Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT # (Ethics Commission filers): 00037443

2 Total pages this report: 1/2

3 CANDIDATE / OFFICEHOLDER NAME

TITLE | FIRST: John | MI

NICKNAME | LAST: Cook | SUFFIX

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

3224 Mesa Verde Lane

El Paso TX 79904

☐ Change of Address

5 CAMPAIGN TREASURER NAME

TITLE: E | FIRST: Suzanne | MI

NICKNAME | LAST: Moody | SUFFIX

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

5001 Rutherford

El Paso TX 79924

7 CAMPAIGN TREASURER PHONE

AREA CODE | PHONE NUMBER | EXTENSION

( ) -

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)

☒ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year: 05/27/2005 THROUGH Month Day Year: 07/15/2005

10 ELECTION

ELECTION DATE — Month Day Year: 06/04/2005

ELECTION TYPE: ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): Other -- city rep

12 OFFICE SOUGHT (if known): Other -- mayor

13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

OFFICE USE ONLY

Date Received: CITY CLERK 05 JUL 15 PM 4:16 EPT.

Date Hand-delivered or Date Postmarked

Receipt # | Amount

Date Processed

Date Imaged

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME
John Cook

15 ACCOUNT # (Ethics Commission filers)
00037443

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This listing includes political expenditures 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	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

CITY CLERK DEPT.
05 JUL 15 PM 6:49

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occured during this reporting period. (Sign affidavid below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 0.00
2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 27,900 ~~0.00~~

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ ~~0.00~~
4.	**TOTAL POLITICAL EXPENDITURES**	$ ~~0.00~~ 31,914.36

OUTSTANDING LOAN TOTALS

5.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ ~~0.00~~ 15,000

19 AFFIDAVIT

NOTARY PUBLIC STATE OF TEXAS
DIANA NUÑEZ
NOTARY PUBLIC
In and for the State of Texas
My commission expires 10-18-2005

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.

John F Cook
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said John F. Cook, this the 15th day of July, 2005, to certify which, witness my hand and seal of office.

Diana Nuñez — Diana Nuñez — Notary Public
Signature — Printed Name — Title

(Effective 11/16/1999)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
6/23/05	Roberto Oaxaca 1515 Montana (02) ☐ out of state PAC	200.00	
9 Principal occupation		10 Employer (optional)	
6/23/05	Stuart L. Leeds 303 Texas ave (01) ☐ out of state PAC	100.00	
Principal occupation		Employer (optional)	
6/23/05	Wayne Windle 201 East Main, 11th floor (01) ☐ out of state PAC	200.00	
Principal occupation		Employer (optional)	
6/27/05	Johnny L. Franklin 11066 Tom Shaw Dr. (36) ☐ out of state PAC	100.00	
Principal occupation		Employer (optional)	
Date	Full name of contributor / Contributor address; City; State; Zip Code ☐ out of state PAC	Amount of contribution ($)	In-kind contribution description(if applicable)
Principal occupation		Employer (optional)	

CITY CLERK DEPT
JUL 15 PM 6:4

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

4650

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT. 05 JUL 15 PM 6:49

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6/17	JEK Holding " C T. Karam 4012 Roadside ct (22)	250.00	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/10	Sam Vargas 5101 Harlan (24)	50.00	

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 ($)	In-kind contribution description (if applicable)
6/10	J. F Cadenas 6105 Camino Alegre (12)	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 ($)	In-kind contribution description (if applicable)
6/10	Edward Drusina 6411 Belton Rd (12)	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 ($)	In-kind contribution description (if applicable)
6/10	Roberto Moreno 5600 Eagle Point (12)	500.00	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

4050

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT. 05 JUL 6 PM 2:49

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
6-2-5	Roberto Lerma	50 00

8 Purpose of payment (See instructions regarding type of information required.): Campaign Workers #1147

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-2-5	Roberto Lerma	300 00

Purpose of payment (See instructions regarding type of information required.): STAMPS

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-2-5	Janie Rubenstein	2,000

Purpose of payment (See instructions regarding type of information required.): Campaign Workers

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-2-5	Matthew Briones	150 00

Purpose of payment (See instructions regarding type of information required.): Replacing lost check #1150

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT. 05 JUL 5 PM 3:46

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5-29-5	U. Haul	21.86

8 Purpose of payment (See instructions regarding type of information required.): Gas FOR Cook-out - Fund raiser #1143

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-29-5	Sams Club	121.62

Purpose of payment (See instructions regarding type of information required.): Burgers & Stuff #1144 FOR FIFCR FUNDRAiser

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-31-5	Roberto Lerma	1,200

Purpose of payment (See instructions regarding type of information required.): Campaign workers #1145

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-31-5	Quick Copy	13.20

Purpose of payment (See instructions regarding type of information required.): #1146 - Copies

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers):

CITY CLERK DEPT.
05 JUN 15 PM 6:40

4 Date	5 Payee name / Payee address; City; State; Zip Code	7 Amount ($)
5-27-05	US Postal Service	7908

8 Purpose of payment (See instructions regarding type of information required.): Mailing service for Campaign #1138

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-27-5	Quick Copy	50.74

Purpose of payment (See instructions regarding type of information required.): Flyers #1139

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-27-5	Matthew Briones	150 00

Purpose of payment (See instructions regarding type of information required.): Campaign Mgmt #1140

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5-27-5	Dennis Duffner	150 00

Purpose of payment (See instructions regarding type of information required.): Web Help. #1142

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name / Office sought / Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address: City; State; Zip Code	7 Amount ($)
5-27-5	KTSM EL PASO	#481.85

CITY CLERK DEPT.
05 JUL 15 PM 6:40

8 Purpose of payment (See instructions regarding type of information required.): ADVERTISING V# 1132

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
5-27-5	Clear Channel	613.70

Purpose of payment (See instructions regarding type of information required.): ADVERTISING V# 613.70

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
5-27-5	KVIA	2154.75

Purpose of payment (See instructions regarding type of information required.): ADVERTISING V# 1134

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
5-27-5	DAVIDS Apparel	405.94

Purpose of payment (See instructions regarding type of information required.): T-SHIRTS V# 1136

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT
05 JUL 05 PM 6:49

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
5-27-5	Matthew Briones 1626 ST Johns 79902	150

8 Purpose of payment (See instructions regarding type of information required.): Campaign Management V# 1128

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
5-27-5	Postmaster	59.00

Purpose of payment (See instructions regarding type of information required.): POSTAGE V# 1129

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
5-27-05	KDBC EL PASO	1619.25

V# 1130

Purpose of payment (See instructions regarding type of information required.): ADVERTISING

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
5-27-05	KVIA EL PASO	3429.75

Purpose of payment (See instructions regarding type of information required.): ADVERTISING V# 1131

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

CITY CLERK DEPT
05 JUL 19 PM 6:49

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
6-2-5	PRINT WORLD	2,062.17

8 Purpose of payment (See instructions regarding type of information required.) mailing service V# 1151

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.) SOFT DRINKS V# 1152

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-4-5	Rent-a-center	$70.45

Purpose of payment (See instructions regarding type of information required.) TV Rental FOR election night V# 1172

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6-4-5	Jose Barron	43.30

Purpose of payment (See instructions regarding type of information required.) TABLES & Chairs Rental V# 1154

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name; Office sought; Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address: City; State; Zip Code	7 Amount ($)
6-4-5	ABEL Fandoa	225.00

8 Purpose of payment (See instructions regarding type of information required.) Disk Jockey FOR election night V# 1156

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

CITY CLERK DEPT. 05 JUL 15 PM 6:45

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
6-5-5	Cingular Wireless	49.85

Purpose of payment (See instructions regarding type of information required.) cellular phone V# 1157

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
6-6-5	Matthew Briones	500

Purpose of payment (See instructions regarding type of information required.) Campaign Management V# 1158

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
6-6-5	EL Diario	250

Purpose of payment (See instructions regarding type of information required.) CAMPAIGN AD V# 1159

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE I

Non-Campaign

The instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
6-10-5	Habitat FOR Humanity (501c3) EL PASO, TX	$100.00

8 Purpose of payment (See instructions regarding type of information required.) Donation FROM unknown source V# 1163

9 -- Complete if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

CITY CLERK DEPT
05 JUL 15 PM 6:49

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-10-5	Flag Foundation (501c3) EL PASO, TX	$100.00

Purpose of payment (See instructions regarding type of information required.) Donation FROM unknown source V# 1164

-- Complete if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-10-5	Love of Life (501c3) EL PASO, TX	$100.00

Purpose of payment (See instructions regarding type of information required.) Donation FROM unknown source V# 1165

-- Complete if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-10-5	Denny's TRANS MTN - EL PASO, TX 79924	44.36

Purpose of payment (See instructions regarding type of information required.) Breakfast FOR STAFF & guest speakers V# 1166

-- Complete if direct expenditure to benefit C/OH: Candidate / Officeholder name; Office sought; Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL EXPENDITURES

SCHEDULE F

The instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / 6 Payee address: City; State; Zip Code	7 Amount ($)
6-23	Cingular	$1,434.90

8 Purpose of payment (See instructions regarding type of information required.) Cellphones (July) √# 1173

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

CITY CLERK DEPT. 05 JUL 15 PM 6:4[illegible]

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)
	Intrado	

Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.) | -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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30,786.90

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule I:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($)
7-13-5	Tex-PREP Donation to Student FOR TRIP	$10 00
7-14-5	E C Subs Meals for City Council Members re: summit	36.30
7-14-5	Diana Nunez Re-imbursement FOR WIFE's Airline Tickets for Austin & San Antonio	200 00

CITY CLERK DEPT. JUL 15 PM

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POLITICAL EXPENDITURES

SCHEDULE I

The instruction Guide explains how to complete this form.

1 Total pages Schedule F

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
7-8-5	NAACP	1,000

8 Purpose of payment (See instructions regarding type of information required.) Donation #477

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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CITY CLERK DEPT.
05 JUL 15 PM 6:49

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POLITICAL EXPENDITURES

SCHEDULE I

non-campaign

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / Payee address: City, State, Zip Code	7 Amount ($)
6-13-5	Wal Mart TRANSMTN EL PASO, TX 79934	$64.67

8 Purpose of payment (See instructions regarding type of information required.) Burgers & Buns FOR Flag Foundation V# 1167

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

05 JUL 15 PM 6:49 CITY CLERK DEPT

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-17-5	MARICHI FRONTERA	$150 00

Purpose of payment (See instructions regarding type of information required.) MUSIC FOR INAGURATION V# 1168

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-25-5	International Music	$450 00

Purpose of payment (See instructions regarding type of information required.) Music FOR Inaguration V# 1174

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
7-6-5	Katherines Flowers	$61.70

Purpose of payment (See instructions regarding type of information required.) Flowers FOR Paula Villalobos V# 1176

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE I

non-campaign

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
6-10-5	City OF EL PASO	$10.00

8 Purpose of payment (See instructions regarding type of information required.) PARKING TICKET FOR Bookmobile V# 1160

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

CITY CLERK DEPT.
05 JUL 15 PM 6:49

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-10-5	City OF EL PASO	$20.00

Purpose of payment (See instructions regarding type of information required.) Parking tickets FOR Cookmobile V# 1162

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-19-5	City OF EL PASO	$15.00

Purpose of payment (See instructions regarding type of information required.) PARKING TICKET FOR Cookmobile V# 1169

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-23-5	L & J Cafe	$10.00

Purpose of payment (See instructions regarding type of information required.) Lunch John & Oscar V# 1170

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7-5-5	Jorge L. Azcarate 3241 Tierra Lucero Ln ELP. TX 79938	500	

9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:49

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7-6-5	Basilio A. Silva SR 1629 Billy Casper DR ELP TX 79936	500	

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 ($)	In-kind contribution description (if applicable)
7-6-5	Ramiro R. Guzman 1016 Buckwood ELP. TX 79925-6928	500	

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 ($)	In-kind contribution description (if applicable)
7-6-5	Ina & Irwin Kurland 858 Broadmore ELPASO, TX 79912	250	

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 ($)	In-kind contribution description (if applicable)
7-6-5	Randy P. Brock 417 Executative Cntr Blvd ELPASO, TX 79902	500	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

6900

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7-6-5	Oscar Perez 9929 Acer Ave El Paso, TX 79925	250	

9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7-6-5	Rafael Martinez 2120 Escarpa El Paso, TX 79935	500	

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 ($)	In-kind contribution description (if applicable)
7-6-5	Dale Lindsarger PO Box 17428 Austin, TX 78760	500	

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 ($)	In-kind contribution description (if applicable)
7-6-5	Delgado Acosta Braden & Jones LLP 221 N. Kansas Ste 2000 El Paso, TX 79901-1441	500	

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 ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions) Employer (See Instructions)

8650

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/9/02	Mildred Levitt 4229 Larchmont Dr. 79902	25.00	

9 Principal occupation / Job title (See Instructions): unknown

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 P 6:49

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/25/02	Hilda Rosenfeld 313 Carporal ct 79932	50.00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/31/05	Robert J. Shuya 5184 Memory Dr. 79932	500.00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/25/05	Ismael Legarreta 7545 Hermosillo Dr. 79915	500.00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/16/05	E. Shapleigh 701 N. St Vrain 79902	1000.00	

Principal occupation / Job title (See Instructions): State Senator

Employer (See Instructions)

10725

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/16/05	Ruben Chavez 7338 Golden Hawk 79912	250.00	

9 Principal occupation / Job title (See Instructions): Unknown

10 Employer (See Instructions):

CITY CLERK DEPT.
05 JUL 15 PM 6:43

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/16/05	Lisa Y. Estrada 840 Miguel Pedroza 79927	250.00	

Principal occupation / Job title (See Instructions): Unknown

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/18/05	Walter L. Boyaki 4621 Pershing 79903	500.00	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Self

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	Ronald & Martha Jackson 7052 Villa Hermosa El Paso, TX 79912-2227	350 00	

Principal occupation / Job title (See Instructions): Unknown

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	Michael Copin 10516 Montwood El Paso, TX 79935	750 00	

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Self

12825

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6-1-5	Mike Rosales & Cecilia Rosales 10520 Springwood DR El Paso, TX 79925-7365	200 00	

9 Principal occupation / Job title (See Instructions): Attorney

10 Employer (See Instructions): Rosales & Rosales

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	Elizabeth Corbin 6620 Imperial Ridge El Paso, TX 79912	100 00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions):

CITY CLERK DEPT.
05 JUN 5 PM 6:43

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	OTTO Maser JR 10828 La Subida El Paso, TX 79935	100 00	

Principal occupation / Job title (See Instructions): Advertising

Employer (See Instructions): Maser Bench Ads

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	Robert J. Truhill 3200 Mountain Walk DR El Paso, TX 79904-3501	350 00	

Principal occupation / Job title (See Instructions): Unknown

Employer (See Instructions):

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	John R. Batoon 11220 Dick Lot 2 El Paso, TX 79936-4607	350 00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions):

13925

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/24/05	Socorro M. Alford 725 Montoya Oak Dr 79932	1000.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:43

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-1-5	Gene & Connie Tinkle 701 La Cruz EL PASO, TX 79902-1718	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 ($)	In-kind contribution description (if applicable)
6-2-5	Pete Payan 10912 Sombra Verde El Paso, TX 79935	150.00	

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 ($)	In-kind contribution description (if applicable)
6-2-5	Edward Allshouse 10828 Hitchcock EL PASO, TX 79935-1420	200.00	

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 ($)	In-kind contribution description (if applicable)
6-2-5	Richard Baron 4141 Westcity Court #168 EL PASO, TX 79902	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

15875

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6-2-5	Daniel Salvador Gonzalez	$100.00	

9 Principal occupation / Job title (See Instructions): Attorney

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:49

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-2-5	Laura Pendergast Gordon 5908 Quinta Real Ct El Paso, TX 79912	100	

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 ($)	In-kind contribution description (if applicable)

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 ($)	In-kind contribution description (if applicable)

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 ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

16975

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6-3-5	Carlos Gomez	500	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:46

Date	Full name of contributor ☐ out-of-state PAC (ID#:) Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6-3-5	A. Cox	1,000	

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 ($)	In-kind contribution description (if applicable)
6-3-5	Carolyn Tokoph	500	

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 ($)	In-kind contribution description (if applicable)
6-3-5	FRANCISCO BUSAMONTE	500	

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 ($)	In-kind contribution description (if applicable)
6-3-5	Elias Perez	500	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

19975

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5/31	Zainul Abedin 829 Corey Creek (12)	$150.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:49

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5/31	Zakir Sayeda 3441 Red Sail. (36)	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/4/05	Mary O Barnard Garcia 221 Silverwood Way (22)	150.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/2	Richard ~~Davis~~ Davis 2913 Titanic (04)	100.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/3/05	John Morsby 11651 Helen Wynn ct (36)	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6/1/05	George R. Dipp P.O Box 1355 (48)	500.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 15 PM 6:49

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/3/05	Raquel M. Morby 11651 Helen Wynn ct (36)	250.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/1/05	Jeremy Saenz 3115 Legends Oak Dr Spring, TX 77386 (96)	600.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/2	Joe A Rosales (Rosa) 9104 Metter (25)	1000.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/3	Richard M. Zamora 1011 N. Mesa St (02)	500.00	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

23590

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 *Total pages Schedule A:*

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6/3	Ben H. Langford 444 Executive center BLVD #222 (02)	250.00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

CITY CLERK DEPT.
05 JUL 13 PM 6:50

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
6/1/05	Shanka Barr 4620 Dyer st ste C (30)	200.00	

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 ($)	In-kind contribution description (if applicable)
6/1/05	Rafael Perez 1105 Prospect (02)	100.00 Cash	

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 ($)	In-kind contribution description (if applicable)
6/1/05	Shanla Seang 3115 Legends Creek dr. Spring, TX 77386	600.00	

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 ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
5/29/05	Patric R. Gordon 5908 Quinta Real ct 79912	1000.00	

