CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to compose this form.	2 Total pages filed:			
CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRS MI M/. anwer	OFFICE USE ONLY			
NAME	NICKNAME 'AST SUFFIX QZam	Date Received RECEIVED			
CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BCX. APT / SUITE #: CITY; STATE: ZIP CODE 2336 San And Sc Dr. Frisco, TX 75033	APR 07 2023 3:02 P.M City Secretary's Office			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (469) 441-3564	Date Hand-delivered or Date Postmarked			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FI.ST MI MY. Anwer NICKNAME LAST SUFFIX A 2 a m	Date Processed Date Imaged			
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS 'NO P' BLX PLEASE); APT / SUITE #; CITY;	STATE; ZIP CODE			
(Residence or Business) 8 CAMPAIGN TREASURER PHONE	2336 San andres Dr Frisco AREA CODE HONE NUMBER EXTENSION (469) 441 - 3564	TX 15033			
9 REPORT TYPE	January 15 271 c.y botons election Runoff But day before election Exceeded Modifications Reporting Limit	15th day after campaign treasurer appointment (Officeholder Only) Final Report (Altach C/OH - FR)			
10 PERIOD COVERED		onth Day Year / 27 / 23			
11 ELECTION	ELECTION LATE Month Day Year Primary Runoff Other Description Control of Con				
12 OFFICE	OFFICE HELD (II any) 13 OFFICE SOUGHT (II known) Frisco City Council, Place 5				
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTP.BUT INS ACCEPTED OR POLITICAL EXPENDITION THE CANDIDATE (OFFICE HOLD). THIS E. JEP JITURES MAY HAVE BEEN MADE WITHOUT THE CONSENT. CANDID. TETAND FIG. TO DERS I LERGUIRED TO REPORT THIS INFORMATION OF COMMITTEE TYPE OMMITTEE IN ME COMMITTEE TYPE COMMITTEE TO THE ADDRESS COMMITTEE TO THE ADDRESS OF THE ASURER NAME COMMITTEE TO THE ADDRESS OF THE ASURER NAME	HE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE O			

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Anwer Azam	16 Filer	ID (Ethics Commission Filers)			
17 CONTRIBUTION TOTALS	\$				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$			
	4. TOTAL POLITICAL EXPENDITURES	\$			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	· \$			
	Signature of Candidate of Please complete either option below:				
(1) Affidavit					
NOTARY STAMP/SEAL					
	which, witness my hand and seal of office.	day of,			
Signature of officer administer	ing oath Printed name of officer administering oath	Title of officer administering oath			
	OR				
(2) Unsworn Declaration	n				
My name is AN	WERAZAM, and my date of birth is				
My address is 233	6 San Andres or. Frisco TX	75033 USA			
Executed in Dento	County, State of TK, on the 7 day of April	zip code) (country) _, 20 <u>ン</u> ラ 			
	Signature of Candidate/Office	holder (Declarant)			
	Signature of Candidate/Office	HOIGE (DECIMINITY)			

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 co	1 Total pages Schedule A1:				
2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
4 Date 03/30/2023	Nanda Kishore Etikala			7 Amount of contribution (\$) 200.00		
	10817 Irene Dr Mo	civi ciKinne	ey TX 75072	200.00		
8 Principal occu Software En	pation / Job title (See Instructions)		9 Employer (See Instruct Harbor Freight Too	· ·		
Date		out-of-state PAC	C (ID#:)	Amount of contribution (\$)		
03/23/2023				100.00		
	2138 Kennedy Driv	e Fris	State; Zip Code	100.00		
Principal occup unemployed	pation / Job title (See Instructions)		Employer (See Instructi unemployed	ions)		
Date	Full name of contributo: out-of-state PAC (ID#:)		Amount of contribution (\$)			
03/15/2023	Sabine Durbin			50.00		
	7501 Veronica Lane Frsico TX 75033		30.00			
Principal occup Fin Analyst	pation / Job title (See Ins ructions)		Employer (See Instructi Nokia	ions)		
Date		ut-of-state PAC	; (ID#:	Amount of contribution (\$)		
03/07/2023	Payam Dell Contributor address; C	Lity;	State; Zip Code	110 00		
	15110 Dallas Parkway S	ts 310 [Dallas TX 75248	110.00		
	ation / Job title (See Instruitions)		Employer (See Instructi			
Attorney			Law Offices of Paul	I G. Dell, pc		
	ATTACK ADDITIONAL		OF THIS SCHEDULE AS NI			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 If the requested information is not applicable, DO MOT include this page in the report. 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 5 Full name of contributor 7 Amount of contribution (\$) Zafar Hayat 03/06/2023 50.00 6 Contributor address; 13829 Tahoe Lane Frsico TX 75035 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Engineer Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Maria Ahmed 03/01/2023 100.00 Contributor address 11798 Sabino Court Frisco TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) La<u>wye</u>r Full name of contributor Date Amount of contribution (\$) jagmohan Dhillon 02/23/2023 1,000.00 Contributor address: 8762 Preston Trace Eoulevard Frisco TX 75033 Principal occupation / Job title (See Ins. uctions) Employer (See Instructions) Galaxy Self Date Full name of contributor Amount of contribution (\$) Wagar Khan 02/14/2023 600.00 Contributor address; City: State; Zip Code 601 Golden Bell Lane Plano 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self employed SIRIN valley ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-or state PAC p'a see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

nstruction Guide expirins how to complete this fo	rm. 1 Total pages Schedule A1:
	3 Filer ID (Ethics Commission Filers)
Abdul Khan 6 Contributor address; Cir,;	State; Zip Code 1,000.00
	Employer (See Instructions)
Amir Hussain Contributor address; City;	100.00
	Employer (See Instructions)
Mohammed Ahmed Contributor address: City;	State: Zip Code 500.00
	Employer (See Instructions)
Asif Jadhavji Contributor address; City;	State: Zip Code 1,000.00
	Employer (See Instructions) Pulse Spply Chain Solutions, Inc
	4820 Northaven Road Dallas pation / Job title (See Instructions) Full name of contributor Amir Hussain Contributor address; 12780 Bruspetta Drive Frisco pation / Job title (See Instructions) Full name of contributor Mohammed Ahmed Contributor address: City; 7901 Windrose Avenue 1501 Planation / Job title (See Instructions) Full name of contributor Asif Jadhavji Contributor address: City; City; Contributor address: City: City: Contributor address: City: City: Contributor address: City: City:

ATTACH ADDITIONAL CUPIES 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	nstruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	matudution outde expiring flow to complete this	101111.	3 Filer ID (Ethics Commission Filers)
L TELK NAME	•		J Files ID (Ethics Commission Files)
Date 5 Full name of contributor cut-of-state PAC (ID#:) Mo Afzai			7 Amount of contribution (\$)
02/14/2023	6 Contributor address, City; State; Zip Code 3512 Elk Run Fload McKinney TX 75072		1,000.00
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instruct	tions)
Date	Full name of contributor out-of-s'ate PAC	(ID#:)	Amount of contribution (\$)
02/13/2023	Contributor address: City; 8816 Country Glen Crossing P	State; Zip Code	500.00
Principal occup BROKER	ation / Job title (See Instructions)	Employer (See Instruc	ttions)
Date	Full name of contributor • out-of-state PAC	; (ID#)	Amount of contribution (\$)
02/13/2023	Irfan Sattar Contributor address: City; 3305 Stillwater Drive Wy	250.00	
Principal occu	pation / Job title (See Ins. uctions)	Employer (See Instruc	ctions)
Date	Full name of contributor out-or-state PAI	C (ID#:)	Amount of contribution (\$)
02/13/2023	Haji Ali Contributor address, City;	State; Zip Code	250.00
	2506 San Jacinto Drive Eul		
retired	pation / Job title (See Instructors)	retired	uctions)
	•		

If contributor is out-of-state PAC plane sec-instruction guide for additional reporting requirements.

MONETARY POLITICAL COMTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DC NOT include this page in the report.					
The	Instruction Guide explains how to complete this	form.	Total pages Schedule A1:		
FILER NAME		3	Filer ID (Ethics Commission Filers)		
4 Date 02/10/2023	5 Full name of contributor Nazneen Ibrahim 6 Contributor address; City; 513 Laredo Drive Murphy	State; Zip Code y TX 75094	Amount of contribution (\$) 25.00		
Cashier	pation / Job title (See Instructions) J	Employer (See Instructions C penny	5)		
Date 02/09/2023	Full name of contributor Rizwan Gillani Contributor address; City: 673 Scenic Dr Frang T	State; Zip Code X 75039	Amount of contribution (\$)		
Principal occup Business	ation / Job title (See Ins ructions)	Employer (See Instructions FRZ Inc.)		
Date 02/09/2023	Salman Tabani Contributor address: City: 4132 Kickapoo Trail Carrollto	State; Zip Code	Amount of contribution (\$)		
Principal occup Broker	ation / Job title (See Instructions)	Employer (See Instructions) abani Realty)		
Date	Full name of contributor out-of-state PAC (ID	o#:)	Amount of contribution (\$)		
	Contributor address; City	State; Zip Code			
Principal occup	ation / 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

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

The Instruction Guide explains how to complete this form. 2 FILER NAME			Total pages Schedule A2: Filer ID (Ethics Commission Filers)			
5 Date	6 Full name of contributor	Contribution \$ des				
0 Principal o	occupation / Job title (FOR NON-JUDICIA!) (See Instructions)	11 Employe		AL)(See Instructions)		
Contributor	r's principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JL	DICIAL) (See Instructions)		
4 Contributor	r's employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)			
Date	Full name of contributor Out of state PAC (ID#		Amount of Contribution \$	In-kind contribution description		
	Contributor address; City; State;	Zip Code				
Principal oc	Contributor address; City; State; cupation / Job title (FOR NON JUDICIAL) (See Instructions)			 de of Texas. Complete Schedule AL)(See Instructions)		
		Employe	r (FOR NON-JUDICI	de of Texas. Complete Schedule AL)(See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions)	Employe	tor's job title (FOR JU	AL)(See Instructions) DICIAL) (See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL) s employer/law firm (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions) DICIAL) (See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL) s employer/law firm (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL) s employer/law firm (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions) DICIAL) (See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL) s employer/law firm (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions) DICIAL) (See Instructions)		
Contributor's	cupation / Job title (FOR NON JUDICIAL) (See Instructions) s principal occupation (FOR JUDICIAL) s employer/law firm (FOR JUDICIAL)	Employe	tor's job title (FOR JU	AL)(See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULEAS 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 NO" include this page in the report.

		EXPENDITURE CATE	EGORIES FO	OR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Evant_xmanse Loan Repayment/Rc Fee. Office Overhead/Re Foot/Beverage Expense y Gift/Awards/Memorials Expense Printing Expense		ead/Rental Expensionse ense ges/Contract Labor	e Tran Trav Trav Othe	Solicitation/Fundraising Expense Transportation Equipment & Related Exper Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:	al pages Schedule F1: 2 FILER NAME					iler ID (Ethi	cs Commission Filers)
4 Data	5 Pavee nar	Acam					
4 Date 3/17/ 23	Kee	Ders Press					
6 Amount (\$) 6/6-22	7 Payee add	5 alpha Pr		Fochus	. //	State;	75'0 87
				-	411		15001
8 PURPOSE OF EXPENDITURE	Adve	tising		(b) Description	5;quy		
	(c)	Check if travel, '-: > of Texas, Com lete	Schedule T.	Check if	Austin, TX, o	officeholder kvir	g expense
9 Complete ONLY if direct expenditure to benefit C/OH	_	er azam		Office sough	come.	<i>i</i> (Office held
Date	Payee nar	me		0			
3/20/23	Trac	tor Supply					
Amount (\$) \$246.38	Payee add	dress;		City: Dolles	7	State;	Zip Code 7520/
PURPOSE OF EXPENDITURE		Hising Expense		Description	15+3		
	(Check if travel outside c "exas C hpleto	Schedule T.	Check if	Austin, TX, o	fficeholder liven	g expense
Complete ONLY if direct expenditure to benefit C/OH	_	wer azam		Office sought			Office held
Date	Payee nai			J			
3/28/23		An Comm	uni catio	rs.			
Amount (\$)	Payee add			City;		State;	Zip Code
8,273.34				austin		A -	78701
PURPOSE OF EXPENDITURE	ad ver	Service at the top of this	schedule)	Mai/			
	C	heck if travel outside of Texas, Complete.	5:hedule T.	Check if	Austin, TX. c	fficeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/OH		e / Officeholder name		Office sough			Office held
experiunare to benefit C/On	any	o aram		City Co	ouncil		
	ATTA	CH. DDITIONAL COPIES	OF THIS S	CHEDULÉASI	NEEDED		