

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:  
1/11

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI  
John  
NICKNAME LAST SUFFIX  
Cook

OFFICE USE ONLY

Date Received  
Date Hand-delivered or Date Postmarked

4 CANDIDATE / OFFICEHOLDER ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
3224 Mesa Verde Lane  
El Paso TX 79904  
 Change of Address

Date Hand-delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI  
Tram  
NICKNAME LAST SUFFIX  
Cook

Receipt # Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
3224 Mesa Verde Lane  
El Paso TX 79904

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 THROUGH Month Day Year  
04/01/2003 04/25/2003

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  
05/03/2003  
 Primary  Runoff  General  Special

11 OFFICE

OFFICE HELD (if any)  
4

12 OFFICE SOUGHT (if known)  
4

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

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

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

**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 **\$ 265.00**

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 6685.00**

**EXPENDITURE TOTALS**

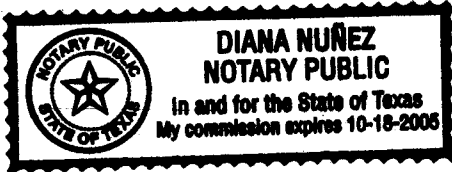
3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 59.44**

4. TOTAL POLITICAL EXPENDITURES **\$ 11536.72**

**OUTSTANDING LOAN TOTALS**

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 7035.50**

**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

Sworn to & subscribed before me, by the said John Cook, this the 24th day of April, 2003, to certify which, witness my hand & seal of office.

*Diana Nuñez* Diana Nuñez Notary

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# 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:  
3/11

**2** FILER NAME  
John Cook

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

**4** Date: 04/01/2003  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
AGC of El Paso - PAC  
**6** Contributor address; City; State; Zip Code  
4625 Ripley Dr.  
El Paso TX 79922

**7** Amount of contribution (\$): 250.00  
**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional)

**10** Employer (Optional)

Date: 04/04/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
David Alvidrez  
Contributor address; City; State; Zip Code  
3215 Malapai Lane  
El Paso TX 79904

Amount of contribution (\$): 250.00  
In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/23/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Conrad Conde  
Contributor address; City; State; Zip Code  
3117 Devils Tower  
El Paso TX 79904

Amount of contribution (\$): 300.00  
In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/02/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
El Paso Association of Builders PAC  
Contributor address; City; State; Zip Code  
6046 Surety Drive  
El Paso TX 79905

Amount of contribution (\$): 500.00  
In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date: 04/09/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
El Paso Association of Firefighters - PAC  
Contributor address; City; State; Zip Code  
PO BOX 370487  
El Paso TX 79937

Amount of contribution (\$): 500.00  
In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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# 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:  
4/11

**2** FILER NAME  
John Cook

**3** ACCOUNT # (Ethics Commission files)  
00037443

**4** Date: 04/04/2003  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Peter and Marina Felix III  
**6** Contributor address; City; State; Zip Code  
11534 Jacquelin Ann Ct  
El Paso TX 79936

**7** Amount of contribution (\$): 500.00  
**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional) **10** Employer (Optional)

Date: 04/19/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Jose Fong  
Contributor address; City; State; Zip Code  
1504 Vista Real  
El Paso TX 79925

Amount of contribution (\$): 200.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/23/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Kenny and Manard Haddad  
Contributor address; City; State; Zip Code  
701 E. Yandell  
El Paso TX 79902

Amount of contribution (\$): 100.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/10/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Woody Hunt  
Contributor address; City; State; Zip Code  
PO Box 12220  
El Paso TX 79913

Amount of contribution (\$): 750.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/08/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Richard Mattersdorff  
Contributor address; City; State; Zip Code  
9101Dyer Ste.202  
El Paso TX 79924

Amount of contribution (\$): 100.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A 1**  
(FOR FORMS C/DH & SPAC)

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** Total pages this report:  
5/11

**2** FILER NAME  
John Cook

**3** ACCOUNT # (Ethics Commission files)  
00037443

**4** Date: 04/15/2003  
**5** Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Carroll Maxon  
-----  
**6** Contributor address; City; State; Zip Code  
4820 Olmos  
El Paso TX 79922

**7** Amount of contribution (\$): 270.00  
**8** In-kind contribution description (if applicable)

**9** Principal occupation (Optional) **10** Employer (Optional)

Date: 04/15/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Juan Mimbela  
-----  
Contributor address; City; State; Zip Code  
4532 C. J. Levan  
El Paso TX 79924

Amount of contribution (\$): 600.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/01/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Patricia Palafox  
-----  
Contributor address; City; State; Zip Code  
5176 Cielo Del Rio Pl  
El Paso TX 79932

Amount of contribution (\$): 100.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/01/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Raba-Kistner PAC  
-----  
Contributor address; City; State; Zip Code  
PO Box 690287  
El Paso TX 78269-0287

Amount of contribution (\$): 250.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

Date: 04/01/2003  
Full name of contributor  out-of-state PAC(ID# \_\_\_\_\_)  
Bernard Rosenblum  
-----  
Contributor address; City; State; Zip Code  
224 W. Overland  
El Paso TX 79901

Amount of contribution (\$): 75.00  
In-kind contribution description (if applicable)

Principal occupation (Optional) Employer (Optional)

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# 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: 6/11	
2 FILER NAME John Cook		3 ACCOUNT # (Ethics Commission files) 00037443	
4 Date 04/02/2003	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bernard Rosenblum  6 Contributor address; City; State; Zip Code 224 W. Overland El Paso TX 79901	7 Amount of contribution (\$) 75.00	8 In-kind contribution description (if applicable)
9 Principal occupation (Optional)		10 Employer (Optional)	
Date 04/16/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chris and Sylvia Sanez  Contributor address; City; State; Zip Code 10187 Bon Aire Dr. El Paso TX 79924	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/15/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) TREPAC - Texas Association of Realtors - PAC  Contributor address; City; State; Zip Code PO Box 1986 TX	Amount of contribution (\$) 1000.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 04/22/2003	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sean Taylor  Contributor address; City; State; Zip Code 11445 Cedar Oak El Paso TX 79936	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	



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# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
8/11

2 FILER NAME  
John Cook

3 ACCOUNT # (Ethics Commission filers)  
00037443

4 Date  
04/17/2003

5 Payee name  
Chapin Drama Boosters

7 Amount (\$)  
150.00

6 Payee address; City; State; Zip Code

TX

8 Purpose of expenditure (See instructions regarding type of information required.)  
Voting Poll Volunteers

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

Date  
04/07/2003

Payee name  
James Clarkston

Amount (\$)  
100.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Guitar back up for radio commercial

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

Date  
04/11/2003

Payee name  
H&H Dinero

Amount (\$)  
1408.37

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Postage and Mailing Service for Newsletter

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

Date  
04/10/2003

Payee name  
KHEY AM

Amount (\$)  
153.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Radio Commercials

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:  
9/11

**2** FILER NAME  
John Cook

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

**4** Date  
04/10/2003

**5** Payee name  
KHEY-FM

**7** Amount  
(\$)  
1045.50

**6** Payee address; City; State; Zip Code

TX

**8** Purpose of expenditure (See instructions regarding type of information required.)  
Radio ads

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

Date  
04/22/2003

Payee name  
KISS Radio

Amount  
(\$)  
1555.50

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Radio Spots

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

Date  
04/10/2003

Payee name  
KOFX

Amount  
(\$)  
2040.00

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Radio Ads

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

Date  
04/07/2003

Payee name  
KROD

Amount  
(\$)  
1453.50

Payee address; City; State; Zip Code

4180 N Mesa  
El Paso TX 79912

Purpose of expenditure (See instructions regarding type of information required.)  
Radio Spots

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:  
10/11

**2** FILER NAME  
John Cook

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

**4** Date  
04/10/2003

**5** Payee name  
KTSM Radio

**7** Amount  
(\$)  
510.00

**6** Payee address; City; State; Zip Code

TX

**8** Purpose of expenditure (See instructions regarding type of information required.)  
Radio Commercials

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

Date  
04/21/2003

Payee name  
Leo's Mexican Restaurant

Amount  
(\$)  
35.00

Payee address; City; State; Zip Code

El Paso TX 79901

Purpose of expenditure (See instructions regarding type of information required.)  
Lunch with campaign committee for planning session

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

Date  
04/12/2003

Payee name  
Olin Mills

Amount  
(\$)  
156.85

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Photos for Newsletter

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

Date  
04/14/2003

Payee name  
PDX Printing

Amount  
(\$)  
2652.30

Payee address; City; State; Zip Code

TX

Purpose of expenditure (See instructions regarding type of information required.)  
Newsletter

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:  
11/11

**2** FILER NAME  
John Cook

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

**4** Date  
04/18/2003

**5** Payee name  
Peter Piper Pizza

**7** Amount  
(\$)  
25.00

**6** Payee address; City; State; Zip Code  
Dyer  
El Paso TX 79924

**8** Purpose of expenditure (See instructions regarding type of information required.)  
Game tokens for volunteers

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

Date  
04/18/2003

Payee name  
Peter Piper Pizza

Amount  
(\$)  
129.84

Payee address; City; State; Zip Code  
Dyer  
El Paso TX 79924

Purpose of expenditure (See instructions regarding type of information required.)  
Pizza Party for Northeast Parade volunteers

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

Date  
04/10/2003

Payee name  
Vantage Point

Amount  
(\$)  
62.42

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

Purpose of expenditure (See instructions regarding type of information required.)  
Changes to Monitor Ad

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