

# 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	2 Total pages filed: 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Omar	MI
	NICKNAME	LAST Kadir	SUFFIX
<b>OFFICE USE ONLY</b> RECEIVED Date Received <b>OCT - 9 2018</b> <i>By e-mail</i> WC ELECTIONS			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	PO Box 6333		Date Hand-delivered or Date Postmarked <b>10/9/18 16 5:13 pm</b>
	Round Rock, TX 78664-3298		Receipt #      Amount
			Date Processed
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		
	APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	07/01/2018	THROUGH	09/27/2018
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11/06/2018		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Treasurer Place County District Williamson

GO TO PAGE 2

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

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

2 of 9

<b>13 C / OH NAME</b> Kadir, Omar	<b>14 Filer ID</b>
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.							
<table border="1" style="width:100%"> <tr> <td style="width:30%"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL		<input type="checkbox"/> SPECIFIC		<b>COMMITTEE ADDRESS</b>	
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>						
	<input type="checkbox"/> GENERAL							
	<input type="checkbox"/> SPECIFIC							
<b>COMMITTEE CAMPAIGN TREASURER NAME</b>								
<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>								

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,351.00
----- <b>EXPENDITURE TOTALS</b> -----	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	3,883.26
----- <b>CONTRIBUTION BALANCE</b> -----	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
----- <b>OUTSTANDING LOAN TOTALS</b> -----	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFADAVIT**

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

\_\_\_\_\_

Signature of Candidate or Officeholder

AFFIX NOTARY 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      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Kadir, Omar	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,351.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,883.26
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/9
2 FILER NAME Kadir, Omar		3 Filer ID
4 Date 09/01/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abdi, Kareem	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 7921 Aspen Highlands Dr  Austin, TX 78746		
8 Principal occupation / Job title (See Instructions) Sales Consultant		9 Employer (See Instructions) Oracle
Date 08/21/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akhtar, Omar	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 13400 Braianwick Dr  Austin, TX 78729		
Principal occupation / Job title (See Instructions) Orthopedic Surgeon		Employer (See Instructions) Capital City Orthopaedics
Date 09/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akhund, Yusif	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 10 Arianas Court  Mount Laurel, TX 08054		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockheed Martin
Date 09/27/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucy, Molly	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 9707 Meadowheath Dr  Austin, TX 78729		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) N/A
Date 09/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Ruben	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13137 Partridge Bend Drive  Austin, TX 78729		
Principal occupation / Job title (See Instructions) IT Manager		Employer (See Instructions) Dell

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/9
<b>2</b> FILER NAME Kadir, Omar		<b>3</b> Filer ID
<b>4</b> Date 08/06/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Sharon	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>6</b> Contributor address; City; State; Zip Code 4110 North Summercrest Loop  Round Rock, TX 78681		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 08/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everett, Paula	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 9703 Moorberry St.  TX 78729		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, David	Amount of Contribution (\$)  \$400.00
Contributor address; City; State; Zip Code 1121 Oaklands Dr  Round Rock, TX 78681		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Brandie	Amount of Contribution (\$)  \$54.00
Contributor address; City; State; Zip Code 501 Westminster Place  Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Marketing Consultant		Employer (See Instructions) JeffreyM Consulting
Date 08/24/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Richard	Amount of Contribution (\$)  \$75.00
Contributor address; City; State; Zip Code 74 Elm Street  Somerville, MA 02144		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) EverQuote.com

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/9
2 FILER NAME Kadir, Omar		3 Filer ID
4 Date 07/06/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khataw, Ali	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code 7914 Bee Caves Rd  Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Encotech Engineering
Date 07/15/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Maria	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code 2300 Sandra Dr  Cedar Park, TX 78613	
Principal occupation / Job title (See Instructions) Production Manager		Employer (See Instructions) Aerial Billboard Corporation
Date 07/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, David	Amount of Contribution (\$)  \$200.00
	Contributor address; City; State; Zip Code 1201 Tricia Cv  Hutto, TX 78634	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Dell
Date 08/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peolsi, Jan	Amount of Contribution (\$)  \$125.00
	Contributor address; City; State; Zip Code 10020 Valona Dr  Austin, TX 78717	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/29/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkham, David	Amount of Contribution (\$)  \$54.00
	Contributor address; City; State; Zip Code 5320 Medford Dr  Austin, TX 78723	
Principal occupation / Job title (See Instructions) Server		Employer (See Instructions) Corner Cafe

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/9
<b>2</b> FILER NAME Kadir, Omar		<b>3</b> Filer ID
<b>4</b> Date 08/23/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickel, Pamela	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code 108 Whitetail Ln  Hutto, TX 78634		
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate Agent		<b>9</b> Employer (See Instructions) O'Barr Rost Realtors
Date 08/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Chuck	Amount of Contribution (\$)  \$54.00
Contributor address; City; State; Zip Code 1600 Willow Vista  Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) St. Davids Hospital
Date 08/03/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Amir	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 746 Spring Hill Farm Dr  Ballwin, MO 63021		
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Agility Collective
Date 09/08/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Dianne	Amount of Contribution (\$)  \$81.00
Contributor address; City; State; Zip Code 2802 High Point Cove  Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Project Manger		Employer (See Instructions) Dell
Date 08/31/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walz, Patrick	Amount of Contribution (\$)  \$108.00
Contributor address; City; State; Zip Code 3815 Campfire  Cedar Park, TX 78613		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Aecom

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### 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.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 8/9	<b>2</b> FILER NAME Kadir, Omar	<b>3</b> Filer ID
<b>4</b> Date 09/27/2018	<b>5</b> Payee name Act Blue	
<b>6</b> Amount (\$) \$188.86	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising transaction fees.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held
Date 09/04/2018	Payee name Demsigns	
Amount (\$) \$1,374.86	Payee address; City; State; Zip Code  TX	
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 Highway signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held
Date 09/27/2018	Payee name Facebook	
Amount (\$) \$399.95	Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park, TX 94025	
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 Promote the campgian Facebook page and it's content.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### 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.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 9/9	<b>2</b> FILER NAME Kadir, Omar	<b>3</b> Filer ID
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<b>4</b> Date 09/13/2018	<b>5</b> Payee name My Campaign Store
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<b>6</b> Amount (\$) \$818.98	<b>7</b> Payee address; City; State; Zip Code  TX
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2018	Payee name Zippity Print
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Amount (\$) \$1,100.61	Payee address; City; State; Zip Code 1600 E 23rd St  Cleveland, OH 44114
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 literature
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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