOLS 5		
Amount (\$) 25.80	Payee address; City; State; Zip Code 1803 Vance Jackson Rd # #105 San Antonio, TX 78213		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Zip Ties
	<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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/2/2023	Payee name Mailchimp		
Amount (\$) 28.25	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE ##5000 ATLANTA, GA 30308		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Email Newsletter
	<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 Sukh Kaur Office sought Council District 1 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2023	5 Payee name USPS PO 4879640212		
6 Amount (\$) 88.00	7 Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Postage
	(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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/6/2023	Payee name Patrick Orosco		
Amount (\$) 810.81	Payee address; City; State; Zip Code 8015 W 2nd St Somerset, TX 78069		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description Large Signs
	<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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/6/2023	Payee name Jennifer Longoria		
Amount (\$) 1500.00	Payee address; City; State; Zip Code 403 Basswood Dr San Antonio, TX 78213		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor		Description Field Director
	<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 Sukh Kaur Office sought Council District 1 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2023	5 Payee name SCHOOL YARD		
6 Amount (\$) 276.04	7 Payee address; City; State; Zip Code 12300 IH-10 W Bldg 3 San Antonio, TX 78230		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description Campaign Shirts
	(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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/6/2023	Payee name Irvin Dominguez		
Amount (\$) 170.00	Payee address; City; State; Zip Code 1327 Mission Grande ##514 San Antonio, TX 78221		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor		Description Field Walker
	<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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/10/2023	Payee name HARBOR FREIGHT TOOLS 5		
Amount (\$) 36.62	Payee address; City; State; Zip Code 1803 Vance Jackson Rd # #105 San Antonio, TX 78213		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description Zip Ties
	<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 Sukh Kaur Office sought Council District 1 Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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 F1: 9 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 3/13/2023	5 Payee name Irvin Dominguez	
6 Amount (\$) 580.00	7 Payee address; City; State; Zip Code 1327 Mission Grande ##514 San Antonio, TX 78221	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Contract Labor	(b) Description Field Walker
	(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 Sukh Kaur	Office sought Council District 1
Date 3/15/2023	Payee name ALAMO MAILING CO SALE	
Amount (\$) 4565.46	Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78233	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Mailer Postage
	<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 Sukh Kaur	Office sought Council District 1
Date 3/16/2023	Payee name Sandra Hernandez	
Amount (\$) 2593.67	Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Mailer Printing
	<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 Sukh Kaur	Office sought Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 10 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2023	5 Payee name GOOGLE *Domains	
6 Amount (\$) 12.72	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Website Hosting
	(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 Sukh Kaur	Office sought Council District 1
Date 3/20/2023	Payee name Irvin Dominguez	
Amount (\$) 480.00	Payee address; City; State; Zip Code 1327 Mission Grande ##514 San Antonio, TX 78221	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor	Description Field Walker
	<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 Sukh Kaur	Office sought Council District 1
Date 3/22/2023	Payee name HARLAND CLARKE	
Amount (\$) 41.64	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Check Order
	<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 Sukh Kaur	Office sought Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 11 of 12	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date 3/27/2023	5 Payee name PATH TO VICTORY	
6 Amount (\$) 6500.00	7 Payee address; City; State; Zip Code 136 S Hancock St Madison, WI 53703	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital Ads
	(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 Sukh Kaur	Office sought Council District 1
Date 3/27/2023	Payee name Irvin Dominguez	
Amount (\$) 600.00	Payee address; City; State; Zip Code 1327 Mission Grande ##514 San Antonio, TX 78221	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor	Description Field Walker
	<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 Sukh Kaur	Office sought Council District 1
Date 3/27/2023	Payee name Melinda Cirilo	
Amount (\$) 130.00	Payee address; City; State; Zip Code 8722 Cinnamon Creek Dr. San Antonio, TX 78240	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Contract Labor	Description Field Walker
	<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 Sukh Kaur	Office sought Council District 1

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 12	2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/2023	5 Payee name ANEDOT		
6 Amount (\$) 463.41	7 Payee address; City; State; Zip Code 1340 Poydras Street ##770 New Orleans, LA 70112		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees		(b) Description Contribution Fee
	(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 Sukh Kaur Office sought Council District 1 Office held			
Date 3/27/2023	Payee name VENMO		
Amount (\$) 12.75	Payee address; City; State; Zip Code 117 Barrow St New York, NY 10014		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description Contribution Fee
	<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 Sukh Kaur Office sought Council District 1 Office held			
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description
	<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			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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 F2: 1 of 1	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

.....
6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

.....
Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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: 1 of 1	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gifts/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: 1 of 1	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	
	(b) Description	
	(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
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	
	Description	
	<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
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	
	Description	
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(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		
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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		
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<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		

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Sukh Kaur	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Sukh Kaur

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

8 Amount (\$)

6 Address of person from whom amount is received; City; State; Zip Code

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

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

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Sukh Kaur		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> Schedule A2</div> <div><input type="checkbox"/> Schedule B</div> <div><input type="checkbox"/> Schedule B(J)</div> <div><input type="checkbox"/> Schedule C2</div> <div><input type="checkbox"/> Schedule D</div> <div><input type="checkbox"/> Schedule F1</div> <div><input type="checkbox"/> Schedule F2</div> <div><input type="checkbox"/> Schedule F4</div> <div><input type="checkbox"/> Schedule G</div> <div><input type="checkbox"/> Schedule H</div> <div><input type="checkbox"/> Schedule COH-UC</div> <div><input type="checkbox"/> Schedule B-SS</div> </div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	

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CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME
Sukh Kaur

Filer ID (Ethics Commission Filers)

SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

•• Complete A & B below *only* if you are not an officeholder. ••

A. CAMPAIGN FUNDS

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

OFFICEHOLDER

•• Complete this section *only* if you are an officeholder. ••

- ☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder