

FORM C/OH
COVER SHEET PG 1

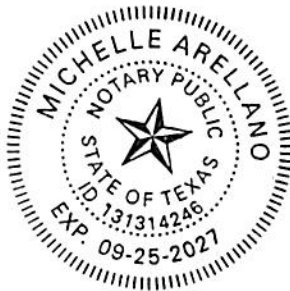
Revised 1/1/2025

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Suresh Manduva		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,159.83
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,889.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,982.97
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

18 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.



Suresh Manduva

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Suresh Manduva this the 25th day of April

20 25, to certify which, witness my hand and seal of office.

Michelle Arellano

Michelle Arellano

Notary

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____

My address is _____
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____
(month) (year)

Signature of Candidate/Officeholder (Declarant)

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

19 FILER NAME Suresh Manduva		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,159.83
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 8,889.22
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: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Chinasatyam Veernapu 6 Contributor address; City; State; Zip Code 4424 Vista Terrace Dr. Frisco, TX 75036	7 Amount of contribution (\$) 260.73
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/06/2025	Full name of contributor out-of-state PAC (ID#: _____) Suresh Manukonda Contributor address; City; State; Zip Code 3427 Singer Ln. Frisco, TX 75034	Amount of contribution (\$) 208.65
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2025	Full name of contributor out-of-state PAC (ID#: _____) Ranga Manthana Contributor address; City; State; Zip Code 10155 Promontory Dr. Frisco, TX 75035	Amount of contribution (\$) 208.65
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/15/2025	Full name of contributor out-of-state PAC (ID#: _____) Vishnu Kalidindi Contributor address; City; State; Zip Code 5963 Dripping Springs Dr. Frisco, TX 75034	Amount of contribution (\$) 208.65
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.

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Lakshmi Koya 6 Contributor address; City; State; Zip Code 9733 Fandango Ln. Plano, TX 75035	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/22/2025	Full name of contributor out-of-state PAC (ID#: _____) Madhu Maredu Contributor address; City; State; Zip Code 6577 Jamestown Rd. Frisco, TX 75035	Amount of contribution (\$) 521.15
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/26/2025	Full name of contributor out-of-state PAC (ID#: _____) CHANDRA SEKHAR KAJ Contributor address; City; State; Zip Code 2012 Torin St, Lewisville, TX 75056	Amount of contribution (\$) 750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/26/2025	Full name of contributor out-of-state PAC (ID#: _____) SARATHBABU ALLAVERN Contributor address; City; State; Zip Code 10411 Wintergreen Dr, Frisco, TX 75035	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 03/26/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Pallavi Pallavolu 6 Contributor address; City; State; Zip Code 9905 Belfort Dr, Frisco, TX 75035	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2025	Full name of contributor out-of-state PAC (ID#: _____) SAMBA KARNATI Contributor address; City; State; Zip Code 2213 Kings Forest Ln., Flower Mound, TX 75028	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2025	Full name of contributor out-of-state PAC (ID#: _____) VINOD BAJJURI Contributor address; City; State; Zip Code 12273, Diamond Creek Dr., Frisco, TX 75035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2025	Full name of contributor out-of-state PAC (ID#: _____) SHASHANK PENMETSU Contributor address; City; State; Zip Code 2624 Creekside Pl., Flower Mound, TX 75022	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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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: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 04/07/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Sunitha Tripuram 6 Contributor address; City; State; Zip Code 2644 Hammock Lake Dr, Little Elm, TX 75068	7 Amount of contribution (\$) 501.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/31/2025	Full name of contributor out-of-state PAC (ID#: _____) AMMIRAJU MULAKALA Contributor address; City; State; Zip Code 14153 Stars Rd., Frisco, TX 75035	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2025	Full name of contributor out-of-state PAC (ID#: _____) JAGADEESH MOSALI Contributor address; City; State; Zip Code 12275 Fallcreek Dr., Frisco, TX 75035	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/02/2025	Full name of contributor out-of-state PAC (ID#: _____) MAHESWARA KASA Contributor address; City; State; Zip Code 12972 Sherbrooke Dr., Frisco, TX 75035	Amount of contribution (\$) 500.00
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.		

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: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 04/03/2025	5 Full name of contributor out-of-state PAC (ID#: _____) VENKATARAMA JONNAL 6 Contributor address; City; State; Zip Code 1024 Cedar Valley Dr., Irving, TX 75063	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/17/2025	Full name of contributor out-of-state PAC (ID#: _____) VENKATESH BALINA Contributor address; City; State; Zip Code 24806 Lenah Crossing Dr, Aldie, VA 20205	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/18/2025	Full name of contributor out-of-state PAC (ID#: _____) CHIRANJEEVI M INDU Contributor address; City; State; Zip Code 10067 Teal Hollow Dr, Frisco, TX 75035	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/22/2025	Full name of contributor out-of-state PAC (ID#: _____) SUBBARAO PONNURU Contributor address; City; State; Zip Code 3401 Bentley Ct, Hightland Village, TX 75077	Amount of contribution (\$) 251.00
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.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)
4 Date 04/09/2025	5 Full name of contributor out-of-state PAC (ID#: _____) Lakshmana Kuruchelapati 6 Contributor address; City; State; Zip Code 8201 Bent Tree Springs Dr, Plano, TX 75025	7 Amount of contribution (\$) 2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/16/2025	Full name of contributor out-of-state PAC (ID#: _____) Venkatasuneetha Mupparaju Contributor address; City; State; Zip Code 2601 Little Elm Pkwy, Suite 401, Little Elm, TX 75068	Amount of contribution (\$) 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 (\$)
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 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: 5	2 FILER NAME Suresh Manduva	3 Filer ID (Ethics Commission Filers)
4 Date 04/22/2025	5 Payee name Anedot	
6 Amount (\$) 66.13	7 Payee address; City; State; Zip Code 340 Poydras Street Suite 1770 New Orleans, LA 70112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Donation Fees
	(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 03/26/2025	Payee name Fred Lusk	
Amount (\$) 531.00	Payee address; City; State; Zip Code 9912 Mallory Dr. Frisco, TX 75035	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Sign Placement
	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 03/31/2025	Payee name Hispano Hablantes	
Amount (\$) 100.00	Payee address; City; State; Zip Code 5400 Preston N Dr. Frisco, TX 75034	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Food/Beverage
	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Suresh Manduva	3 Filer ID (Ethics Commission Filers)
4 Date 04/01/2025	5 Payee name Hope Floats Creative	
6 Amount (\$) 610.00	7 Payee address; City; State; Zip Code 3223 Bannon Drive Thunderbolt, GA 31404	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Magazine 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		
Date 04/01/2025	Payee name Community Impact Magazine	
Amount (\$) 1,125.00	Payee address; City; State; Zip Code 16225 Impact Way Unit 1 Pflugerville, TX 78660-4404	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Magazine 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		
Date 03/31/2025	Payee name Micropix Media LLC	
Amount (\$) 811.88	Payee address; City; State; Zip Code 2521 Brown Blvd., Arlington, TX 76006	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Printing, Signs, Flyers
	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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5		2 FILER NAME Suresh Manduva		3 Filer ID (Ethics Commission Filers)	
4 Date 04/10/2025		5 Payee name Frisco Printing & Graphics Center			
6 Amount (\$) 2,571.46		7 Payee address; City; State; Zip Code 8585 John Wesley Dr, Suite 200 Frisco, TX 75034			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Printing Mailer Cards & EDDM		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 04/15/2025		Payee name Micropix Media LLC			
Amount (\$) 1,623.75		Payee address; City; State; Zip Code 2521 Brown Blvd., Arlington, TX 76006			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description Yard signs, flyers		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 04/16/2025		Payee name Great Plains Bank			
Amount (\$) 30.00		Payee address; City; State; Zip Code 7000 Preston Rd., Frisco, TX 75034			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Bank Fees		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Suresh Manduva	3 Filer ID (Ethics Commission Filers)
4 Date 04/18/2025	5 Payee name SG Curry Point	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 6449 Coit Rd., Suite 112 Frisco, TX 75035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Kickoff Event - Catering
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/22/2025	Candidate / Officeholder name Renee Sample	
Amount (\$) 400.00	Payee address; City; State; Zip Code 1378 Trail View Ln. Frisco, TX 75034	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Voter Data
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/23/2025	Candidate / Officeholder name Twilio	
Amount (\$) 20.00	Payee address; City; State; Zip Code 101 Spear Street, 5th Floor, San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Phone Verification
	Check if travel outside of Texas. Complete Schedule T. 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 POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 5	2 FILER NAME Suresh Manduva	3 Filer ID (Ethics Commission Filers)
4 Date 04/23/2025	5 Payee name Brad Sharp	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 4230 Artisan Park Unit 205, Frisco, TX 75034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Voter Data Analytics
	(c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas, Complete Schedule T. 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 (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		