FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 58 00086313 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Molly C. NAME Date Received **ELECTRONICALLY FILED** 07/13/2023 NICKNAME LAST **SUFFIX** Cook CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** PO Box 667238 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77266 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Leif NAME NICKNAME LAST **SUFFIX** Hatlen STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 13527 N. Tracewood Bend **ADDRESS** (Residence or Business) Houston, TX 77077 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 493-3107 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified Х reporting limit **PERIOD** Month Day Month Day Year Year **COVERED** 01/01/2023 **THROUGH** 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

Forms provided by Texas Ethics Commission

11 OFFICE

OFFICE HELD (if any)

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12 OFFICE SOUGHT (if known)

State Senator District 15

Version V3.5.1.a18ea2ca

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 58

13 C / OH NAME	Cook, Molly C. (Ms.)		14 Filer ID 00086313	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political exp These expenditures may have been made w officeholders are required to report this infor	ithout the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NA	AME	
		COMMITTEE CAMPAIGN TREASURER AD	DDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER ES OF LOANS, OR CONTRIBUTIONS MADI		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF L	LOANS)	\$ 59,796.80
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 13,489.96
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 51,039.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAN TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			penalty of perjury, that the accudes all information required tode.	
			Ms. Molly C. Cook	
		Signat	ture of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		rtify which, witness my hand and seal of offic		
Signature of office	cer administering	Printed name of officer administering	Title of office	r administering oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 58 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00086313 Cook, Molly C. (Ms.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 59,796.80 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 3. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 13,489.96 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	MONEI	ARY POLITICAL C	CONTRIBUTION	NS	SCHEDULE A1
	The Instru	ction Guide explains how	to complete this for	rm.	1 Total pages Schedule A1: Sch: 1/34 Rpt: 4/58
2	FILER NAME Cook, Molly	C. (Ms.)			3 Filer ID (Ethics Commission Filers) 00086313
4	Date 06/30/2023	5 Full name of contributor Achar, Elizabeth6 Contributor address; City; St	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$20.00
8	Principal occu	Baltimore, MD 21228 pation / Job title (See Instructions) [9	Employer (See Instructions	s)
Ü	Teacher	pation / Job title (Jee matractions	,	Baltimore County Public	
	Date 06/30/2023	Full name of contributor Ajnsztajn, Alec Contributor address; City; St Houston, TX 77006	out-of-state PAC (ID#:		Amount of Contribution (\$)
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
	PhD Candida	ate		Rice University	
	Date 06/30/2023	Full name of contributor Alejandro, Desiree Contributor address; City; St	out-of-state PAC (ID#:)	Amount of Contribution (\$) \$100.00
		Houston, TX 77019			
		pation / Job title (See Instructions ons Manager		Employer (See Instructions Memorial Park Conserv	•
	Date 05/31/2023	Full name of contributor Barahona, Gabriela Contributor address; City; St Houston, TX 77019	out-of-state PAC (ID#:		Amount of Contribution (\$) \$50.00
	Principal occu Non profit	pation / Job title (See Instructions)	Employer (See Instructions Non profit	s)
	Date 06/30/2023	Full name of contributor Barahona, Gabriela Contributor address; City; St Houston, TX 77019	out-of-state PAC (ID#:		Amount of Contribution (\$)
	Principal occu Non profit	pation / Job title (See Instructions		Employer (See Instructions Non profit	s)

	MONEI	ARY POLITICAL CO	NIRIBUTION	S		SCHEDULI	A1
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 2/34 Rpt: 5/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	Filers)
4	Date 06/30/2023	Barrow, George 6 Contributor address; City; State;	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$20.00
8	Principal occu Engineer	Houston, TX 77009 pation / Job title (See Instructions)		Employer (See Instructions TEI Planning + Design)		
	Date 06/30/2023	Full name of contributor Bhat, Savita Contributor address; City; State; Houston, TX 77059-3554	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Baker	pation / Job title (See Instructions)		Employer (See Instructions Thoroughbread)		
	Date 06/30/2023	Full name of contributor Biundo, Bruce Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)		Amount of Contribution (\$)	\$20.00
	District	Houston, TN 77096		Familia (Carabatan)			
	pharmacist	pation / Job title (See Instructions)		Employer (See Instructions pcca)		
	Date 05/31/2023	Full name of contributor Black, Kate Contributor address; City; State; Houston, TX 77008	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions DRTX)		
	Date 06/30/2023	Full name of contributor Black, Kate Contributor address; City; State; Houston, TX 77008	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions DRTX)		
							

	MONEI	ARY POLITICAL CO	DNIRIBUTION	S		SCHEDULE	A1
	The Instruc	ction Guide explains how to	o complete this forr	n.	1	Total pages Schedule A1: Sch: 3/34 Rpt: 6/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	Filers)
4	Date 06/30/2023	5 Full name of contributor Black, Kate6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu Attorney	Houston, TX 77008 pation / Job title (See Instructions)	9	Employer (See Instructions DRTX	i)		
	Date 06/30/2023	Full name of contributor Block, Robinson Contributor address; City; State Houston, TX 77009	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$27.00
	Principal occu Firefighter	pation / Job title (See Instructions)		Employer (See Instructions Houston Fire Departmen			
	Date 06/30/2023	Full name of contributor Blohm-Chapman, Nicholas Contributor address; City; State	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Server/Barte	,		El Topo			
	Date 05/31/2023	Full name of contributor Boston, Paul Contributor address; City; State Houston, TX 77018	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Social worke	pation / Job title (See Instructions)		Employer (See Instructions Harris county	5)		
	Date 06/30/2023	Full name of contributor Boysen, Gloria Contributor address; City; State Schertz, TX 78154	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu Marketing ar	pation / Job title (See Instructions) nd sales		Employer (See Instructions Transit Co SA TX)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/34 Rpt: 7/58
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission Filers) 00086313
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID# Bryant, Lee 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00
8	Principal occu	Pation / Job title (See Instructions)	9 Employer (See Instructions	 s)	
	Not Employe	ed	Not Employed		
	Date 02/06/2023	Full name of contributor out-of-state PAC (ID) COOK, MARK Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$) \$11,000.00
	Dringinal occu	Montgomery, TX 77356 pation / Job title (See Instructions)	Employer (See Instructions	·)	
	Retired	pation 7 Job title (See Instructions)	Not Employed	>)	
	Date 06/30/2023	Full name of contributor	#:)		Amount of Contribution (\$) \$100.00
	Delegale al acces	SEATTLE, WA 98115	Four levers (One brothers in	_	
	Software en	pation / Job title (See Instructions) gineer	Employer (See Instructions Patreon inc	5)	
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Carleton, Robert Contributor address; City; State; Zip Code Houston, TX 77030	#:)		Amount of Contribution (\$) \$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Consultant		TEI Planning & Design		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID) Castro, Jaime Contributor address; City; State; Zip Code Houston, TX 77008	#:)		Amount of Contribution (\$) \$50.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Software Ad	ministrator	CoreAVI		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/34 Rpt: 8/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	on Filers)
4	Date 06/30/2023	5 Full name of contributor Cazares, Gabe6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Nonprofit Ma	Houston, TX 77011 pation / Job title (See Instructions anagement) 9	Employer (See Instructions LINK Houston	<u> </u> s)		
	Date 06/30/2023	Full name of contributor Chennisi, Susan Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions ed		Employer (See Instructions Not Employed	s)		
	Date 06/30/2023	Full name of contributor Chennisi, Susan Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	•	Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Houston, TX 77005	, T	Faralayay (Can Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions ed		Employer (See Instructions Not Employed	») 		
	Date 06/30/2023	Full name of contributor Choate, Evan Contributor address; City; St Houston, TX 77098	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Student	pation / Job title (See Instructions)	Employer (See Instructions Rice University	<u>I</u> S)		
	Date 06/30/2023	Full name of contributor Cook, Chloe Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
	Principal occu Admin	pation / Job title (See Instructions		Employer (See Instructions Menil Collection	5)		

	MONET	ARY POLITICAL CONTRIBUTI	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 6/34 Rpt: 9/58	
2	FILER NAME Cook, Molly			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	Full name of contributor		7	Amount of Contribution (\$)	\$5.00
		Houston, TX 77019				
8	Principal occu Nurse	pation / Job title (See Instructions)	9 Employer (See Instructions Memorial Hermann	5)		
	Date 04/11/2023	Full name of contributor out-of-state PAC (ID Cook, Molly Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	Houston, TX 77019 spation / Job title (See Instructions)	Employer (See Instructions	(s)		
	Nurse	, , , , , , , , , , , , , , , , , , , ,	Memorial Methodist	,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Cotter, John Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		Kingwood, TX 77345				
	Principal occu Pilot	pation / Job title (See Instructions)	Employer (See Instructions United Airlines	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Crement, Hannah Contributor address; City; State; Zip Code Houston, TX 77006	#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Midwife	pation / Job title (See Instructions)	Employer (See Instructions Texas Children's Hospit			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Curry, Brittany Contributor address; City; State; Zip Code San Diego, CA 92101	#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Bartender	pation / Job title (See Instructions)	Employer (See Instructions Bloom	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 7/34 Rpt: 10/58	
2	FILER NAME Cook, Molly			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor out-of-state PAC (ID#: Daubert, Annie Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$20.00
_	Deliverie et e e e e	San Antonio, TX 78209	D. Faralana (Carabatan)	<u> </u>		
8	Records Adr	pation / Job title (See Instructions) ministrator	9 Employer (See Instructions The Menil Collection	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Daubert, Annie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	San Antonio, TX 78209 upation / Job title (See Instructions)	Employer (See Instructions	s) 		
	Conservation Records Administrator		Menil Collection	٠,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Daubert, Annie Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$10.00
	Delivation I account	San Antonio, TX 78209	Foundation (Construction	<u> </u>		
		ıpation / Job title (See Instructions) n Records Administrator	Employer (See Instructions Menil Collection	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Daubert, Jon K. Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78209	1	Ĺ		
	Principal occu Database Ar	ipation / Job title (See Instructions) nalyst	Employer (See Instructions CAC	S)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Doyle, Meghan Contributor address; City; State; Zip Code Houston, TX 77005		•	Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u>I</u> S)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/34 Rpt: 11/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#: Duble, Caroline 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00
8	Dringinal occu	Houston, TX 77011	Employer (See Instructions	c)		
0	Director	pation / Job title (See Instructions)	Employer (See Instructions Avow	5)		
	Date 06/30/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	Director of P	olicy and Planning	LINK Houston			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Eidswick, Sandra Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
		Pinehurst, TX 77362	·			
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Eriksen, Erin Contributor address; City; State; Zip Code Houston, TX 77008)		Amount of Contribution (\$)	\$250.00
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe		Not Employed	_		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Eriksen, Erin Contributor address; City; State; Zip Code Houston, TX 77008)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u>I</u> s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/34 Rpt: 12/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 5 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Houston, TX 77093 spation / Job title (See Instructions)	9 Employer (See Instructions	;) 		
Ū	Architecture		PBK Architects	,,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Fereday, Kelli Contributor address; City; State; Zip Code Houston, TX 77009	:)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe	ed	Not Employed			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Flores, Amanda Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$20.00
		Houston, TX 77009				
	Principal occu Project Deve	pation / Job title (See Instructions) eloper	Employer (See Instructions Grid United	s)		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID# Frederick, Leslie Contributor address; City; State; Zip Code Houston, TX 77009	:)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Software En	gineer	Slalom			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Frederick, Leslie Contributor address; City; State; Zip Code Houston, TX 77009	:)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Software En	gineer	Slalom			

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 10/34 Rpt: 13/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Houston, TX 77096 pation / Job title (See Instructions)	Ια	Employer (See Instructions	-, 		
0	Teacher	pation 7 300 title (See Instructions)		Houston ISD	·)		
	Date 04/12/2023	Full name of contributor)		Amount of Contribution (\$)	\$50.00
	Dringing age	Houston, TX 77005	_	Employer (Coo Instructions	<u></u>		
	Analyst	pation / Job title (See Instructions)		Employer (See Instructions NIH	o)		
	Date 05/31/2023	Full name of contributor)	•	Amount of Contribution (\$)	\$20.00
		Houston, TX 77005					
	Principal occu Analyst	pation / Job title (See Instructions)		Employer (See Instructions NIH	5)		
Date 06/30/2023		Full name of contributor out-of-state PAC (ID#: Fullem, Robert Contributor address; City; State; Zip Code Houston, TX 77005)		Amount of Contribution (\$)	\$20.00
	Principal occu Analyst	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> S)		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: Gederberg, Thomas Contributor address; City; State; Zip Code Houston, TX 77025	:)		Amount of Contribution (\$)	\$100.00
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Boeing	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 11/34 Rpt: 14/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 05/31/2023	5 Full name of contributor out-of-state PAC (ID# Gilstrap, Leslie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77098				
8	Principal occu Finance	pation / Job title (See Instructions)	Employer (See Instructions Cerulean advisory	i)		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID# Greer, Andrea Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77009 spation / Job title (See Instructions)	Employer (See Instructions			
	fundraising	pation 7 300 title (See mstructions)	Andrea Greer Consulting			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Gregory, Sherrie Contributor address; City; State; Zip Code	<u>#:)</u>		Amount of Contribution (\$)	\$50.00
		Hill City, ID 83337				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	i)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# HATLEN, Leif Contributor address; City; State; Zip Code Houston, TX 77077	<u>; </u>		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions none	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Haines, Hilary Contributor address; City; State; Zip Code Houston, TX 77006	<u>*</u> :)		Amount of Contribution (\$)	\$100.00
	Principal occu Physical The	upation / Job title (See Instructions) erapist	Employer (See Instructions TIRR Memorial Herman			
	- Hyolou: The		That the north and the			

	MONEI	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/34 Rpt: 15/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 5 Full name of contributor Hairston, Andrew 6 Contributor address; City; S 	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Project Direc			9 Employer (See Instructions Texas Appleseed	j 5)		
	Date 05/31/2023	Full name of contributor Handy, Dexter Contributor address; City; S Houston, TX 77007	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)	Employer (See Instructions Not Employed	5)		
	Date 05/31/2023	Full name of contributor Hanks, Liz Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Drincinal occu	Houston, TX 77008 pation / Job title (See Instructions	.,	Employer (See Instructions	·/_		
	Not employe	•)	Not employed	•)		
	Date 06/30/2023	Full name of contributor Harston, Christina Contributor address; City; Si Houston, TX 77008	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$20.00
	Principal occu Fundraiser	pation / Job title (See Instructions	5)	Employer (See Instructions Strong Strategies LLC	<u>(</u>		
	Date 06/30/2023	Full name of contributor Hernandez, Adrian Contributor address; City; S Cypress, TX 77433	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$35.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 13/34 Rpt: 16/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID Higgs, Joe 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
_	District	Houston, TX 77011	le Frankrije (Oar kateurije)			
8	Teacher	ipation / Job title (See Instructions)	9 Employer (See Instructions Yes Prep Public Schools			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Hines, Ayelet Contributor address; City; State; Zip Code) #:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Mount Rainier, MD 20712 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Organizer	, , ,	Self			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Hope Cook, Chloe Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Houston, TX 77006				
	Principal occu Admin	pation / Job title (See Instructions)	Employer (See Instructions Menil Collection	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID Huebel, Martha Contributor address; City; State; Zip Code HOUSTON, TX 77035) 		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe	ed	Not Employed			
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID Humphreys, Harrison Contributor address; City; State; Zip Code Philadelphia, PA 19147)		Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Program Ma	ınager	Air Alliance Houston			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 14/34 Rpt: 17/58
2	FILER NAME Cook, Molly			3 Filer ID (Ethics Commission Filers) 00086313
4	Date 05/31/2023	Full name of contributor		7 Amount of Contribution (\$) \$5.00
8	Principal occu	Humble, TX 77346 upation / Job title (See Instructions)	9 Employer (See Instructions	·)
	Sales Manag	ger	Material Handling and C	Controls
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Hunn, William Contributor address; City; State; Zip Code Humble, TX 77346)	Amount of Contribution (\$) \$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()
	Sales Manager		Material Handling and C	controls
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Huse, Kelsey Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$200.00
	B	Austin, TX 78704	T = 1 (0 1 : ::	
		upation / Job title (See Instructions) T Consultant	Employer (See Instructions Health Data Specialists)
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID#:_ Ingram, Tania Contributor address; City; State; Zip Code Houston, TX 77003		Amount of Contribution (\$) \$100.00
	•	upation / Job title (See Instructions)	Employer (See Instructions)
	Not Employe		Not Employed	
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ J Strickland, Kevin Contributor address; City; State; Zip Code Houston, TX 77008-3401		Amount of Contribution (\$) \$25.00
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 15/34 Rpt: 18/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 5 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
_	Dringing aggr	Houston, TX 77006	Employer (Co.) Instructions	_		
8	Summer Ass	pation / Job title (See Instructions) sociate	9 Employer (See Instructions Kirkland & Ellis	5)		
	Date 06/30/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Advocate	·	Public Defender's Office			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Kapoor, Anil Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$70.00
		Houston, TX 77007				
	Principal occu Co director	pation / Job title (See Instructions)	Employer (See Instructions Nonprofit	<u>,</u>		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Kelly, Mike Contributor address; City; State; Zip Code Bainbridge Island, WA 98110			Amount of Contribution (\$)	\$100.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Tech DNA LLC	()		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Kelso Winter, Jane Contributor address; City; State; Zip Code Spring, TX 77381			Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u> </u>		

