

# 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: <b>55</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>814 W Craig Pl San Antonio TX 78212</b>			Date Received <b>1/16/2024 5:56:54PM</b>	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( 210 )	PHONE NUMBER <b>236-0580</b>	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	NICKNAME	LAST	SUFFIX	Amount \$	
	Date Processed <b>1/16/2024 5:56:54PM</b>			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>455 Sharon Dr San Antonio TX 78216</b>				
8 CAMPAIGN TREASURER PHONE	AREA CODE ( 210 )	PHONE NUMBER <b>388-1555</b>	EXTENSION		
9 REPORT TYPE	<b>January 15: Semi-Annual</b>				
10 PERIOD COVERED	Month Day Year      Month Day Year <b>7/1/2023</b> THROUGH <b>12/31/2023</b>				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year <b>5/3/2025</b>	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special    Description			
12 OFFICE	OFFICE HELD (if any) <b>Council District 1</b>		13 OFFICE SOUGHT (if known) <b>Council District 1</b>		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> <b>Sukh Kaur</b>	<b>15 Filer ID</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>	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.
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COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 0</b>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 35350.00</b>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 0</b>
	4. TOTAL POLITICAL EXPENDITURES	<b>\$ 11427.05</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 42199.44</b>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 0</b>

## 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 16th day of January, 2024, 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

<b>19</b> FILER NAME <b>Sukh Kaur</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	<b>\$ 35350.00</b>
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$ 0</b>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	<b>\$ 0</b>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 11427.05</b>
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	<b>\$ 0</b>
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	<b>\$ 0</b>
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	<b>\$ 0</b>
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	<b>\$ 0</b>
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$ 1450.00</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 23**

2 FILER NAME  
**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/3/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Marco Barros**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**14018 Sage Blf  
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)  
**Business Development and Governmental Affairs**

9 Employer (See instructions)  
**Marco Barros Management**

Date  
**7/3/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**George Mery**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**5157 Blanco Rd #E  
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**Elegant Limousine and Charter**

Date  
**7/7/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Doug Dawson**

Amount of contribution (\$)  
**250.00**

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

Principal occupation / Job title (See instructions)  
**Education Entrepreneur**

Employer (See instructions)  
**SIC**

Date  
**7/7/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Johnny Hernandez**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**411 e cevallos  
SAN ANTONIO, TX 78204**

Principal occupation / Job title (See instructions)  
**Cook**

Employer (See instructions)  
**Self Employed**

**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 23**

2 FILER NAME  
**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/7/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Margaret & Bill Kanyusik**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**700 E. Hildebrand  
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)  
**Retired**

9 Employer (See instructions)  
**Retired**

Date  
**7/8/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Edward E. III**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**114 Camp St  
San Antonio, TX 78204**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)  
**Retired**

Date  
**7/10/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Stephen Yndo**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**935 S Alamo St  
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)  
**Brokerage/Development**

Employer (See instructions)  
**Yndo Commercial Real Estate**

Date  
**7/10/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Frank Stenger**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**208 Sir Arthur Court  
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)  
**Retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**3 of 23**

2 FILER NAME

**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/10/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Mitch Meyer**

7 Amount of contribution (\$)  
**250.00**

6 Contributor address; City; State; Zip Code  
**9 Penny Lane  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**Real Estate**

9 Employer (See instructions)  
**Loopy Limited**

Date  
**7/11/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jeff Wurzburg**

Amount of contribution (\$)  
**50.00**

Contributor address; City; State; Zip Code  
**511 E Nottingham Dr  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Attorney**

Employer (See instructions)  
**Norton Rose Fulbright US LLP**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jane Macon**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**300 Convent St #2700  
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**Bracewell**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Matthew Jones**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**PO Box 12037  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Director of Government Relations**

Employer (See instructions)  
**Francis Energy**

**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 23**

2 FILER NAME

**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/20/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Brij Sandill**

7 Amount of contribution (\$)  
**100.00**

6 Contributor address; City; State; Zip Code  
**15807 Socorro Fls  
Helotes, TX 78023**

8 Principal occupation / Job title (See instructions)  
**Retired**

9 Employer (See instructions)  
**Retired**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Lynn Boyd III**

Amount of contribution (\$)  
**200.00**

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

Principal occupation / Job title (See instructions)  
**Realtor**

Employer (See instructions)  
**Phyllis Browning**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**R. Laurence Macon**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**PO Box 120250  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**The Macon Law Firm**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**John Montford**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**1 Buckingham Ct  
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)  
**President and CEO**

