CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 11 MS / MRS / MR 3 CANDIDATE / MI OFFICE USE ONLY **OFFICEHOLDER** Mr Suresh В NAME NICKNAME LAST SUFFIX 7115125 Manduva 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **OFFICEHOLDER** 11871 Barrymore Dr, Frisco, TX 75035 MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION OFFICEHOLDER (469)777-8066 PHONE Receipt # MS / MRS / MR 6 CAMPAIGN FIRST MI **TREASURER** Timothy Η.... Date Processes NAME NICKNAME LAST SUFFIX Date Imaged Tim Nelson STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CAMPAIGN CITY; STATE; **TREASURER** 6624 Waverly Ln. Frisco, TX 75035 ADDRESS (Residence or Business) AREA CODE 8 CAMPAIGN PHONE NUMBER EXTENSION **TREASURER** PHONE (972 898-8461 9 REPORT TYPE January 15 30th day before election 15th day after campaign Runoff treasurer appointment (Officeholder Only) Exceeded Modified 12 July 15 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year Month Day Year

COVERED	4	/ 24 / 25	THROUGH	6 / 30 /	25
11 ELECTION	Month Day 5 / 3	Year Primar	Runoff	Other Description	
2 OFFICE	Frisco ISD Bo	oard of Trustees, P	VICTOR (1997)	OUGHT (if known)	9,000,000
4 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITUR	ES MAY HAVE BEEN MADE W	EXPENDITURES MADE BY POLITICAL VITHOUT THE CANDIDATE'S OR OFFICE RMATION ONLY IF THEY RECEIVE NOTICE	EHOLDER'S KNOWLEDGE OR
00	COMMITTEE TYPE	COMMITTEE NAME			
Additional Pages	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN T	REASURER ADDRESS		
		GO ТС	PAGE 2		
orms provided by Texas E	thics Commission	www.eth	cs.state.tx.us		Revised 1/1/2025

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Suresh Manduva		16 Filer ID (E	thics Commission Filers)	
17 CONTRIBUTION TOTALS	 TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 	\$	0.00	
	 TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 	\$	1,450.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$	0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$	5,012.53	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAS OF REPORTING PERIOD	ST DAY \$	1,545.00	
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	F THE \$	0.00	
	wear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code.	e and correct a	nd includes all information	
	Sureshi	Mandu	a	
TATE OF THE PROPERTY OF THE PR	Signature of Ca	andidate or Offi	coholder	
mmm,	Hijir.	indidate of Office	cerioidei	
WILL E A	R C III			
WILE COM	54/11/2			
S. A. XARY P.	(8) V [
₹2/0 A	Places complete either ention below			
= Z : < SA	Please complete either option below	V.:		
E : 9	/ ' ₆			
= : 7/F 05	√€6/			
1313	1424.7			
THE TO SEE	E-20 1111			
(1) Affidavit	Southing.			
· · · · · · · · · · · · · · · · · · ·	ine.			
Please complete either option below:				
NOTARY STAMP/SEAL				
HOTAIN STAMP / SEAL		1		
Sworn to and subscribed	before me by Swesh Handwa this the	15th day	of July	
~~		- to pool		
20, to certify	which, witness my hand and seal of office.	\$101.		
(mume)	Actions Michelle Arellano	NUTA	M	
Signature of officer administe	ring oath Printed name of officer administering oath	Title o	of officer administering oath	
	OR			
(2) Harrison Declaration				
(2) Unsworn Declaration	on			
My name is	, and my date of birth is	<u> </u>	<u> </u>	
My address is				
	(street) (city) (s	state) (zip co	de) (country)	
Executed in	, , ,		, (oodiniy)	
Executed III	County, State of , on the day of	, 20, (1)	year)	
		26	30. M	
	Signature of Candid	date/Officeholde	r (Declarant)	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

	20 Filer ID (Ethics Con	
Sı	uresh Manduva	
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	s
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	s 1,450.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	s
4.	SCHEDULE E: LOANS	s
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$ 5,012.53
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	s
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 FUN	NDS \$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH \$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS \$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED \$

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	1 Total pages Schedule A1: 2		
2 FILER NAME Suresh Ma	nduva		3 Filer ID (Ethics Commission Filers)	
4 Date 04/25/2025	5 Full name of contributor out-of-state PAR Sridhar Polisetti	C (ID#:)	7 Amount of contribution (\$)	
04/25/2025	6 Contributor address; City: 2397 Flat Creek Rd, Frisc	State: Zip Code	100.00	
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)	
Date	Full name of contributor out-of-state PAG Gopinath Thippareddy	C (ID#:)	Amount of contribution (\$)	
04/29/2025	Contributor address; City: 4617 Coit Rd, Frisco, TX	State; Zip Code X 75035	400.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
Date	72721 Pr 40 25727775000	C (ID#:)	Amount of contribution (\$)	
05/05/2025	Hyperbeyond LLC Contributor address; City;	State; Zip Code	50.00	
	10409 Bartlett Dr, Frisco	, TX 75035		
Principal occup	eation / Job title (See Instructions)	Employer (See Instruct	lions)	
Date	Full name of contributor out-of-state PAG	C (ID#:)	Amount of contribution (\$)	
05/05/2025	Contributor address; City;	State; Zip Code	500.00	
Principal occup	5341 N MacArthur Blvd, Irv	Employer (See Instruct	iions)	
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 reques	ted information is not applicable, DO NOT	include this page in the	report.
The	Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 2
2 FILER NAME Suresh Mai	nduva		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor out-of-state Rene Sample - EFT Credit (refund)	AC (ID#:)	7 Amount of contribution (\$)
05/01/2025	6 Contributor address; City: 1378 Trailview, Frisco, T	State; Zip Code X 75034	400.00
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-state P	AC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state P	AC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state P	AC (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	tions)
	ATTACH ADDITIONAL COPIES		
	If contributor is out-of-state PAC, please see Ins	truction quide for additional r	enorting requirements

