

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: 1/18
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3 CANDIDATE / OFFICEHOLDER NAME	TITLE FIRST MI John NICKNAME LAST SUFFIX Cook	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
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4 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 3224 Mesa Verde Lane El Paso TX 79904	CITY CLERK DEPT. 09 APR - 8 PM 11:39
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5 CAMPAIGN TREASURER NAME	TITLE FIRST MI Suzanne, E. NICKNAME LAST SUFFIX Moody	Receipt # Amount Date Processed Date Imaged
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6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 3213 Zion El Paso TX 79904
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7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION () -
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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)
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9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 01/16/2009 04/08/2009
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10 ELECTION	ELECTION DATE Month Day Year 05/09/2009	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
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11 OFFICE OFFICE HELD (if any) Other -- Mayor	12 OFFICE SOUGHT (if known) Other -- Mayor
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13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	.. 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
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GO TO PAGE 2

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. ..

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

additional pages

17 NO REPORTABLE ACTIVITY

Check here if no reportable activity occurred during this reporting period. (Sign affidavit 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
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9085.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00
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4. TOTAL POLITICAL EXPENDITURES	\$ 14929.89
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OUTSTANDING LOAN TOTALS

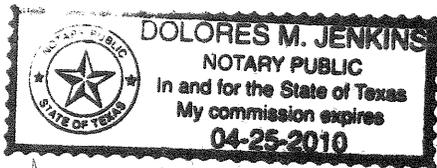
5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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19 AFFIDAVIT

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.

John F. Cook

Signature of Candidate or Officeholder



Dolores M. Jenkins

09 APR - 8 PM 1:39

CITY CLERK DEPT.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:
3/18

2 FILER NAME
John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date: 04/02/2009
5 Full name of contributor out-of-state PAC(ID# _____)
Brown and McCarroll PAC
6 Contributor address; City; State; Zip Code
111 Congress Ate 1400
Austin TX 78701

7 Amount of contribution (\$)
250.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date: 04/04/2009
Full name of contributor out-of-state PAC(ID# _____)
Gordon and Judith Cook
Contributor address; City; State; Zip Code
1300 Raynolds
El Paso TX 79903-3235

Amount of contribution (\$)
50.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 01/25/2009
Full name of contributor out-of-state PAC(ID# _____)
Ronald and Esther Costa
Contributor address; City; State; Zip Code
1376 Emerald Gate Ln
El Paso TX 79936

Amount of contribution (\$)
1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 03/23/2009
Full name of contributor out-of-state PAC(ID# _____)
Hector and Cynthia Delgado
Contributor address; City; State; Zip Code
221 N. Kansas Ste 2000
El Paso TX 79901

Amount of contribution (\$)
150.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 03/31/2009
Full name of contributor out-of-state PAC(ID# _____)
El Paso Sheriff's Officers Association PAC
Contributor address; City; State; Zip Code
747 E. San Antonio
Ste 103
El Paso TX 79901

Amount of contribution (\$)
2500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

CITY CLERK DEPT.
09 APR - 8 PM 1:39

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

CITY CLERK DEPT.

09 APR - 09 PM 1:39

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 4/18	
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date 03/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jan Engles 6 Contributor address; City; State; Zip Code 2219 King James El Paso TX 79903	7 Amount of contribution (\$) 25.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Irene Epperson Contributor address; City; State; Zip Code 5400 Silent Sun Ln El Paso TX 79912	Amount of contribution (\$) 400.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jerome and Debbie Falic Contributor address; City; State; Zip Code 6100 Hollywood Blvd 7th Floor Hollywood FL 33024	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Leon Falic Contributor address; City; State; Zip Code 6100 Hollywood Blvd 7th Floor Hollywood FL 33024	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 03/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Simon and Jana Falic Contributor address; City; State; Zip Code 6100 Hollywood Blvd 7th Floor Hollywood FL 33024	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

CITY CLERK DEPT.

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The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 5/18	
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date 01/26/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dean Inniss	7 Amount of contribution (\$) 250.00	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 7345 Luz de Villa Ct El Paso TX 79912		
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) LINEBARGER,GOGGAN,BLAIR LLP	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code PO BOX 17428 AUSTIN TX 78760		
Principal occupation (Optional)		Employer (Optional)	
Date 02/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Richard Mattersdorff	Amount of contribution (\$) 110.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 9101Dyer Ste.202 El Paso TX 79924		
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Paul and Sandra Maxwell	Amount of contribution (\$) 250.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 709 Waltham Ct. El Paso TX 79922		
Principal occupation (Optional)		Employer (Optional)	
Date 03/28/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mayor Kenneth and Susana Miyagishima	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1510 Solano Dr. Ste D Las Cruces NM 88001		
Principal occupation (Optional)		Employer (Optional)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

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CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this report: 6/18	
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date 04/08/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) James Rey	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) In-kind donation of office space. \$1200 est value
6 Contributor address; City; State; Zip Code 501 N. Kansas El Paso TX 79901			
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 03/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ralph and Virginia Richards	Amount of contribution (\$) 400.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code PO 137 Fairacres NM 88003			
Principal occupation (Optional)		Employer (Optional)	
Date 04/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gregory Rocha	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 208 Flynn Drive El Paso TX 79932			
Principal occupation (Optional)		Employer (Optional)	
Date 03/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jaime and Martha Rubinstein	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7416 Luz De Lumbre El Paso TX 79912-8474			
Principal occupation (Optional)		Employer (Optional)	
Date 01/25/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dr. Richard Teschner	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1800 N. Stanton Unit 302 El Paso TX 79902			
Principal occupation (Optional)		Employer (Optional)	

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
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2 FILER NAME
John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date
01/20/2009

5 Payee name
AT&T

7 Amount (\$)
30.00

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)
Check 1462 www.mayorjohncook.com

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

Date
01/20/2009

Payee name
AT&T

Amount (\$)
50.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1458 Cellular Phones

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

Date
02/17/2009

Payee name
AT&T

Amount (\$)
30.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1473 www.mayorjohncook.com

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

Date
02/17/2009

Payee name
AT&T

Amount (\$)
50.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1474 227-9699 Cellular

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

CITY CLERK DEPT.
09 APR - 8 PM 1:39

POLITICAL EXPENDITURES

SCHEDULE F

09 APR - 8 PM 1:39
CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form. **1** Total pages report:
8/18

2 FILER NAME
John Cook **3 ACCOUNT #** (Ethics Commission filers)
00037443

4 Date 03/19/2009	5 Payee name AT&T	7 Amount (\$) 30.00
6 Payee address; City; State; Zip Code TX		

8 Purpose of expenditure (See instructions regarding type of information required.) Check 1490 www.mayorjohncook.com	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 03/19/2009	Payee name AT&T	Amount (\$) 50.00
Payee address; City; State; Zip Code TX		

Purpose of expenditure (See instructions regarding type of information required.) Check 1491 227-9699	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 02/18/2009	Payee name American Airlines	Amount (\$) 331.91
Payee address; City; State; Zip Code TX		

Purpose of expenditure (See instructions regarding type of information required.) Check 1485 Round trip Washington DC - Tram	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 01/23/2009	Payee name Amigo's Restaurant	Amount (\$) 28.31
Payee address; City; State; Zip Code Montana and Cotton El Paso TX 79902		

Purpose of expenditure (See instructions regarding type of information required.) Check 1485 Campaign Meeting	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 report:
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2 FILER NAME
John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date
03/28/2009

5 Payee name
Bank of America

7 Amount
(\$)
1185.90

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)
Check 1493 Phones,t-shirts,signs,round trip airline ticket El Paso to Austin to El Paso

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

Date
02/22/2009

Payee name
Black El Paso Democrats

Amount
(\$)
600.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1479 Banquet tickets

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

Date
02/17/2009

Payee name
Checks in the Mail

Amount
(\$)
69.76

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1485 Checks

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

Date
02/03/2009

Payee name
City of El Paso

Amount
(\$)
500.00

Payee address; City; State; Zip Code

#2 CIVIC CENTER PLAZA
EL PASO TX 79901

Purpose of expenditure (See instructions regarding type of information required.)
Check 1467 Filing Fee

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

09 APR -8 PM 1:39 CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
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2 FILER NAME
John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date 02/06/2009	5 Payee name Cricket Phones 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 41.36
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8 Purpose of expenditure (See instructions regarding type of information required.) Check 1485 Cellular phones	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 02/22/2009	Payee name David's Apparel Payee address; City; State; Zip Code El Paso TX	Amount (\$) 297.60
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Purpose of expenditure (See instructions regarding type of information required.) Check 1482 T-shirts	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 02/15/2009	Payee name David's Banners Payee address; City; State; Zip Code Carnige El Paso TX	Amount (\$) 873.27
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Purpose of expenditure (See instructions regarding type of information required.) Check 1478 Signs	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 04/06/2009	Payee name David's Banners Payee address; City; State; Zip Code Carnige El Paso TX	Amount (\$) 552.08
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Purpose of expenditure (See instructions regarding type of information required.) Check 1502 Signs	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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09 APR - 8 PM 1:40
CITY CLERK DEPT.

POLITICAL EXPENDITURES

SCHEDULE F

09 APR -8 PM 1:40
CITY CLERK DEPT.

The **INSTRUCTION GUIDE** explains how to complete this form. **1** Total pages report: 11/18

2 FILER NAME
John Cook **3** ACCOUNT # (Ethics Commission filers)
00037443

4 Date 02/03/2009	5 Payee name El Paso Club 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 1350.96
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8 Purpose of expenditure (See instructions regarding type of information required.) Check 1466 December fundraiser	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 04/02/2009	Payee name El Pasoans for Jesus Payee address; City; State; Zip Code El Paso TX	Amount (\$) 490.00
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Purpose of expenditure (See instructions regarding type of information required.) Check 1498 Tables for the Mayor's Prayer Luncheon	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 02/19/2009	Payee name Expedia Payee address; City; State; Zip Code TX	Amount (\$) 7.00
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Purpose of expenditure (See instructions regarding type of information required.) Check 1485 Airline Ticket Service Charge	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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Date 04/05/2009	Payee name FOOD BASKET Payee address; City; State; Zip Code EL PASO TX 79924	Amount (\$) 59.90
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Purpose of expenditure (See instructions regarding type of information required.) Check 1501 Food supplies for Hot Dogs with the Ma - yor events	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
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POLITICAL EXPENDITURES

SCHEDULE F

09 MAR - 8 11 PM '40

CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 12/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 03/31/2009	5 Payee name Fiesta de las Flores 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 10.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1496 Donation		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/06/2009	Payee name Fr Martinez Center Payee address; City; State; Zip Code Alameda El Paso TX	Amount (\$) 50.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1504 Prizes for Bingo		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/30/2009	Payee name Greater El Paso Chamber of Commerce Payee address; City; State; Zip Code El Paso TX	Amount (\$) 900.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1394 Tables for State of the City Address		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/06/2009	Payee name Happiness Center Payee address; City; State; Zip Code Carolina El Paso TX	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1503 Prizes for Bingo		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

09 APR - 8 PM 1:40
CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 13/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 04/03/2009	5 Payee name Keep El Paso Beautiful 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 50.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1499 Donation for Great American Clean-up		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/06/2009	Payee name Ken Sutherland Payee address; City; State; Zip Code El Paso TX	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1464 Campaign Management		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/11/2009	Payee name Ken Sutherland Payee address; City; State; Zip Code El Paso TX	Amount (\$) 2500.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1472 Campaign management		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/11/2009	Payee name Ken Sutherland Payee address; City; State; Zip Code El Paso TX	Amount (\$) 105.59
Purpose of expenditure (See instructions regarding type of information required.) Check 1469 reimbursement for digital camera		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

09 APR - 8 PM 1:40
CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 14/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 02/22/2009	5 Payee name Ken Sutherland <hr/> 6 Payee address; City; State; Zip Code El Paso TX	7 Amount (\$) 100.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1481 Petty Cash	9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 03/09/2009	Payee name Ken Sutherland <hr/> Payee address; City; State; Zip Code El Paso TX	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1488 Petty Cash	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 02/11/2009	Payee name Michelle Melendrez <hr/> Payee address; City; State; Zip Code El Paso TX	Amount (\$) 225.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1470 Web design	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 02/11/2009	Payee name Michelle Melendrez <hr/> Payee address; City; State; Zip Code El Paso TX	Amount (\$) 18.46
Purpose of expenditure (See instructions regarding type of information required.) Check 1471 Balance on design fee	Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	

POLITICAL EXPENDITURES

SCHEDULE F

CITY CLERK DEPT.

09 APR 9 PM 1:40

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 15/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 03/09/2009	5 Payee name Mountain Park Association 6 Payee address; City; State; Zip Code TX	7 Amount (\$) 50.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1489 Donation		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/09/2009	Payee name National Area Support Foundation Payee address; City; State; Zip Code El Paso TX	Amount (\$) 50.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1487 Contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/23/2009	Payee name Northeast Printing Payee address; City; State; Zip Code Dyer El Paso TX	Amount (\$) 284.70
Purpose of expenditure (See instructions regarding type of information required.) Check 1492 Campaign Literature		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/28/2009	Payee name Gloria and Walt Phillips Payee address; City; State; Zip Code 10060 New Castle El Paso TX 79924	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1484 Contribution		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

CITY CLERK DEPT.
09 APR 08 PM 1:10

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 16/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 03/30/2009	5 Payee name Reuel Group 6 Payee address; City; State; Zip Code 6006 North Mesa El Paso TX 79912	7 Amount (\$) 1500.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1495 Database		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/07/2009	Payee name Southwest Airlines Payee address; City; State; Zip Code El Paso TX	Amount (\$) 65.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1485 Round trip to Austin - Tram		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/31/2009	Payee name Su Casa Restaurant Payee address; City; State; Zip Code Yandell El Paso TX	Amount (\$) 12.11
Purpose of expenditure (See instructions regarding type of information required.) Check 1497 Tejano Democrats Meeting		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/01/2009	Payee name Tejano Democrats Payee address; City; State; Zip Code TX	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1476 Donation for Golf Tournament		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

09 APR - 8 PM 1:40
CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 17/18
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission filers) 00037443
4 Date 03/01/2009	5 Payee name Tejano Democrats 6 Payee address; City; State; Zip Code TX	7 Amount (\$) 60.00
8 Purpose of expenditure (See instructions regarding type of information required.) Check 1477 Membership fee		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/17/2009	Payee name The Cooks Catering Payee address; City; State; Zip Code 3224 Mesa Verde El Paso TX 79904	Amount (\$) 288.16
Purpose of expenditure (See instructions regarding type of information required.) Check 1475 Hot dogs for Ft. Bliss troops - hot dogs - with the mayor		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 03/05/2009	Payee name Tony Escobado Payee address; City; State; Zip Code El Paso TX	Amount (\$) 200.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1486 Sign Installation and other campaign work		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 02/23/2009	Payee name U.S. Postmaster Payee address; City; State; Zip Code El Paso TX	Amount (\$) 84.00
Purpose of expenditure (See instructions regarding type of information required.) Check 1465 Stamps		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES

SCHEDULE F

CITY CLERK DEPT.

09 APR 2009 8 PM 1:40

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
18/18

2 FILER NAME
John Cook

3 ACCOUNT # (Ethics Commission filers)
00037443

4 Date
01/20/2009

5 Payee name
Vantage Point

7 Amount
(\$)
734.69

6 Payee address; City; State; Zip Code
1109 Arizona
El Paso TX 79902

8 Purpose of expenditure (See instructions regarding type of information required.)
Check 1459 Graphic Design

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

Date
02/11/2009

Payee name
Vantage Point

Amount
(\$)
54.13

Payee address; City; State; Zip Code
1109 Arizona
El Paso TX 79902

Purpose of expenditure (See instructions regarding type of information required.)
Check 1468 Web Banner

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

Date
04/03/2009

Payee name
West Point Society

Amount
(\$)
60.00

Payee address; City; State; Zip Code
El Paso TX

Purpose of expenditure (See instructions regarding type of information required.)
Check 1500 Annual Banquet on Ft. Bliss

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