9 Principal occupation | 10 Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
5/27/05	David L. Elliott P.O Box 960733 79996	100.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
5/25/05	Wayne Gilbert 5959 Gateway W. #216 79925	100.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
5/29/5	FRANK R. Lopez 10 HALF FMOON EL PASO, TX 79915	$200.00	

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)
5/29/5	Gale Morrow & Dexter Katzman 6720 Isla del Rey EL PASO, TX 79912-7322	$350.00	

Principal occupation | Employer (optional)

26490

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05 JUL 15 PM 2:50

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description(if applicable)
5-29-05	Robert Geyer 4505 Bliss Ave EL PASO, TX 79903	$ 20.00	

9 Principal occupation: Transportation

10 Employer (optional): County of El Paso

CITY CLERK
05 JUL 15 PM 1:10
RECEIVED

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation | Employer (optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description(if applicable)

Principal occupation | Employer (optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

FIFER ARENA Fundraiser

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-30-5	Beatrice Sada 7228 Barka Rd ELPASO, TX 79915	$50	CITY CLERK DEPT. 05 JUL 15 PM 6:50

9 Principal occupation / Job title (See Instructions): unknown

10 Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	Emilia Taylor (&LTC Morris) 9013 El Dorado ELP, TX 79925	$100	

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	Julian Horwitz 1401 Montana STE M POBox44 ELP, TX 79940	$35	

Principal occupation / Job title (See Instructions): UNKnown.

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	Yolande Polanso 1309. E Robenson EL PASO, TX	$35	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions):

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	DAVID & Aqusta EDMONDS 9317 WH BURGES ELPASO, TX 79925	$70	

Principal occupation / Job title (See Instructions): Retired Military

Employer (See Instructions):

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: JOHN COOK

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-30-5	MARY KAY Divalintino 10248 Stoneway ELP, TX 79925	$35	

9 Principal occupation / Job title (See Instructions): UnKnown

10 Employer (See Instructions):

CITY CLERK DEPT.
05 JUL 15 PM 6:50

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	ALFONSO PEREZ 2136 Zanzibar ELP, TX 79925	$100	

Principal occupation / Job title (See Instructions): UnKnown

Employer (See instructions):

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	DR & MRS Rene Rosas 4300 Donnybrook ELP, TX 79902	$100	

Principal occupation / Job title (See Instructions): Dentist - Retired

Employer (See instructions):

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	Bruce Scudday 1811O Murchison STE 206 EL PASO, TX 79902	$35	

Principal occupation / Job title (See Instructions): Doctor

Employer (See Instructions):

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-5	Don Henderson 4855 N. Mesa STE 102 EL PASO, TX 79912	$50	

Principal occupation / Job title (See Instructions): INSURANCE & Financial Planning

Employer (See Instructions):

27120

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Full name of contributor / out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-30-5	Janie Piland 8400 Whitus ELP, TX 79925	$35	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)

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05 JUL 5 PM 6:50

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-05	Robert Pearson 215 Franklin ELPASO, TX 79901	$100	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Attorney	

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-05	Edmundo Terrazas 3440 Rutherglen ELP, TX 79925	$25	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Unknown.	

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-30-05	Joe Oliva 10109 N. Dyer El Paso, TX 79924	$35	

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 ($)	In-kind contribution description (if applicable)
5-30-05	Leticia Dominguez 405 Trondale Apt A El Paso, TX 79912	$100	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
	27415

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / out-of-state PAC (ID#) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-29-05	Ballard C. Shapleigh 618 Mississippi El Paso, TX 79902	$ 50 00	

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

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Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-05	Tony Harder 5825 Nike Ln El Paso, TX 79924	$ 50 00	

Principal occupation / Job title (See Instructions): Unknown.

Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-5	Hilario H. Hernandez 10533 Tarleyton El Paso, TX 79924	$ 35 00	

Principal occupation / Job title (See Instructions): unknown

Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-05	Donna & Jimmy Mclver 4716 Academy El Paso, TX 79924-3229	$ 50 00	

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions)

Date	Full name of contributor / out-of-state PAC (ID#) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-5	Michael & Magdalene Iglar 6847 Rock Canyon El Paso, TX 7991?	$ 200 00	

Principal occupation / Job title (See Instructions): unknown.

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: John Cook

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / out-of-state PAC (ID#)	6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-29-05	GARY Weiser	1072 Los Jardines Circle El Paso, TX 79912	100	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
unknown.	

Date	Full name of contributor / out-of-state PAC (ID#)	Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

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 ($)	In-kind contribution description (if applicable)

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 ($)	In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)

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