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)

Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Suresh Manduva 4 Date 5 Payee name 04/25/2025 I-360.com 6 Amount (\$) 7 Payee address; City; State; Zip Code 750.00 2300 Clarendon Blve, Ste 800, Arlington, VA 22201 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Other Voter Data OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Pavee name Date 05/16/2025 Great Plains Bank Amount (\$) Payee address; City; State; Zip Code 30.00 7000 Preston Rd, Frisco, TX 75034 Category (See Categories listed at the top of this schedule) Description PURPOSE Fees Bank Fees OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 05/01/2025 Facebook Amount (\$) Payee address; City; State: Zip Code 1 Hacker Way, Menlo Park, CA 94025 68.05 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Social Media Marketing EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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)

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	·_ · · · · · · · · · · · · · · · · · ·	Vages/Contract Labor	Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 05/02/2025	5 Payee name Micropix Media LLC		1
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
440.94	2521 Brown Blvd, Arlington, TX 7600	6	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Printing Expense	Yard Signs	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
05/02/2025	Clicksend		
Amount (\$)	Payee address;	City;	State; Zip Code
100.00	2420 17th St, Denver, CO 80202		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Other	Voter Data	
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
05/05/2025	Clicksend		
Amount (\$)	Payee address;	City;	State; Zip Code
100.00	2420 17th St, Denver, CO 80202		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Other	Voter data	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

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 (only a state on year listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to describe the committee of the	Vages/Contract Labor complete this form.	Other (enter a category	not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Suresh Manduva		3 Filer ID (Ethics (Commission Filers)	
4 Date 05/05/2025	5 Payee name Clicksend		L		
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
200.00	2420 17th St, Denver, CO 80202				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Other	Voter Data			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living ex	rpense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	0	ffice held	
Date	Payee name				
05/05/2025	SAMS CLUB				
Amount (\$)	Payee address;	City;	State;	Zip Code	
53.84	8621 Ohio Dr, PLANO, TX 75024				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Paper Products/Beverages	Watch Party -	Supplies & Be	verages	
	Check if travel outside of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	0	ffice held	
Date	Payee name				
05/06/2025	BAWARCHI Frisco				
Amount (\$)	Payee address;	City;	State;	Zip Code	
270.62	8949 Coit Rd, Frisco, TX 75035				
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Food	Watch Party -	Catering		
1	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, afficeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	C	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED		

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)

Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Suresh Manduva 4 Date 5 Payee name 05/07/2025 Micropix Media LLC 6 Amount (\$) 7 Payee address; City; State; Zip Code 710.39 2521 Brown Blvd, Arlington, TX 76006 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE Printing Expense T-Shirts OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 05/12/2025 Fred Lusk Amount (\$) Payee address; City; State; Zip Code 362.55 9912 Mallory Dr, Frisco, TX 75035 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Signs removal OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2025 Richwoods Academy Amount (\$) Payee address; City; State: Zip Code 4633 Coit Rd, Frisco, TX 75035 300.00 Category (See Categories listed at the top of this schedule) Description PURPOSE Event Expense Venue Rental **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Exponso
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 (entry a category not listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
06/17/2025	Great Plains Bank		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
30.00	7000 Preston Rd, Frisco TX 75034		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Bank Fees	
	(c) Check if travel outside of Texas. Complete Schedule T.		V-2-1000
O Complete ONLY if disease	Candidate / Officeholder name		n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF		Office sought	Office held
Date	Payee name		
05/14/2025	Simply Spice Caterers		
Amount (\$)	Payee address;	City;	State; Zip Code
250.00	2429 Preston Rd, Suite 300, Frisco,	TX 75034	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Kickoff Event Catering Check if Austin, TX, officeholder living expenses.			Catering
			n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	7	
05/15/2025	Radio Surabhi		
Amount (\$)	Payee address;	City;	State; Zip Code
500.00	2600 MacArthur Blvd, Ste 204, Lewis	ville, TX	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Marketing	Radio 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

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 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/Guiters extension and listed above.

Travel Out Of District Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Suresh Manduva 4 Date 5 Payee name 06/02/2025 Facebook 6 Amount (\$) 7 Payee address; City; State: Zip Code 46.14 1 Hacker Way, Menlo Park, CA 94025 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Marketing Social Media Ads OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name Elite Live Productions - Praveen Y 06/12/2025 Amount (\$) Payee address: City: State: Zip Code 500.00 Lewisville, TX 75056 Category (See Categories listed at the top of this schedule) Description PURPOSE Event Expense Video & Audio Services OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/12/2025 Bhaskar Thatraju Amount (\$) Payee address; City; State: Zip Code 1604 Spoonbill Dr, Little Elm, TX 75068 300.00 Category (See Categories listed at the top of this schedule) Description **PURPOSE** Event Expense Photography EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED