



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

**13 C/OH NAME** Cook, John (Mr.)

**14 ACCOUNT #** (Ethics Commission filers)  
00037443

**15 NOTICE FROM POLITICAL COMMITTEE(S)**

.. This box is for notice of 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

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

**16 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)

\$

4,633.00

**EXPENDITURE TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

11,373.70

**CONTRIBUTION BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

3,240.73

**OUTSTANDING LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

24,267.02

**17 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 Cook

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Print name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/9 Report: 3/21	
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00037443	
<b>4</b> Date  10/10/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aden, Elizabeth (Ms.)  ..... <b>6</b> Contributor address; City; State; Zip Code Mt. Vernon, TX 75457-3231	<b>7</b> Amount of contribution (\$)  \$10.00	<b>8</b> In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions) N/A		<b>10</b> Employer (See Instructions) N/A	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anchondo, Danny (Mr.)  ..... Contributor address; City; State; Zip Code El Paso, TX 79903	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin, David and Susan  ..... Contributor address; City; State; Zip Code El Paso, TX 79912-2005	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Batt, Ira and Irene  ..... Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bautista, Irma (Ms.)  ..... Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None	





# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 4/9 Report: 6/21	
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00037443	
<b>4</b> Date  10/17/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Enriquez, Arturo (Mr.)  <b>6</b> Contributor address; City; State; Zip Code El Paso, TX 79902-2425	<b>7</b> Amount of contribution (\$)  \$50.00	<b>8</b> In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions) photographer		<b>10</b> Employer (See Instructions) self	
Date  10/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Ruth (Ms.)  Contributor address; City; State; Zip Code El Paso, TX 79904	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goolsbee, Linda (Ms.)  Contributor address; City; State; Zip Code Abilene, TX 79608-5108	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holguin, Hector (Mrs.)  Contributor address; City; State; Zip Code El Paso, TX 79922	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Housewife		Employer (See Instructions) Self	
Date  10/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keating, Joan (Mrs.)  Contributor address; City; State; Zip Code Colorado Springs, CO 80907-7810	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Colorado Springs School District 11	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/9 Report: 7/21	
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date  10/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lerma, Regina (Ms.) ..... 6 Contributor address; City; State; Zip Code El Paso, TX 79936	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) none		10 Employer (See Instructions) none	
Date  10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lone Star Democratic Club ..... Contributor address; City; State; Zip Code The Woodlands, TX 77387-9151	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mancera, Ray (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79935	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Donna (Mrs.) ..... Contributor address; City; State; Zip Code El Paso, TX 79915	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) City of El Paso		Employer (See Instructions) Clerk	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Reuben (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79911	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 6/9 Report: 8/21	
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00037443	
<b>4</b> Date  10/08/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Reuben (Mr.) ..... <b>6</b> Contributor address; City; State; Zip Code El Paso, TX 79915	<b>7</b> Amount of contribution (\$)  \$100.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Steve (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79911	Amount of contribution (\$)  \$40.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown	
Date  10/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maxwell, Paul (Mr.) ..... Contributor address; City; State; Zip Code Santa Teresa, NM 88008-9412	Amount of contribution (\$)  \$200.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) painter		Employer (See Instructions) self	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, Alyssa (Ms.) ..... Contributor address; City; State; Zip Code El Paso, TX 79904	Amount of contribution (\$)  \$1.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) El Paso Independent School District	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, Bill (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of contribution (\$)  \$20.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/9 Report: 9/21	
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date  10/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, Jimmy (Mr.) ..... 6 Contributor address; City; State; Zip Code El Paso, TX 79904	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Physical Therapist		10 Employer (See Instructions) Mentis	
Date  10/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nguyen, Pho ..... Contributor address; City; State; Zip Code Westwood, MA 02090-2933	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nunez, Diana (Ms.) ..... Contributor address; City; State; Zip Code El Paso, TX 79904	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Training Specialist		Employer (See Instructions) City of El Paso	
Date  10/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paternoster, Laurie (Mrs.) ..... Contributor address; City; State; Zip Code El Paso, TX 79922-2025	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Development		Employer (See Instructions) El Paso Explorem	
Date  10/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenbaum, Jerry (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79944-0659	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) EPLA Limo Service	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 8/9 Report: 10/21	
<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 00037443	
<b>4</b> Date  10/08/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rosenbaum, Noel (Mrs.)  <b>6</b> Contributor address; City; State; Zip Code El Paso, TX 79912-1706	<b>7</b> Amount of contribution (\$)  \$150.00	<b>8</b> In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions) Retired		<b>10</b> Employer (See Instructions) None	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rubinstein, David (Mr.)  Contributor address; City; State; Zip Code El Paso, TX 79911-3053	Amount of contribution (\$)  \$11.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) none	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rubinstein, Hanna (Mr.)  Contributor address; City; State; Zip Code El Paso, TX 79911-3053	Amount of contribution (\$)  \$11.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) none	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scherr, Alma (Mr.)  Contributor address; City; State; Zip Code El Paso, TX 79901	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) The Broker Company	
Date  10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scherr, Jim (Mr.)  Contributor address; City; State; Zip Code El Paso, TX 79901	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/9 Report: 11/21	
2 FILER NAME Cook, John (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00037443	
4 Date 10/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Ingo (Mr.) ..... 6 Contributor address; City; State; Zip Code El Paso, TX 79934	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Technician		10 Employer (See Instructions) City of El Paso	
Date 10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyler, Ella (Ms.) ..... Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none	
Date 10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Megan (Ms.) ..... Contributor address; City; State; Zip Code El Paso, TX 79904	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None	
Date 10/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods, Virginia (Ms.) ..... Contributor address; City; State; Zip Code Austin, TX 78681	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none	
Date 10/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ybarra, George (Mr.) ..... Contributor address; City; State; Zip Code El Paso, TX 79903	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions) retired	



# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 1/9 Report: 13/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/02/2014	<b>5</b> Payee name Alnon				
<b>6</b> Amount (\$) \$8.00	<b>7</b> Payee address City; State; Zip Code Hondo Pass El Paso, TX 79924				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Truck Wash		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/08/2014	Payee name Amigo's Restaurant				
Amount (\$) \$199.10	Payee address City; State; Zip Code 2000 Montana El Paso, TX 79903				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Refreshments at Fundraiser		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/01/2014	Payee name AT&T				
Amount (\$) \$167.46	Payee address City; State; Zip Code PO Box 5001 Carol Stream, IL 60197-5001				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cellular Phones		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/11/2014	Payee name AT&T				
Amount (\$) \$169.92	Payee address City; State; Zip Code PO Box 5001 Carol Stream, IL 60197-5001				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Internet and phones		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/9 Report: 14/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443
<b>4</b> Date 10/21/2014	<b>5</b> Payee name Brick Oven Pizza			
<b>6</b> Amount (\$) \$55.87	<b>7</b> Payee address City; State; Zip Code 9911 Brodie Lane STE 600 Austin, TX 78748			
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meal for volunteers at speaking event <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/05/2014	Payee name Brodie's Food Mart			
Amount (\$) \$58.77	Payee address City; State; Zip Code 7612 Brodie Lane Austin, TX 78748			
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/16/2014	Payee name China Delight			
Amount (\$) \$24.79	Payee address City; State; Zip Code 1100 north Loop 336 Conroe, TX 77303			
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 10/25/2014	Payee name Circle G			
Amount (\$) \$53.40	Payee address City; State; Zip Code 2024 S Hwy 183 Gonzales, TX 78629			
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 3/9 Report: 15/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/17/2014		<b>5</b> Payee name Citgo Gas and Grocery			
<b>6</b> Amount (\$) \$14.97		<b>7</b> Payee address City; State; Zip Code 12300 Bissonnet Houston, TX 77099			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/06/2014		Payee name Corner Store			
Amount (\$) \$23.70		Payee address City; State; Zip Code 8205 Brodie Austin, TX 78745			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/07/2014		Payee name Corner Store			
Amount (\$) \$38.50		Payee address City; State; Zip Code 8205 Brodie Austin, TX 78745			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/15/2014		Payee name Corner Store			
Amount (\$) \$63.43		Payee address City; State; Zip Code 8205 Brodie Austin, TX 78745			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/9 Report: 16/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/23/2014	<b>5</b> Payee name Jones Food Mart #1				
<b>6</b> Amount (\$) \$62.41	<b>7</b> Payee address City; State; Zip Code 1817 St Joseph Gonzales, TX 78628				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/16/2014	Payee name North Frazier Market				
Amount (\$) \$63.18	Payee address City; State; Zip Code 1700 N. Frazier Conroe, TX 77301				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/06/2014	Payee name North Texas Toll Authority				
Amount (\$) \$10.53	Payee address City; State; Zip Code 5900 W. Plano Pkwy Plano, TX 78064				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Tolls		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/19/2014	Payee name Palms Car Waah				
Amount (\$) \$8.00	Payee address City; State; Zip Code 6811 Brodie Austin, TX 78745				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Truck Wash		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	



# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/9 Report: 17/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/16/2014	<b>5</b> Payee name Radio Saigon Dallas				
<b>6</b> Amount (\$) \$2,000.00	<b>7</b> Payee address City; State; Zip Code 10935 Estate Lane Dallas, TX 75238				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense			<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/16/2014	Payee name Radio Saigon Houston				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 10613 Bellaire Blvd #900 Houston, TX 77072				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/11/2014	Payee name Rene Cortez				
Amount (\$) \$3,000.00	Payee address City; State; Zip Code 5158 Garry Owen El Paso, TX 79903				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook ADS	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/03/2014	Payee name Sam's Club				
Amount (\$) \$49.10	Payee address City; State; Zip Code 7001 Gateway West El Paso, TX 79925				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 6/9 Report: 18/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/04/2014	<b>5</b> Payee name Sam's Club				
<b>6</b> Amount (\$) \$23.31	<b>7</b> Payee address City; State; Zip Code 7001 Gateway West El Paso, TX 79925				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District			<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/07/2014	Payee name Sam's Club				
Amount (\$) \$70.27	Payee address City; State; Zip Code 7001 Gateway West El Paso, TX 79925				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/14/2014	Payee name Sam's Club				
Amount (\$) \$53.28	Payee address City; State; Zip Code 7001 Gateway West El Paso, TX 79925				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/18/2014	Payee name Sam's Club Waco				
Amount (\$) \$39.17	Payee address City; State; Zip Code 2301 E Waco Dr Waco, TX 76705				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District			Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 7/9 Report: 19/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/07/2014	<b>5</b> Payee name Stripes #2271				
<b>6</b> Amount (\$) \$31.42	<b>7</b> Payee address City; State; Zip Code 1723 N. Hwy 285 Ft Stockton, TX 79735				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/06/2014	Payee name Taco Bell				
Amount (\$) \$1.29	Payee address City; State; Zip Code 34003 Katy Freeway Brookshire, TX 77423				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Lunch <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/06/2014	Payee name Taco Bell				
Amount (\$) \$9.26	Payee address City; State; Zip Code 14940 FM 1663 Winnie, TX 77665				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supper <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 10/15/2014	Payee name Taco Bell				
Amount (\$) \$12.09	Payee address City; State; Zip Code 3324 Slaughter Austin, TX 78748				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supper <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 8/9 Report: 20/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/06/2014	<b>5</b> Payee name Timewise #251				
<b>6</b> Amount (\$) \$60.42	<b>7</b> Payee address City; State; Zip Code 7100 Garth Baytown, TX 77521				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fuel		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/17/2014	Payee name U.S. Postal Service				
Amount (\$) \$185.61	Payee address City; State; Zip Code Bellflower BLVD Houston, TX 77099				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/08/2014	Payee name Vamos El Paso PAC				
Amount (\$) \$2,301.00	Payee address City; State; Zip Code 109 N. Oregon STE 1200 El Paso, TX 79901				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> For El Paso GOTV Statewide Candidate Campaign ADs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/12/2014	Payee name WalMart				
Amount (\$) \$17.85	Payee address City; State; Zip Code 4530 TransMountain El Paso, TX 79924				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Envelopes		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 9/9 Report: 21/21		<b>2</b> FILER NAME Cook, John (Mr.)		<b>3</b> ACCOUNT # (TEC filers) 00037443	
<b>4</b> Date 10/04/2014	<b>5</b> Payee name Ward, Megan (Ms.)				
<b>6</b> Amount (\$) \$450.00	<b>7</b> Payee address City; State; Zip Code 3224 Mesa Verde Lane El Paso, TX 79904				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Management		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/05/2014	Payee name Yaghi's Pizzeria				
Amount (\$) \$15.68	Payee address City; State; Zip Code 4220 William Cannon Austin, TX 79749				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supper		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/14/2014	Payee name Yaghi's Pizzeria				
Amount (\$) \$15.96	Payee address City; State; Zip Code 4220 William Cannon Austin, TX 79749				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supper		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 10/24/2014	Payee name Yaghi's Pizzeria				
Amount (\$) \$15.96	Payee address City; State; Zip Code 4220 William Cannon Austin, TX 79749				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> meal		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	