Employer (See instructions)  
**JTM Consulting,LLC**

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		<b>1</b> Total pages Schedule A1: <b>5 of 23</b>
<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/20/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>James McKnight</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>2019 Flint Oak</b> <b>San Antonio, TX 78248</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Partner</b>		<b>9</b> Employer (See instructions) <b>Ortiz McKnight PLLC</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Pat Frost</b> ..... Contributor address; City; State; Zip Code <b>620 Geneseo Rd</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>Cullen/Frost Bankers</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Philip Green</b> ..... Contributor address; City; State; Zip Code <b>157 Cibolo Ridge Trl</b> <b>Fair Oaks Rancg, TX 78015</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Chairman and CEO</b>		Employer (See instructions) <b>Cullen/Frost Bankers</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marty Wender</b> ..... Contributor address; City; State; Zip Code <b>700 E Hildebrand Ave Unit 1401 #1401</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Charles Martin Wender Real Estate</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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.		<b>1</b> Total pages Schedule A1: <b>6 of 23</b>
<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/20/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rene Wender</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>700 E Hildebrand Ave Unit 1401 #1401</b> <b>San Antonio, TX 78212</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Real Estate</b>		<b>9</b> Employer (See instructions) <b>Charles Martin Wender Real Estate</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Caroline McDonald</b> ..... Contributor address; City; State; Zip Code <b>100 NE Loop 410 #1385</b> <b>San Antonio, TX 78216</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Brown &amp; McDonald PLLC</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ken Brown</b> ..... Contributor address; City; State; Zip Code <b>100 NE Loop 410 #1385</b> <b>San Antonio, TX 78216</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Brown &amp; McDonald PLLC</b>
Date <b>7/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ernest Bromley</b> ..... Contributor address; City; State; Zip Code <b>19 Westelm Cir</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Managing Partner</b>		Employer (See instructions) <b>Pescador Public Strategies, LLC</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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 23**

**2** FILER NAME

**Sukh Kaur**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**7/20/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Aimee Bromley**

**7** Amount of contribution (\$)  
**500.00**

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

**8** Principal occupation / Job title (See instructions)  
**Retired**

**9** Employer (See instructions)  
**Retired**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Gurvinder Singh**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**98 Turnberry  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)  
**Retired**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Parvinder Kaur**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**98 Turnberry  
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)  
**Retired**

Date  
**7/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Harry Adams**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**2319 Fountain Way  
San Antonio, TX 78248**

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

Employer (See instructions)  
**McCombs Enterprises**

**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: <b>8 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>7/20/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Charisse Adams</b> ..... 6 Contributor address; City; State; Zip Code <b>2319 Fountain Way</b> <b>San Antonio, TX 78248</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Not applicable</b>		9 Employer (See instructions) <b>Not applicable</b>
Date <b>8/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sherry Lebus</b> ..... Contributor address; City; State; Zip Code <b>239 Pinewood Ln</b> <b>San Antonio, TX 78218</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>8/30/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Magee</b> ..... Contributor address; City; State; Zip Code <b>1201 Avenue B</b> <b>San Antonio, TX 78215</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Private Equity</b>		Employer (See instructions) <b>MLSA Ventures</b>
Date <b>8/30/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bernardo de la Garza</b> ..... Contributor address; City; State; Zip Code <b>130 Terrell Rd</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>President</b>		Employer (See instructions) <b>One Thirty SA</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <b>9 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/30/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Reyna de la Garza</b> ..... 6 Contributor address; City; State; Zip Code <b>130 Terrell Rd</b> <b>San Antonio, TX 78209</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Homemaker</b>		9 Employer (See instructions) <b>NA</b>
Date <b>8/30/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Iarry mendez</b> ..... Contributor address; City; State; Zip Code <b>204 Fawn Dr.</b> <b>Shavano Park, TX 78231</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate Broker</b>		Employer (See instructions) <b>CBRE</b>
Date <b>8/31/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Pamela Shown</b> ..... Contributor address; City; State; Zip Code <b>123 W Kings Hwy</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>8/31/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>William Shown</b> ..... Contributor address; City; State; Zip Code <b>1803 Broadway</b> <b>San Antonio, TX 78215</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Executive</b>		Employer (See instructions) <b>Oxbow Development Group</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <b>10 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/5/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jane Macon</b> ..... 6 Contributor address; City; State; Zip Code <b>300 Convent St #2700</b> <b>San Antonio, TX 78205</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Partner</b>		9 Employer (See instructions) <b>Bracewell</b>
Date <b>9/5/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bracewell PAC</b> ..... Contributor address; City; State; Zip Code <b>7111 Louisiana St #2300</b> <b>Houston, TX 77002</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NAS</b>
Date <b>9/6/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patti Larsen</b> ..... Contributor address; City; State; Zip Code <b>7415 Quail Run Drive</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Patti Larsen Consulting</b>
Date <b>9/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Andi Rodriguez</b> ..... Contributor address; City; State; Zip Code <b>222 East Houston Street</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Urban Planner</b>		Employer (See instructions) <b>Centro</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <b>11 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/12/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Frank Burney</b> ..... 6 Contributor address; City; State; Zip Code <b>112 East Pecan Street</b> <b>San Antonio, TX 78205</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Martin &amp; Drought, P.C.</b>
Date <b>9/12/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jon Wiegand</b> ..... Contributor address; City; State; Zip Code <b>14546 Brook Hollow</b> <b>San Antonio, TX 78232</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate Investor</b>		Employer (See instructions) <b>Alamo Capital Advisors</b>
Date <b>9/14/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Andrew Cohen</b> ..... Contributor address; City; State; Zip Code <b>7373 Broadway St</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Hornberger Fuller Garza &amp; Cohen Inc.</b>
Date <b>9/14/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Henry Gonzalez</b> ..... Contributor address; City; State; Zip Code <b>419 Thelma Drive</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Attorney/Banking</b>		Employer (See instructions) <b>Gonzalez Chiscano Angulo &amp; Kasson, PC and Jefferson Ba</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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 23**

2 FILER NAME

**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/15/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Trey Embrey**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**405 Wiltshire  
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)  
**President & CEO**

9 Employer (See instructions)  
**Embrey**

Date  
**9/15/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Steven Lee**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**120 Austin Highway  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Retired**

Employer (See instructions)  
**Retired**

Date  
**9/15/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Bruce Lee**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**120 Austin Highway  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**NA**

Employer (See instructions)  
**NA**

Date  
**9/17/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Smita Bhakta**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**38 Westerleigh  
San Antonio, TX 78218**

Principal occupation / Job title (See instructions)  
**Lawyer**

Employer (See instructions)  
**Kruger Carson**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**13 of 23**

**2** FILER NAME  
**Sukh Kaur**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**9/18/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Alicia Rachel Holland**

**7** Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**1711 Fawn Crst**  
**San Antonio, TX 78248**

**8** Principal occupation / Job title (See instructions)  
**Public Affairs**

**9** Employer (See instructions)  
**Meta**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Shokare Nakpodia**

Amount of contribution (\$)  
**150.00**

Contributor address; City; State; Zip Code  
**2406 Martin Luther King Drive**  
**San Antonio, TX 78203**

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

Employer (See instructions)  
**Giles Design**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jill Giles**

Amount of contribution (\$)  
**250.00**

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

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

Employer (See instructions)  
**Giles Design**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**JJ Feik**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**727 Elizabeth Road**  
**San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Self employed**

Employer (See instructions)  
**Self employed**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**14 of 23**

2 FILER NAME

**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/18/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Joe Guerrero**

7 Amount of contribution (\$)  
**200.00**

6 Contributor address; City; State; Zip Code  
**1431 North Comal Street  
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)  
**Operations**

9 Employer (See instructions)  
**VMS**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Pete Cortez**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**800 Dolorosa #204  
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)  
**Foodservice**

Employer (See instructions)  
**La Familia Cortez Restaurants**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Caroline Staudt**

Amount of contribution (\$)  
**250.00**

Contributor address; City; State; Zip Code  
**224 Redwood Street  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**COO**

Employer (See instructions)  
**HFM Services**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Madison Smith**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**31 Dierks Road  
Spring Branch, TX 78070**

Principal occupation / Job title (See instructions)  
**Senior Principal**

Employer (See instructions)  
**Overland Partners**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/18/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Riley Robinson</b> ..... 6 Contributor address; City; State; Zip Code <b>1803 S Preas St</b> <b>San Antonio, TX 78210</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Director</b>		9 Employer (See instructions) <b>Artpace</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patti Larsen</b> ..... Contributor address; City; State; Zip Code <b>7415 Quail Run Drive</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Patti Larsen Consulting</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul Basaldua</b> ..... Contributor address; City; State; Zip Code <b>3 Woltwood</b> <b>San Antonio, TX 78248</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>VersaTerra Development</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>R. Laurence Macon</b> ..... Contributor address; City; State; Zip Code <b>PO Box 120250</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>The Macon Law Firm</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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: <b>16 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/18/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Erica LaHood</b> ..... 6 Contributor address; City; State; Zip Code <b>127 Encino Blanco St</b> <b>San Antonio, TX 78232</b>	7 Amount of contribution (\$) <b>200.00</b>
8 Principal occupation / Job title (See instructions) <b>Vice President</b>		9 Employer (See instructions) <b>Santize Tech</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Triath Enterprises LLC</b> ..... Contributor address; City; State; Zip Code <b>3415 Huntwick Ln</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>Marco Barros Management</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dru Van Steenberg</b> ..... Contributor address; City; State; Zip Code <b>PO Box 12555</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>President Elect</b>		Employer (See instructions) <b>Towers at the Majestic</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Esperanza "Hope" Andrade</b> ..... Contributor address; City; State; Zip Code <b>123 Lexington Ave #1804</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Co-Founder &amp; Chief Strategic Advisor</b>		Employer (See instructions) <b>Andrade Van De Putte &amp; Associates</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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:  
**17 of 23**

**2** FILER NAME  
**Sukh Kaur**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**9/18/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Raquel Moreno**

**7** Amount of contribution (\$)  
**250.00**

**6** Contributor address; City; State; Zip Code  
**8803 Arabian King  
Converse, TX 78109**

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

**9** Employer (See instructions)  
**NRN Properties**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Ronald Smeberg**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**2010 W Kings Hwy  
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)  
**Partner**

Employer (See instructions)  
**The Smeberg Law Firm, PLLC**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Francisco Moreno**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**222 Pike Rd  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Agent**

Employer (See instructions)  
**NRN Properties**

Date  
**9/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Johnny Stevens**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**8120 Killarney Ct  
Wichita, KS 67206**

Principal occupation / Job title (See instructions)  
**President**

Employer (See instructions)  
**FJM General, Inc**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>18 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/18/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>David Adelman</b> ..... 6 Contributor address; City; State; Zip Code <b>1221 Broadway St #104</b> <b>San Antonio, TX 78215</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>Owner</b>		9 Employer (See instructions) <b>AREA Real Estate</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>San Antonio Land Fund</b> ..... Contributor address; City; State; Zip Code <b>PO Box 782957</b> <b>Wichita, KS 67278</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NA</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Loop 1604 Group</b> ..... Contributor address; City; State; Zip Code <b>PO Box 782957</b> <b>Wichita, KS 67278</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NA</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Vineyard Shopping Center II LP</b> ..... Contributor address; City; State; Zip Code <b>PO Box 782957</b> <b>Wichita, KS 67278</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NA</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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.		<b>1</b> Total pages Schedule A1: <b>19 of 23</b>
<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/18/2023</b>	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Ortiz</b> ..... <b>6</b> Contributor address; City; State; Zip Code <b>9103 Mellbrook St</b> <b>San Antonio, TX 78230</b>	<b>7</b> Amount of contribution (\$) <b>500.00</b>
<b>8</b> Principal occupation / Job title (See instructions) <b>Partner</b>		<b>9</b> Employer (See instructions) <b>Ortiz McKnight PLLC</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cassandra Ortiz</b> ..... Contributor address; City; State; Zip Code <b>9103 Mellbrook St</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Kassahn &amp; Ortiz Law Firm</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tom Dreiss</b> ..... Contributor address; City; State; Zip Code <b>325 E Sonterra Blvd #210</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Thomas E Driess &amp; Co</b>
Date <b>9/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Annette Dreiss</b> ..... Contributor address; City; State; Zip Code <b>325 E Sonterra Blvd #210</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Real Estate</b>		Employer (See instructions) <b>Thomas E Driess &amp; Co</b>
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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**20 of 23**

2 FILER NAME  
**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/18/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Kimberly McKnight**

7 Amount of contribution (\$)  
**500.00**

6 Contributor address; City; State; Zip Code  
**2019 Flint Oak  
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)  
**Nurse**

9 Employer (See instructions)  
**HCA**

Date  
**9/20/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Michael Guido**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**100 Lyman Dr  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**CEO**

Employer (See instructions)  
**Kinetech Cloud LLC**

Date  
**9/25/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Robert Worth Jr**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**270 Terrell Road  
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)  
**Commercial Real Estate Developer**

Employer (See instructions)  
**Worth & Associates**

Date  
**10/12/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**SABPAC I**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**3625 Paesanos Pkwy  
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)

Employer (See instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
**21 of 23**

**2** FILER NAME  
**Sukh Kaur**

**3** Filer ID (Ethics Commission Filers)

**4** Date  
**10/18/2023**

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Ramon Flores**

**7** Amount of contribution (\$)  
**500.00**

**6** Contributor address; City; State; Zip Code  
**132 E Magnolia Ave**  
**San Antonio, TX 78212**

**8** Principal occupation / Job title (See instructions)  
**real estate investor**

**9** Employer (See instructions)  
**Flores Holdings Inc**

Date  
**10/18/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Kristi Sutterfield**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**18523 Wild Onion**  
**San Antonio, TX 78258**

Principal occupation / Job title (See instructions)  
**Executive Vice President**

Employer (See instructions)  
**Greater San Antonio Builders Association**

Date  
**11/8/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Greg Kowalski**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**PO Box 1361**  
**San Antonio, TX 78205**

Principal occupation / Job title (See instructions)  
**President and CEO**

Employer (See instructions)  
**The RK Group**

Date  
**11/15/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Weiting Chan**

Amount of contribution (\$)  
**500.00**

Contributor address; City; State; Zip Code  
**19418 Cannon Hills Ln**  
**Richmond, TX 77047**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)  
**retired**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>22 of 23</b>
2 FILER NAME <b>Sukh Kaur</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>11/15/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Enrique and Linda Davila</b> ..... 6 Contributor address; City; State; Zip Code <b>215 N Center St #1808</b> <b>San Antonio, TX 78202</b>	7 Amount of contribution (\$) <b>1000.00</b>
8 Principal occupation / Job title (See instructions) <b>Owner</b>		9 Employer (See instructions) <b>Capitol Electric</b>
Date <b>11/15/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Aubra Franklin</b> ..... Contributor address; City; State; Zip Code <b>1502 Greystone Rdg</b> <b>San Antonio, TX 78258</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Founder</b>		Employer (See instructions) <b>Franklin Development</b>
Date <b>11/15/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ryan Wilson</b> ..... Contributor address; City; State; Zip Code <b>93 Sendero Verde</b> <b>San Antonio, TX 78261</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>retired</b>
Date <b>12/8/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>USAA PAC</b> ..... Contributor address; City; State; Zip Code <b>5800 Fredericksburg Rd</b> <b>San Antonio, TX 78288</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions)		Employer (See instructions)
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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:  
**23 of 23**

2 FILER NAME

**Sukh Kaur**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/29/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jerry and Michelle Merck**

7 Amount of contribution (\$)  
**1000.00**

6 Contributor address; City; State; Zip Code  
**5431 Crestway Dr  
San Antonio, TX 78239**

8 Principal occupation / Job title (See instructions)  
**Construction**

9 Employer (See instructions)  
**SACC, Inc**

Date  
**12/30/2023**

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jeffrey Halley**

Amount of contribution (\$)  
**100.00**

Contributor address; City; State; Zip Code  
**342 West Hollywood Ave  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**retired**

Employer (See instructions)  
**retired**

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)

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

<b>1</b> Total pages Schedule F1: <b>1 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)			
<b>4</b> Date <b>7/3/2023</b>	<b>5</b> Payee name <b>Mailchimp</b>					
<b>6</b> Amount (\$) <b>28.25</b>	<b>7</b> Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE ##5000 ATLANTA, GA 30308</b>					
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Email Newsletter</b>			
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table> <tr> <td>Candidate / Officeholder name <b>Sukh Kaur</b></td> <td>Office sought <b>Council District 1</b></td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	Office held
Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	Office held				
Date <b>7/3/2023</b>	Payee name <b>GOOGLE *Domains</b>					
Amount (\$) <b>30.44</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Website Hosting</b>			
	<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 <table> <tr> <td>Candidate / Officeholder name <b>Sukh Kaur</b></td> <td>Office sought <b>Council District 1</b></td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	Office held
Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	Office held				
Date <b>7/3/2023</b>	Payee name <b>Sahar Fawzi</b>					
Amount (\$) <b>480.00</b>	Payee address; City; State; Zip Code <b>14214 Stoddard Drive San Antonio, TX 78232</b>					
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Contract Labor</b>		Description <b>Field Walker</b>			
	<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 <table> <tr> <td>Candidate / Officeholder name <b>Sukh Kaur</b></td> <td>Office sought <b>Council District 1</b></td> <td>Office held</td> </tr> </table>				Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	Office held
Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>	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

<b>1</b> Total pages Schedule F1: <b>2 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/6/2023</b>	<b>5</b> Payee name <b>Jennifer Longoria</b>		
<b>6</b> Amount (\$) <b>1445.35</b>	<b>7</b> Payee address; City; State; Zip Code <b>403 Basswood Dr San Antonio, TX 78213</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Contract Labor</b>		<b>(b)</b> Description <b>Campaign Team</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/7/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>50.90</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/9/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>3 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/10/2023</b>	<b>5</b> Payee name <b>Sandra Hernandez</b>		
<b>6</b> Amount (\$) <b>5127.80</b>	<b>7</b> Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Mailer Printing</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/11/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>21.20</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/15/2023</b>	Payee name <b>AIRBNB</b>		
Amount (\$) <b>1181.82</b>	Payee address; City; State; Zip Code <b>888 BRANNAN ST FL 4 SAN FRANCISCO, CA 94103</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: Travel</b>		Description <b>Travel</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>4 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/17/2023</b>	<b>5</b> Payee name <b>Airtable</b>		
<b>6</b> Amount (\$) <b>89.54</b>	<b>7</b> Payee address; City; State; Zip Code <b>799 MARKET ST FLOOR 8 SAN FRANCISCO, CA 94102</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Office Expense</b>		<b>(b)</b> Description <b>Software</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/21/2023</b>	Payee name <b>American Express</b>		
Amount (\$) <b>95.00</b>	Payee address; City; State; Zip Code <b>PO Box 96001 Los Angeles, CA 96001</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>7/24/2023</b>	Payee name <b>FROST BANK</b>		
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>			

# 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

<b>1</b> Total pages Schedule F1: <b>5 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/25/2023</b>	<b>5</b> Payee name <b>TST* HILL AND VINE 3FREDERICKSBUR TX</b>	
<b>6</b> Amount (\$) <b>164.18</b>	<b>7</b> Payee address; City; State; Zip Code <b>210 SOUTH ADAMS ST FREDERICKSBURG, TX 78624</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	<b>(b)</b> Description <b>Team Meeting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held		
Date <b>7/31/2023</b>	Payee name <b>FROST BANK</b>	
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held		
Date <b>7/31/2023</b>	Payee name <b>GOOGLE *Domains</b>	
Amount (\$) <b>12.79</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Website Hosting</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>6 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/1/2023</b>	<b>5</b> Payee name <b>GOOGLE *Domains</b>	
<b>6</b> Amount (\$) <b>27.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Website Hosting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>8/2/2023</b>	Payee name <b>Mailchimp</b>	
Amount (\$) <b>28.25</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE ##5000 ATLANTA, GA 30308</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Email Newsletter</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>8/6/2023</b>	Payee name <b>Barbaro San Antonio TX</b>	
Amount (\$) <b>32.81</b>	Payee address; City; State; Zip Code <b>2720 MCCULLOUGH AVE SAN ANTONIO, TX 78212</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>Team Meeting</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>

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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

<b>1</b> Total pages Schedule F1: <b>7 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/17/2023</b>	<b>5</b> Payee name <b>Airtable</b>		
<b>6</b> Amount (\$) <b>173.24</b>	<b>7</b> Payee address; City; State; Zip Code <b>799 MARKET ST FLOOR 8 SAN FRANCISCO, CA 94102</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Office Expense</b>		<b>(b)</b> Description <b>Software</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name <b>Sukh Kaur</b>		Office sought <b>Council District 1</b>	Office held
Date <b>8/22/2023</b>	Payee name <b>American Express</b>		
Amount (\$) <b>44.13</b>	Payee address; City; State; Zip Code <b>PO Box 96001 Los Angeles, CA 96001</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b>		Office sought <b>Council District 1</b>	Office held
Date <b>8/30/2023</b>	Payee name <b>GOOGLE *Domains</b>		
Amount (\$) <b>12.79</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Website Hosting</b>
	<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 <b>Sukh Kaur</b>		Office sought <b>Council District 1</b>	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

<b>1</b> Total pages Schedule F1: <b>8 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/30/2023</b>	<b>5</b> Payee name <b>ANEDOT</b>	
<b>6</b> Amount (\$) <b>64.90</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>Contribution Fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held		

  

Date <b>8/31/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>40.60</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Contribution Fee</b>	
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			

  

Date <b>8/31/2023</b>	Payee name <b>FROST BANK</b>		
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Bank Fee</b>	
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>9 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/1/2023</b>	<b>5</b> Payee name <b>GOOGLE *Domains</b>	
<b>6</b> Amount (\$) <b>27.54</b>	<b>7</b> Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Website Hosting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>9/7/2023</b>	Payee name <b>ANEDOT</b>	
Amount (\$) <b>14.60</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>9/10/2023</b>	Payee name <b>IDA Claire</b>	
Amount (\$) <b>61.31</b>	Payee address; City; State; Zip Code <b>7300 JONES MALTSBERGER RD SAN ANTONIO, TX 78209</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>Team Meeting</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>

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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

<b>1</b> Total pages Schedule F1: <b>10 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/13/2023</b>	<b>5</b> Payee name <b>ANEDOT</b>		
<b>6</b> Amount (\$) <b>24.60</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>Contribution Fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			

  

Date <b>9/15/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>85.20</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			

  

Date <b>9/17/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>11 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/17/2023</b>	<b>5</b> Payee name <b>Airtable</b>		
<b>6</b> Amount (\$) <b>158.89</b>	<b>7</b> Payee address; City; State; Zip Code <b>799 MARKET ST FLOOR 8 SAN FRANCISCO, CA 94103</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: Office Expense</b>		<b>(b)</b> Description <b>Software</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>9/19/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>113.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>9/21/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>12 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/21/2023</b>	<b>5</b> Payee name <b>American Express</b>		
<b>6</b> Amount (\$) <b>10.27</b>	<b>7</b> Payee address; City; State; Zip Code <b>PO Box 96001 Los Angeles, CA 96001</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>		<b>(b)</b> Description <b>Bank Fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>9/25/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>9/29/2023</b>	Payee name <b>FROST BANK</b>		
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>13 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/30/2023</b>	<b>5</b> Payee name <b>ANEDOT</b>	
<b>6</b> Amount (\$) <b>480.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>Contribution Fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held		
Date <b>10/2/2023</b>	Payee name <b>GOOGLE *Domains</b>	
Amount (\$) <b>40.32</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Website Hosting</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held		
Date <b>10/19/2023</b>	Payee name <b>ANEDOT</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>14 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/30/2023</b>	<b>5</b> Payee name <b>GOOGLE *Domains</b>	
<b>6</b> Amount (\$) <b>12.79</b>	<b>7</b> Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>Website Hosting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>10/31/2023</b>	Payee name <b>FROST BANK</b>	
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>	Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>
Date <b>11/1/2023</b>	Payee name <b>GOOGLE *Domains</b>	
Amount (\$) <b>26.44</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>Website Hosting</b>
	<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 <b>Sukh Kaur</b>	Office sought <b>Council District 1</b>

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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

<b>1</b> Total pages Schedule F1: <b>15 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/2/2023</b>	<b>5</b> Payee name <b>GOOGLE *Domains</b>		
<b>6</b> Amount (\$) <b>13.38</b>	<b>7</b> Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Website Hosting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>11/10/2023</b>	Payee name <b>Sandra Hernandez</b>		
Amount (\$) <b>710.12</b>	Payee address; City; State; Zip Code <b>8 Burwood Ln San Antonio, TX 78216</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Mailer Printing</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>11/13/2023</b>	Payee name <b>USPS PO 4879640212</b>		
Amount (\$) <b>176.00</b>	Payee address; City; State; Zip Code <b>2400 McCullough Ave San Antonio, TX 78212</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Postage</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>16 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>11/25/2023</b>	<b>5</b> Payee name <b>USPS PO 4879640212</b>		
<b>6</b> Amount (\$) <b>132.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>2400 McCullough Ave San Antonio, TX 78212</b>		
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Postage</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>11/30/2023</b>	Payee name <b>FROST BANK</b>		
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>12/2/2023</b>	Payee name <b>GOOGLE *Domains</b>		
Amount (\$) <b>12.79</b>	Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Website Hosting</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> 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

<b>1</b> Total pages Schedule F1: <b>17 of 17</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/4/2023</b>	<b>5</b> Payee name <b>GOOGLE *Domains</b>		
<b>6</b> Amount (\$) <b>26.41</b>	<b>7</b> Payee address; City; State; Zip Code <b>1600 Amphitheatre Parkway Mountain View, CA 94043</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>Website Hosting</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>12/29/2023</b>	Payee name <b>FROST BANK</b>		
Amount (\$) <b>5.00</b>	Payee address; City; State; Zip Code <b>111 W Houston St ##100 San Antonio, TX 78205</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Bank Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			
Date <b>12/30/2023</b>	Payee name <b>ANEDOT</b>		
Amount (\$) <b>44.60</b>	Payee address; City; State; Zip Code <b>1340 Poydras Street ##770 New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Fees</b>		Description <b>Contribution Fee</b>
	<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 <b>Sukh Kaur</b> Office sought <b>Council District 1</b> Office held			

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# 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

<b>1</b> Total pages Schedule F2: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)				
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>				
<b>5</b> Date	<b>6</b> Payee name					
<b>7</b> Amount (\$)	<b>8</b> Payee address;                      City;      State;      Zip Code					
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political					
<b>10</b> PURPOSE OF EXPENDITURE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;"> <b>(a)</b> Category (See categories listed at the top of this schedule)                 </td> <td style="width: 40%; vertical-align: top;"> <b>(b)</b> Description                 </td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> <b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T                      <input type="checkbox"/> Check if Austin, TX, officeholder living expense                 </td> </tr> </table>		<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description					
<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense						
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought</td> <td style="width: 33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	
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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;">Category (See categories listed at the top of this schedule)</td> <td style="width: 40%; vertical-align: top;">Description</td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T                      <input type="checkbox"/> Check if Austin, TX, officeholder living expense                 </td> </tr> </table>		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	
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						
<table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought</td> <td style="width: 33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	
Candidate / Officeholder name	Office sought	Office held				

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# 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

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

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

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

<b>11</b> 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
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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

<b>1</b> Total pages Schedule G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee Name	
<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)	
	<b>(b)</b> Description	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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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# 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

<b>1</b> Total pages Schedule H: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Sukh Kaur</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Business name	
<b>6</b> Amount (\$)	<b>7</b> Business address;                      City;        State;        Zip Code	
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule)	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> 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	
<b>PURPOSE OF EXPENDITURE</b>	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	
<b>PURPOSE OF EXPENDITURE</b>	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.

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

**9/21/2023**

5 Name of person from whom amount is received

**William Varney**

8 Amount (\$)

**450.00**

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

**137 E Woodlawn  
San Antonio, TX 78212**

7 Purpose for which amount is received

☒ Check if political contribution returned to filer

Date

**12/31/2023**

Name of person from whom amount is received

**R. Laurence Macon**

Amount (\$)

**500.00**

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

**PO Box 120250  
San Antonio, TX 78212**

Purpose for which amount is received

**Refunded contribution over \$500 limit**

☐ Check if political contribution returned to filer

Date

**12/31/2023**

Name of person from whom amount is received

**Jane Macon**

Amount (\$)

**500.00**

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

**300 Convent St #2700  
San Antonio, TX 78205**

Purpose for which amount is received

**Refunded contribution over \$500 limit**

☐ 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

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# 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: <b>1 of 1</b>
2 FILER NAME <b>Sukh Kaur</b>		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)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# 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