

**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
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	Mr.	M	J
	NICKNAME	LAST	SUFFIX
		Khan	
OFFICE USE ONLY			
Date Received			
10/26/2015			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE
	P. O. Box 742368		
Houston TX 77274-2368			
Date Hand-delivered or Date Postmarked			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	398-4829	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	Mr.	Charles	
	NICKNAME	LAST	SUFFIX
		Foster	
Receipt #		Amount	
Date Processed			
Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Resident or business)	STREET ADDRESS (No PO Box Please);		APT/SUITE #; CITY; STATE; ZIP CODE
	600 Travis Street 2000 Houston TX 77002		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	335-3904	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month	Day	Year
		9/25/2015	
THROUGH		Month	Day
			Year
			10/24/2015
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	11/3/2015		
<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
	City Council - District F		
		Controller	

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 FILER NAME M J Khan 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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.

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$255.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$44,965.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$155.00
	4	TOTAL POLITICAL EXPENDITURES	\$351,902.64
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$32,986.41
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$215,000.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

M. J. Khan

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

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

19 FILER NAME M J Khan		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	43710
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	1000
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.	SCHEDULE E: LOANS	209900
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	311078.41
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	24138.7
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	1455.57
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	16530.53
10.	SCHEDULE H: PAYMENT 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	

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH
ADDENDUM**

C/OH NAME M J Khan

ACCOUNT # (Ethics
Commission filers)

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME M J Khan			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code			
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Masroor Ahmed	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code 10/3/2015 Houston TX 77079			\$1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Pain and Spine Care Center
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Mohammed Amirul Islam	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code 10/4/2015 Beaumont TX 77706			\$1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Gulf Coast Cardiology
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Muhammed T Javed	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code 10/2/2015 Beaumont TX 77701			2,000.00
8	Principal occupation / Job title (See Instructions) President		9	Employer (See Instructions) Starco Impex Inc.
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME M J Khan		3	Filer ID (Ethics Commission filers)
10/3/2015	Mirza B Baig ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/3/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Emran H Gazi ----- 6 Contributor address; City; State; Zip Code Webster TX 77598	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/3/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Farhana Khan Irfan ----- 6 Contributor address; City; State; Zip Code Sugarland TX 77498	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/4/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Humair Mirza ----- 6 Contributor address; City; State; Zip Code Houston TX 77077	7	Amount of contributions (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/4/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) ILyas H Choudry ----- 6 Contributor address; City; State; Zip Code Houston TX 77077	7	Amount of contributions (\$) 250.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME M J Khan			3 Filer ID (Ethics Commission filers)	
10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77084			150.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Sherry D Khan	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77069			2,000.00
8 Principal occupation / Job title (See Instructions) Homemaker			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Vispi R Sagar	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)	
9/25/2015	6 Contributor address; City; State; Zip Code Sugarland TX 77479			100.00
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
4 Date	5 Full name of contributor Nashwa A Khalil	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)	
10/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77075			1,500.00
8 Principal occupation / Job title (See Instructions) Managing Director			9 Employer (See Instructions) AMINA Sciences	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME M J Khan			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Abdul Jabbar Khan	7	Amount of contributions (\$)
	10/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Nephrology Dialysis and Transplantation Associates
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ahmad H Lateef	7	Amount of contributions (\$)
	10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77070		300.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Interventional Spine of Texas PLLC	7	Amount of contributions (\$)
	10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77074		1,000.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Shahab A Khan	7	Amount of contributions (\$)
	10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77077		500.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) North Houston Tumor and Blood Clinic
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME M J Khan		3	Filer ID (Ethics Commission filers)
9/2/2015	Abdus S Arif ----- 6 Contributor address; City; State; Zip Code Kingwood TX 77346	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) United States Anesthesia Partners	
9/28/2015	George R Willy ----- 6 Contributor address; City; State; Zip Code Sugarland TX 77479	7	Amount of contributions (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	Jasbir Singh ----- 6 Contributor address; City; State; Zip Code Houston TX 77041	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	Kareem Ali ----- 6 Contributor address; City; State; Zip Code Sugarland TX 77479	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Business		9 Employer (See Instructions) Texas Insurance Agency	
Alif Maredia	----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 1,000.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)	
10/14/2015	6 Contributor address; City; State; Zip Code Sugarland TX 77479		1,000.00
8 Principal occupation / Job title (See Instructions) Business		9 Employer (See Instructions) Clearlake Ice Cream Inc.	
10/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Nasreen J Notta 6 Contributor address; City; State; Zip Code Sugarland TX 77479		1,000.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self Employed	
10/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Aryn A Gillani 6 Contributor address; City; State; Zip Code Sugarland TX 77479		250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Iqbal Hassan Khawaja 6 Contributor address; City; State; Zip Code Sugarland TX 77498		500.00
8 Principal occupation / Job title (See Instructions) Business		9 Employer (See Instructions) A&A Stop n Shop	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME M J Khan			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Fatima Mawji	7	Amount of contributions (\$)
	10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Shahzad Bashir	7	Amount of contributions (\$)
	10/15/2015	6 Contributor address; City; State; Zip Code Woodland TX 77380		5,000.00
8	Principal occupation / Job title (See Instructions) Chairman		9	Employer (See Instructions) Bashir Investments LLC
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Mohammad A Janjua	7	Amount of contributions (\$)
	10/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77082		750.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Syed Akhtar	7	Amount of contributions (\$)
	10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77036		2,000.00
8	Principal occupation / Job title (See Instructions) Tax Consultant		9	Employer (See Instructions) Amya Tax Services
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME M J Khan		3	Filer ID (Ethics Commission filers)
10/1/2015	Osman Ali Swati ----- 6 Contributor address; City; State; Zip Code Port Arthur TX 77642	7	Amount of contributions (\$) 1,000.00
8	Principal occupation / Job title (See Instructions) Business Owner	9	Employer (See Instructions) Pak Oil Company
9/27/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ayesha Chawdhary ----- 6 Contributor address; City; State; Zip Code Houston TX 77077	7	Amount of contributions (\$) 150.00
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
9/28/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Bashir Chawdhary ----- 6 Contributor address; City; State; Zip Code Las Vegas NV 89145	7	Amount of contributions (\$) 1,000.00
8	Principal occupation / Job title (See Instructions) Cardiovascular Surgeon	9	Employer (See Instructions) Cardiovascular and Thoracic Surgeons of Nevada
9/28/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Cliff Kitten ----- 6 Contributor address; City; State; Zip Code Houston TX 77273	7	Amount of contributions (\$) 1,000.00
8	Principal occupation / Job title (See Instructions) Cardiovascular Surgeon	9	Employer (See Instructions) KPS Cardiovascular Surgery
4	Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Arshad Matin	7	Amount of contributions (\$) 1,000.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME M J Khan			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) S Venkatesh	7	Amount of contributions (\$)
	10/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Cyfair Pulmonary Associates
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Mohammad Haroon Siddiqui	7	Amount of contributions (\$)
	10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		500.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) M Haroon Siddiqui MD PA
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Subhan Jalil	7	Amount of contributions (\$)
	10/14/2015	6 Contributor address; City; State; Zip Code Kingwood TX 77345		10.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Shaukat Zakaria	7	Amount of contributions (\$)
	10/15/2015	6 Contributor address; City; State; Zip Code Sugar Land TX 77479		1,000.00
8	Principal occupation / Job title (See Instructions) CEO		9	Employer (See Instructions) HealthQuest Therapeutics LLC
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)	
10/21/2015	Laeeq A. Khan ----- 6 Contributor address; City; State; Zip Code Houston TX 77090	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) L A Khan MD PA	
10/23/2015	Omer A. Ilahi ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Southwest Orthopedic	
10/19/2015	Iqbal Sheikh ----- 6 Contributor address; City; State; Zip Code Austin TX 78753	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) President & CEO		9 Employer (See Instructions) Cybertex Group of Companies	
9/25/2015	Kenneth Chi Li ----- 6 Contributor address; City; State; Zip Code Houston TX 77036	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
	Rustom B Engineer ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$)

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule A1:

2 FILER NAME M J Khan

3 Filer ID (Ethics Commission filers)

9/26/2015

6 Contributor address; City; State; Zip Code

Sugar Land TX 77479

50.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements**

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A2:
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2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
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4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$1,000.00
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5	Date	6 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address; City; State; Zip Code			
			<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
--	--------------------------------

5	Date	6 Full name of contributor Shabbir Dadabhoy <input type="checkbox"/> out of state PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
10/20/2015		7 Contributor address; City; State; Zip Code Houston TX 77095	1000.00 Push Cards		
			<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions) President	11 Employer (See Instructions) Kwik Kopy
---	---

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

LOANS				SCHEDULE E	
The Instruction Guide explains how to complete this form.				1 Total Pages Schedule E:	
2 FILER NAME M J Khan				3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: => => => => => =>					
5 Date of loan 10/2/2015	7 Name of lender Wallis State Bank <input type="checkbox"/> out of state PAC(ID#)			9 Loan Amount (\$) 200,000.00	
6 Is Lender a Financial Institution? Yes	8 Lender Address; Houston TX 77043			10 Interest rate 1.80%	
				11 Maturity date 10/2/2016	
12 Principal occupation / Job title (See Instructions)			13 Employer (See Instructions)		
14 Description of collateral <input type="checkbox"/> Certificate of Deposits			15	Check if personal funds were deposited into political account (See instructions)	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor M. J. Khan		19 Amount Guaranteed (\$) 200,000.00		
	18 Guarantor address; 6289 Wilcrest Dr. #6103 Houston TX 77072				
20 Principal Occupation Candidate			21 Employer		
5 Date of loan 10/6/2015	7 Name of lender M. J. Khan <input type="checkbox"/> out of state PAC(ID#)			9 Loan Amount (\$) 9,900.00	
6 Is Lender a Financial Institution? No	8 Lender Address; Houston TX 77072			10 Interest rate 0.00%	
				11 Maturity date	
12 Principal occupation / Job title (See Instructions)			13 Employer (See Instructions)		
14 Description of collateral <input type="checkbox"/> None			15	Check if personal funds were deposited into political account (See instructions)	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)		
	18 Guarantor address; City; State; Zip Code				
20 Principal Occupation			21 Employer		

LOANS		SCHEDULE E	
The Instruction Guide explains how to complete this form.		1	Total Pages Schedule E:
2 FILER NAME M J Khan		3	Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED LOANS: => => => => => =>		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 Date 10/12/2015	5 Payee name Comcast Spotlight	
6 Amount (\$) 6,868.00	7 Payee address; City; State; Zip Code 20 East Greenway Plaza Suite 380 A Houston TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable TV Buy
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/30/2015	5 Payee name Neumann and Company	
6 Amount (\$) 1,784.81	7 Payee address; City; State; Zip Code 1002 Pauline Avenue Bellaire TX 77401	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push Cards
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/7/2015	5 Payee name KRIV TV	
6 Amount (\$) 340.00	7 Payee address; City; State; Zip Code 4261 Southwest Freeway Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/7/2015	5 Payee name KRIV TV		
6 Amount (\$) 28,900.00	7 Payee address; City; State; Zip Code 4261 Southwest Freeway Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 Date 10/7/2015	5 Payee name KHOU TV	
6 Amount (\$) 34,850.00	7 Payee address; City; State; Zip Code 1945 Allen Parkway Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/7/2015	5 Payee name KPRC TV	
6 Amount (\$) 61,200.00	7 Payee address; City; State; Zip Code 8181 Southwest Freeway Houston TX 77074	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/7/2015	5 Payee name KTRK TV	
6 Amount (\$) 39,100.00	7 Payee address; City; State; Zip Code C/O ABC NTVS Inc. 4100 City Avenue Philadelphia PA 19131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/7/2015	5 Payee name Sprint Digital		
6 Amount (\$) 1,155.57	7 Payee address; City; State; Zip Code 10100 Clay Rd. Suite C Houston TX 77080		
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 3X5 Signs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 Date 10/10/2015	5 Payee name Exclusive Printers	
6 Amount (\$) 514.19	7 Payee address; City; State; Zip Code P. O. Box 571195 Houston TX 77257	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense T Shirts
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/10/2015	5 Payee name KROSS	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code 6119 184th Street Fresh Meadows NY 11365	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/10/2015	5 Payee name D-Mars.Com	
6 Amount (\$) 1,500.00	7 Payee address; City; State; Zip Code 7322 Southwest Freeway Suite 805 Houston TX 77074	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Newspaper Ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/11/2015	5 Payee name Houston 80-20		
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 8300 Bender Humble TX 77396		
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 Date 10/18/2015	5 Payee name PayPal	
6 Amount (\$) 445.84	7 Payee address; City; State; Zip Code 2211 N. 1st Street San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/6/2015	5 Payee name Comcast Spotlight	
6 Amount (\$) 127,500.00	7 Payee address; City; State; Zip Code 20 East Greenway Plaza Suite 380 A Houston TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable TV Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/25/2015	5 Payee name Apex USA Printing	
6 Amount (\$) 1,375.00	7 Payee address; City; State; Zip Code 9862 Harwin Dr. Houston TX 77036	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)
	Printing Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/13/2015	5 Payee name KSEV Radio		
6 Amount (\$) 3,995.00	7 Payee address; City; State; Zip Code 11451 Katy Freeway Suite 215 Houston TX 77079		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME M J Khan		3 Filer ID (Ethics Commission filers)
4 Date 10/13/2015	5 Payee name Houston Area COGIC PAC		
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code P. O. Box 2303 Houston TX 77252		
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$24,138.70	
5 Date 10/18/2015	6 Payee name Neumann and Company	
7 Amount (\$) 22,288.70	8 Payee address; City; State; Zip Code 1002 Pauline Avenue Bellaire TX 77401	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Flier Mailout
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/18/2015	6 Payee name Richmond Printing	
7 Amount (\$) 1,850.00	8 Payee address; City; State; Zip Code 5825 Schumacher lane Houston TX 77057	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Flier
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,455.57	
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/10/2015	6 Payee name Shahnai Restaurant	
7 Amount (\$) 630.00	8 Payee address; City; State; Zip Code 5920 Hillcroft St. Houston TX 77036	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meeting
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/16/2015	6 Payee name Facebook	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$1,455.57
25.02	www.fb.me/ads CA 94025	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media Advertisement
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date	6 Payee name		
10/18/2015	Facebook		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
50.08	www.fb.me/ads CA 94025		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media Advertisement	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date	6 Payee name		
10/20/2015	Facebook		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
250.34	www.fb.me/ads CA 94025		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME M J Khan	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,455.57	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media Advertisement
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/22/2015	6 Payee name Facebook
7 Amount (\$) 500.13	8 Payee address; City; State; Zip Code www.fb.me/ads CA 94025
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense
	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media Advertisement
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME M J Khan	3 FilerID (Ethics Commission filers)		
4 Date 10/8/2015	5 Payee name KHOV TV			
6 Amount (\$) 3,102.50 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee Address; 1945 Allen Parkway	City; Houston	State; TX	Zip Code 77019
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description TV BUY		
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name M. J. Khan	Office sought Controller	Office held	

4 Date 10/7/2015	5 Payee name KPRC TV			
6 Amount (\$) 9,350.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee Address; 8181 Southwest Freeway	City; Houston	State; TX	Zip Code 77074
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description TV BUY		
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name M. J. Khan	Office sought Controller	Office held	

4 Date 10/23/2015	5 Payee name ABC Voters Contact LLC			
6 Amount (\$) 2,622.46 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee Address; 7941 Katy Freeway Suite 300	City; Houston	State; TX	Zip Code 77024
8	(a) Category	(b) Description		

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME M J Khan	3 FilerID (Ethics Commission filers)	
PURPOSE OF EXPENDITURE	OTHER (enter a category not listed above)	Voters List	
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name M. J. Khan	Office sought Controller	Office held

4 Date 10/22/2015	5 Payee name Chase Card Services
6 Amount (\$) 1,455.57 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee Address; City; State; Zip Code P. O. Box 94014 Palatine IL 60094

8 PURPOSE OF EXPENDITURE	(a) Category OTHER (enter a category not listed above)	(b) Description Credit Card Payment for Campaign Expenses	
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name M. J. Khan	Office sought Controller	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED