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

OFFICE USE ONLY

Date Received

RECEIVED 4/28/23 SF

Date Hand-delivered or Date Postmarked

Receipt # Amount $

Date Processed

Date Imaged

AP 11:05AM

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: MR. FIRST: KHALID MI:
NICKNAME: LAST: ISHAQ SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ Change of Address
ADDRESS / PO BOX: 6016 TOLEDO ST APT / SUITE #: CITY: PLANO STATE: TX ZIP CODE: 75094

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (972) PHONE NUMBER: 836-6016 EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: MR. FIRST: GHULAM MI:
NICKNAME: LAST: WARRIACH SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE): 565 WATER OAK DR. APT / SUITE #: CITY: PLANO STATE: TX ZIP CODE: 75025

8 CAMPAIGN TREASURER PHONE
AREA CODE: (469) PHONE NUMBER: 569-8226 EXTENSION:

9 REPORT TYPE
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (Officeholder Only)
☐ July 15 ☑ 8th day before election ☐ Exceeded Modified Reporting Limit ☐ Final Report Attach C/OH_FR

10 PERIOD COVERED
Month Day Year: 4 / 5 / 2023 THROUGH Month Day Year: 4 / 27 / 2023

11 ELECTION
ELECTION DATE: Month Day Year: 5 / 6 / 2023
ELECTION TYPE: ☐ Primary ☐ Runoff ☐ Other Description ☑ General ☐ Special

12 OFFICE
OFFICE HELD (if any): —

13 OFFICE SOUGHT (if known): PLANO ISD TRUSTEE PLACE 5

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. *THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT.* CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

☐ Additional Pages

COMMITTEE TYPE: ☐ GENERAL ☐ SPECIFIC

COMMITTEE NAME: KHALID ISHAQ FOR PLANO
COMMITTEE ADDRESS: 6016 TOLEDO ST, PLANO TX 75094
COMMITTEE CAMPAIGN TREASURER NAME: GHULAM WARRIACH
COMMITTEE CAMPAIGN TREASURER ADDRESS: 525 WATER OAK DR. PLANO TX 75025

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME			16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	$ 16,175.00
	2	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 16,175.00
EXPENDITURE TOTALS	3	TOTAL UNITEMIZED POLITICAL EXPENDITURE	$ 27,005.41
	4	**TOTAL POLITICAL EXPENDITURES**	$ 27,005.41
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 4527.71
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 5000.00

SIGNATURE 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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, _____, 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

OR

(2) **Unsworn Declaration**

My name is KHALID ISHAQ, and my date of birth is [redacted]

My address is 6016 TOLEDO ST, PLANO, TX, 75094, COLLIN, USA
(street) (city) (state) (zip code) (country)

Executed in COLLIN County, State of TEXAS, on the 27 day of APRIL (month), 2023 (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME	20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1	☑	SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS	$ 16,175.00
2	☑	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 2,000.00
3	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	$
4	☑	SCHEDULE E LOANS	$ 5,000.00
5	☑	SCHEDULE F1 POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$ 27,005.41
6	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$
7	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	$
8	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$
9	☐	SCHEDULE G POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	$
10	☐	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
11	☐	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	$
12	☐	SCHEDULE K INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 14

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

---

4 Date: 1/6

5 Full name of contributor: ☐ out-of-state PAC (ID#:_____) Anwaar Qureshi

6 Contributor address; City; State; Zip Code: 1752 Prince William Ln Frisco TX 75034

7 Amount of contribution ($): 1,000

8 Principal occupation / Job title (See Instructions): Business Consultant

9 Employer (See Instructions): AIM Trade Emporium

Date: 1/6

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

Contributor address; City; State; Zip Code: 211 GLEN RIDGE DR MURPHY TX 75094

Amount of contribution ($): 500

Principal occupation / Job title (See Instructions): Architect

Employer (See Instructions): Cisco

Date: 1/6

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

Contributor address; City; State; Zip Code:

Amount of contribution ($): 500

Principal occupation / Job title (See Instructions): Sr. Solutions Architect

Employer (See Instructions): ConvergeOne

Date: 1/7

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

Contributor address; City; State; Zip Code: 637 Memorial Hill Way Murphy TX 75094

Amount of contribution ($): 25

Principal occupation / Job title (See Instructions): DBA

Employer (See Instructions): Bank of America

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

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/7	Sirajuddin Jafarullah Khan	25

8 Principal occupation / Job title (See Instructions): Senior Data Engineer

9 Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/8	Shaik A Dawood	25

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/8	Mohammed Shahul Hameed	25

Principal occupation / Job title (See Instructions):

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/8	Feiroz Tiruchengodu Hameed Khan	25

Principal occupation / Job title (See Instructions): New Products & Innovations Manag

Employer (See Instructions): R&D

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/6	Ali Khaleth Quraizy Mohamed Shahul Hameed	6000 Preston Rd 214 Plano TX 75024	10

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/6	Nainar Mohamed Shahul Hameed	2 Sutton Dr Apt L.10 Matawan NJ 07747	25

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Vice President	AI / ML

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Mustajab Syed	1230 Hasina Dr Irving TX 75061	25

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
IT Analyst	Kingspan

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Shahed Altaf	~~1230~~ 4740 14th St T326 Plano TX 75074	100

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
President	Lone Star Green Homes

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/9	Mudassir Alam	1208 Bravura Dr Plano TX 75074	100

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Senior Engineering Leader	Amazon

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Muhammad AKram	1321 Gibralter St Plano TX 75024	500

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self Employed	

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Iftekhar Siddiqui	130 Post Crest Dr Murphy TX 75094	125

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
IT	Amdocs

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Ekram Ul Haq	1304 Velocity Dr Plano TX 75074	50

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
IT Management	Merril

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/9	Abdul Khan 13757 North Stemmons Frwy Farmers Branch TX 75234	1000

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Unemployed	

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Altaf Hardi	250

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Golam Sarwer	100

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Kashif Saeed 1300 Velour Dr Plano TX 75074	100

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Director of MS Business Analytics	MS Information Systems

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: KHALID ISTIAQ

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#:)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/9	Sarfur Khan	1309 Broadshaw Dr Plano TX 75074	1000

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Commercial Licensing Manager	Johnson Matthey

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Abdul Kalak Abdul Kalam	429 Glen Ridge Dr Murphy TX 75094	500

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Wajahath Qurashi	Plano 75074	200

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Manager	KPMG

Date	Full name of contributor / out-of-state PAC (ID#:)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Shoeb Mohammed	4566 Nellore St Plano TX 75074	250

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
[redacted] Physician	[redacted] TX Health Plano

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: KHAC ID 15117

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:_____)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/9	Sumya Hussaini	4554 Nellore St Plano TX 75074	500
8 Principal occupation / Job title (See Instructions):		9 Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/9	Muneer Syed	606 Forest Hill Dr Murphy TX 75094	500
Principal occupation / Job title (See Instructions): Senior Software Engineer		Employer (See Instructions): Walmart	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/10	Syed Z Mehdi	Charlotte North Carolina	50
Principal occupation / Job title (See Instructions): Medical Graduate		Employer (See Instructions):	

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Contributor address; City; State; Zip Code	Amount of contribution ($)
4/10	Imtinan Elahi		500
Principal occupation / Job title (See Instructions): Principal Design Engineer		Employer (See Instructions): NVIDIA	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

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1 Total pages Schedule A1: 11

2 FILER NAME: Khalid Ishaq

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/18/23	Yavuz Orta	$100/00
	8 Principal occupation / Job title (See Instructions): Head of Market Operations	9 Employer (See Instructions): Nokia Enterprise
4/16/23	Mujeeb Kazi	$100/00
	Principal occupation / Job title (See Instructions): CEO	Employer (See Instructions): Austinssi, LLC
4/12/23	Sikkandar Natharsahib Irving, TX 75062	$100/00
	Principal occupation / Job title (See Instructions): HR Tech. Associate Director	Employer (See Instructions): The Depository Trust & Clearing Corporation
4/12/23	Abdus Sami Mohammed	$150/00
	Principal occupation / Job title (See Instructions): Patient Care Administrator	Employer (See Instructions): MDlab TX

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: Khalid Ishaq

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
4/20/23	Asad Rahman	$300/00	VP & Assistant General Counsel	JP Morgan
4/20/23	Hamzah Khalaf Helotes, TX 78023	$500/00	Self employeed	Self - employeed
4/19/23	Matt Rostami Plano, TX 75025	$3,000/00	Eye Surgeon	Lone Star Eye Specialists
4/17/23	Yusa Darby	$5/00		

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11

2 FILER NAME: Khalid Ishaq

3 Filer ID (Ethics Commission Filers):

4 Date	5 Full name of contributor / ☐ out-of-state PAC (ID#:_____) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)
4/11/23	Aboobeder Mohamed Hassan	$500/00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Doctor	

Date	Full name of contributor / ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/13/23	Wasiq A. Zaidi Arlington, TX 76016	$500/00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/27/23	Sagheer Ud Din	$200/00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

Date	Full name of contributor / ☐ out-of-state PAC (ID#:_____) / Contributor address; City; State; Zip Code	Amount of contribution ($)
4/27/23	Iftikhar Saeed	$300/00

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Founder	SonoStat Imaging

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 11
2 FILER NAME Khalid Ishaq		3 Filer ID (Ethics Commission Filers)
4 Date 4/27/23	5 Full name of contributor ☐ out-of-state PAC (ID#:) Dawood Nasir 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($) $500/00
8 Principal occupation / Job title (See Instructions) MD	9 Employer (See Instructions) UT Southwestern Medical Center	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A2: 1
2 FILER NAME: KHALID ISHAQ	3 Filer ID (Ethics Commission Filers):
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	$ 2000

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	8 Amount of Contribution $	9 In-kind contribution description
	DR. AMER QURESHI 5733 NORTHBROOK DR. PLANO TX 75093	2000 ☐ Check if travel outside of Texas. Complete Schedule T	FUND RAISING EVENT FOOD + ENTERTAINMENT

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions): MEDICAL DOCTOR	11 Employer (FOR NON-JUDICIAL) (See Instructions): ASAP PAIN & SPINE CENTER
12 Contributor's principal occupation (FOR JUDICIAL): ~~MD~~	13 Contributor's job title (FOR JUDICIAL) (See Instructions): ~~MD~~
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 ☐ out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of Contribution $	In-kind contribution description
		☐ 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.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date: 4/5/2023

5 Payee name: CONSTANT CONTACT

6 Amount ($): 10.66

7 Payee address: 1601 TRAPELO RD City: WALTHAM State: TX Zip Code: 02451

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): FEE

(b) Description: FEE FOR EMAIL PLATFORM

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date:

Payee name: KLEEPERS PRESS

Amount ($): 987.25

Payee address: 1905 ALPHA DR. #170 City: ROCKWALL State: TX Zip Code: 75087

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): PRINTING EXPENSE

Description: PRINT YARD SIGNS & ROAD SIGNS.

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

Date: 4/13

Payee name: UTD PSA

Amount ($):

Payee address: 800 W CAMPBELL City: RICHARDSON State: TX Zip Code: 75080

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): EVENT EXPENSE

Description: PSA EVENT ON UTD CAMPUS BOOTH

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: — Office sought: — Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date: 11/5/2023

5 Payee name: INGENIOUS PASSION INC

6 Amount (S): 2020.00

7 Payee address: 701 LEGACY DR #1128 City: PLANO State: TX Zip Code: 75023

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): PRINTING

(b) Description: CARDS, BANNERS, MAGNETS POSH CARDS

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 11/16/2023

Payee name: INGENIOUS PASSION INC

Amount (S): 11,758.00

Payee address: 701 LEGACY DR. #1128 City: PLANO State: TX Zip Code: 75023

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): PRINTING EXPENSE + MAIL

Description: PRINT & MAIL CARDS

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 11/20/2023

Payee name: INGENIOUS PASSION INC

Amount (S): 8141.83

Payee address: 701 LEGACY DR. # 1128 City: PLANO State: TX Zip Code: 75023

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): PRINTING EXP + MAIL

Description: PRINT & MAIL CARDS

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: ICHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date: 4/20/2023

5 Payee name: INGENIOUS PASSIONS INC.

6 Amount ($): 2000

7 Payee address: 701 LEGACY DR #1128 | City: PLANO | State: TX | Zip Code: 75023

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): PRINTING EXPENSE

(b) Description: PRINTING CARD, BANNERS & MAILERS

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 4/25/2023

Payee name: HOME DEPOT

Amount ($): 173.30

Payee address: 1224 N CENTRAL EXPY | City: PLANO | State: TX | Zip Code: 75074

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): OTHER

Description: MATERIAL FOR BANNERS

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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Date: 4/27/2023

Payee name: DOLLAR TREE

Amount ($): 6.77

Payee address: 2743 W 15th ST | City: PLANO | State: TX | Zip Code: 75075

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): EVENT EXPENSE

Description: MATERIAL FOR MEET & GREET

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX. officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/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)
Campaign Treasurer			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date: 4/10

5 Payee name: META

6 Amount ($): $75

7 Payee address: 1 HACKER WAY City: MENLO PARK State: CA Zip Code: 94025

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

(b) Description: AD

(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

Date: 4/14

Payee name: META

Amount ($): $125

Payee address: (A See above) 1 HACKER WAY City: MENLO PARK State: CA Zip Code: 94025

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

Description: AD

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

Date: 4/20

Payee name: META

Amount ($): $250

Payee address: (A See above) 1 HACKER WAY City: MENLO PARK State: CA Zip Code: 94025

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

Description: AD

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: | Office sought: | Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filer(s)):

4 Date: 4/20

5 Payee name: META

6 Amount ($): $175

7 Payee address; City: MENLO PARK State: CA Zip Code: 94025 — 1 HACKER WAY

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

(b) Description: Ad

(c) ☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: Office sought: Office held:

Date: 4/24

Payee name: META

Amount ($): $250

Payee address; City: State: Zip Code: (See above) 1 HACKER WAY MENLO PARK CA 94025

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

Description: Ad

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: Office sought: Office held:

Date: 4/16

Payee name: GoDaddy

Amount ($): $11.17

Payee address; City: State: Zip Code: 2155 E GoDaddy Way TEMPE AZ 85284

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): FEE

Description: WEBSITE DOMAIN

☐ Check if travel outside of Texas. Complete Schedule T ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT include this page in the report.**

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6

2 FILER NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

4 Date: 4/21

5 Payee name: Google

6 Amount (S): $254

7 Payee address: 1600 AMPHITHEATRE PARKWAY City: MOUNTAIN VIEW State: CA Zip Code: 94043

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

(b) Description: Ad Exercise

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: ____ Office sought: ____ Office held: ____

Date: 4/21

Payee name: GOOGLE

Amount (S): ~~$500~~ $500

Payee address: (★ See above) 1600 AMPHITHEATRE PARKWAL City: MOUNTAIN VIEW State: CA Zip Code: 94043

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): ADVERTISING EXPENSES

Description: Ad

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: ____ Office sought: ____ Office held: ____

Date: 4/24

Payee name: WIX

Amount (S): $24.89

Payee address: 500 TERRY A FRANCOIS BLVD 6TH FLOOR City: SAN FRANCISCO State: CA Zip Code: 94158

PURPOSE OF EXPENDITURE

Category (See Categories listed at the top of this schedule): FEE

Description: WEBSITE FEE

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name: ____ Office sought: ____ Office held: ____

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS

SCHEDULE E

If the requested information is not applicable, **DO NOT include this page in the report.**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: 1

NAME: KHALID ISHAQ

3 Filer ID (Ethics Commission Filers):

TOTAL OF UNITEMIZED LOANS: $ 5000

	7 Name of lender / ☐ out-of-state PAC (ID#)	8 Lender address; City; State; Zip Code	9 Loan Amount ($)	10 Interest rate	11 Maturity date
1	2/1/2023 KHALID ISHAQ	6016 TOLEDO ST PLANO TX 75094	5000	0	5/7/2023

	12 Occupation / Job title (See Instructions)	13 Employer (See Instructions)
	SOFTWARE CONSULTANT	IT BEST TECH LLC

	14 Description of Collateral	15
✓	NONE	☑ Check if personal funds were deposited into political account (See Instructions)

	17 Name of guarantor	18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed ($)
GUARANTOR INFORMATION	N/A		
If applicable	N/A		

	20 Occupation (See Instructions)	21 Employer (See Instructions)
	—	—

	Name of lender / ☐ out of state PAC (ID#)	Lender address; City; State; Zip Code	Loan Amount ($)	Interest rate	Maturity date
2					

	Occupation / Job title (See Instructions)	Employer (See Instructions)

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

	Name of guarantor	Guarantor address; City; State; Zip Code	Amount Guaranteed ($)
GUARANTOR INFORMATION			
If applicable			

	Occupation (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL SHEETS IF NECESSARY