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 16/34 Rpt: 19/58	
2	FILER NAME	C (Ma)			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly					00086313	
4	Date 06/30/2023	Full name of contributor Kingsley, Grace Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$13.80
_	Dinainala	Houston, TX 77079	10	England (On Instruction			
8		pation / Job title (See Instructions)	9	1 7 (.1	
	Registered N	Nurse ————————————————————————————————————		Houston Methodist Hos	oita	ll 	
	Date 06/30/2023	Full name of contributor [Kowalchuk, Alicia Ann Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77098					
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions BCM	5)		
_	Date	Full name of contributor	7 (,	<u> </u>	Amount of Contribution (\$)	
	06/30/2023	Kozma, Andrew Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (4)	\$10.00
		Houston, TX 77019					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Adjunct Prof	essor		University of Houston			
	Date 06/30/2023	Full name of contributor Lane, Anna Contributor address; City; Star Austin, TX 78744	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$30.00
		pation / Job title (See Instructions)		Employer (See Instructions			
	Registered N	Nurse		CommUnityCare Health	C	enters	
	Date 05/31/2023	Full name of contributor [Laughlin, Ehren Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77079					
	Principal occu Field Technic	pation / Job title (See Instructions)		Employer (See Instructions Schlumberger	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/34 Rpt: 20/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_	Dringing Loon	Houston, TX 77007	C Employer (Con Instructions	<u></u>		
8	Consultant	ipation / Job title (See Instructions)	9 Employer (See Instructions Accenture	5)		
	Date 06/30/2023	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Houston, TX 77019 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Musician	,	Houston Grand Opera	,		
	Date 06/30/2023	Full name of contributor			Amount of Contribution (\$)	\$100.00
		Washington, DC 20009				
		pation / Job title (See Instructions) n professional	Employer (See Instructions DAI	5)		
	Date 06/30/2023	Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77024 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Compliance		National Gas & Electric			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Liu, Alice Contributor address; City; State; Zip Code Southlake, TX 76092	:)		Amount of Contribution (\$)	\$20.00
	Principal occu Nonprofit wo	pation / Job title (See Instructions)	Employer (See Instructions West Street Recovery	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 18/34 Rpt: 21/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	Filers)
4	Date 05/31/2023	5 Full name of contributor Llamas, James6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occu Engineer	Houston, TX 77002 pation / Job title (See Instructions)		Employer (See Instructions Traffic Engineers Inc.	5)		
	Date 06/30/2023	Full name of contributor Lopez, Marla Contributor address; City; Sta highlands, TX 77562	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)		
	Date 05/31/2023	Full name of contributor Luke, Ana Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Humble, TX 77346-1621 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Controller			Jerold B. Katz Interests	Co	mpany	
	Date 06/30/2023	Full name of contributor Lumia, Beth Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Student	pation / Job title (See Instructions)		Employer (See Instructions University of Houston G		luate College of Social Worl	k
	Date 05/31/2023	Full name of contributor Lynn, Virginia Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu City Planner	pation / Job title (See Instructions)		Employer (See Instructions City of Houston	5)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 19/34 Rpt: 22/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Transportation		City of Houston	,		
	Date 06/30/2023	Contributor address; City; State; Zip Code	<u>*:</u>)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Director		OneGoal			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Mallette, Lawrence E Contributor address; City; State; Zip Code	#:) 		Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77030-1206 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Martin, Sarah Contributor address; City; State; Zip Code	*:)		Amount of Contribution (\$)	\$10.00
		Katy, TX 77450				
	Principal occu Personal Fitr	pation / Job title (See Instructions) ness Trainer	Employer (See Instructions Self Employed	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# McSherry, Noelle Contributor address; City; State; Zip Code HOUSTON, TX 77007	<u>#:)</u>		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/34 Rpt: 23/58	
2	FILER NAME Cook, Molly			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Houston, TX 77096				
8	Principal occu Nurse	ipation / Job title (See Instructions)	9 Employer (See Instructions Houston Methodist	i)		
	Date 06/12/2023	Full name of contributor out-of-state PAC (ID#: Moore , Linda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Montgomery, TX 77356 upation / Job title (See Instructions)	Employer (See Instructions	:)		
	retired	panent, our and (coo mondons is)	none	,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Morales Diaz, Elaine Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Houston, TX 77023				
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions Nonprofit	i)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Morales Diaz, Elaine Contributor address; City; State; Zip Code Houston, TX 77023			Amount of Contribution (\$)	\$100.00
	Principal occu Director	upation / Job title (See Instructions)	Employer (See Instructions Nonprofit	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Moreno-Covington, Patrick Contributor address; City; State; Zip Code Houston, TX 77003			Amount of Contribution (\$)	\$20.00
	Principal occu Program Off	pation / Job title (See Instructions)	Employer (See Instructions Rockwell Fund	()		

	MONET	ARY POLITICAL CONTRIBI	UTIONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete	this form.		ges Schedule A1: /34 Rpt: 24/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3 Filer ID 000863	(Ethics Commissi	on Filers)
4	Date 02/13/2023	5 Full name of contributor out-of-state PA Moritz, Michael 6 Contributor address; City; State; Zip Code	,	7 Amount	of Contribution (\$)	\$25,000.00
_		Houston, TX 77011	T	<u> </u>		
8	Principal occu Engineer	pation / Job title (See Instructions)	9 Employer (See Instructions ConnectGen	ns)		
	Date 05/11/2023	Full name of contributor out-of-state PANasser, Veronica Contributor address; City; State; Zip Code Bellaire, TX 77401	AC (ID#:)	Amount	of Contribution (\$)	\$103.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction:	ns)		
	Date 06/30/2023	Full name of contributor out-of-state PA Nathans-Kelly, Henry Contributor address; City; State; Zip Code Ithaca, NY 14850	AC (ID#:)	Amount	of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instruction: Not Employed	ns)		
	Date 06/30/2023	Contributor address; City; State; Zip Code	AC (ID#:)	Amount	of Contribution (\$)	\$100.00
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instruction:	ns)		
	Educator		Ifly			
	Date 06/30/2023	Full name of contributor out-of-state PA Nelson, Victoria Contributor address; City; State; Zip Code Richmond, TX 77406	AC (ID#:)	Amount	of Contribution (\$)	\$100.00
	Principal occu Educator	pation / Job title (See Instructions)	Employer (See Instruction:	l ns)		
	Educator		ılly			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 22/34 Rpt: 25/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	on Filers)
4	Date 05/31/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77074 pation / Job title (See Instructions)	9 Employer (See Instructions	 s)		
	Not employe	ed	Not employed			
	Date 06/30/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Dringinal occu	Austin, TX 78747 pation / Job title (See Instructions)	Employer (See Instructions	·)		
	Senior Data		BlueLabs Analytics	·)		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID#: O'Neil, Evan Contributor address; City; State; Zip Code Houston, TX 77009)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Designer	,	Self			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: OConnor, Becky Contributor address; City; State; Zip Code Houston, TX 77056			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> (s)		
	Not Employe	ed	Not Employed			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Orduna, Julia Contributor address; City; State; Zip Code Laredo, TX 78045)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Regional dire	ector	Texas Low Income Hou	sin	g Information Service	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/34 Rpt: 26/58		
2	FILER NAME Cook, Molly			3	Filer ID (Ethics Commission 00086313	n Filers)	
4	Date 06/30/2023	Full name of contributor)	7	Amount of Contribution (\$)	\$200.00	
_	<u></u>	San Diego, CA 92130	10 5 1 10 11 11				
8	Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Panzarella, Joseph Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Principal occu	Houston, TX 77339 upation / Job title (See Instructions)	Employer (See Instructions)			
	Data Analys		Orsted				
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Patterson, Grant Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		Houston, TX 77006					
	Principal occu Evaluation M	ipation / Job title (See Instructions) Manager	Employer (See Instructions Houston Endowment)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Pelzel, Madeleine Contributor address; City; State; Zip Code Houston, TX 77006			Amount of Contribution (\$)	\$20.00	
	Principal occu Planner	pation / Job title (See Instructions)	Employer (See Instructions Huitt-Zollars)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Perales, Kimberly Contributor address; City; State; Zip Code San Antonio, TX 78240)		Amount of Contribution (\$)	\$1.00	
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions The CE Group)			

	MONEI	ARY POLITICAL CONTR	IBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	lete this forr	m.	1	Total pages Schedule A1: Sch: 24/34 Rpt: 27/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	Perez, Alejandro 6 Contributor address; City; State; Zip Cod	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu Laborer	Houston, TX 77022 pation / Job title (See Instructions)	9	Employer (See Instructions Eado Bike Co	5)		
	Date 06/30/2023	Perez, Elizabeth Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Art Assistant	Austin, TX 78745 pation / Job title (See Instructions)		Employer (See Instructions Picrow Streaming - PAN			
	Date 06/30/2023	Full name of contributor out-of-sta Perez, Sabrina Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77091					
	Manager of 0	pation / Job title (See Instructions) Outreach		Employer (See Instructions Houston Area Parkinson		ociety	
	Date 06/30/2023	Full name of contributor out-of-sta Phillips, Isaac Contributor address; City; State; Zip Cod Houston, TX 77023	ate PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Developmen	pation / Job title (See Instructions) t Director		Employer (See Instructions Grid United	5)		
	Date 06/30/2023	Full name of contributor out-of-sta Poretta, Taylor Contributor address; City; State; Zip Cod Houston, TX 77007	ate PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Registered N	pation / Job title (See Instructions) Jurse		Employer (See Instructions RN Network	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 25/34 Rpt: 28/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_	Dringing age	Houston, TX 77019	0 Employer (See Instructions	<u></u>		
8	Policy Mana	pation / Job title (See Instructions) ger	9 Employer (See Instructions Commission Shift	5)		
	Date 06/30/2023	Full name of contributor	<u>; </u>		Amount of Contribution (\$)	\$20.00
	Dringing age	Cypress, TX 77429	Employer (See Instructions	<u></u>		
	Retail	pation / Job title (See Instructions)	Employer (See Instructions Melody Productions	5)		
	Date 06/30/2023	Full name of contributor	<u>; </u>	•	Amount of Contribution (\$)	\$1.00
		Baytown, TX 77521				
	Principal occu Hostess	pation / Job title (See Instructions)	Employer (See Instructions Marriott	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Reynolds, Eleanor Contributor address; City; State; Zip Code Fredericksburg, TX 78624	<u>; </u>		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Engineer / P	rofessor	Rbhu / UT Austin			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Rhodes, George Contributor address; City; State; Zip Code Houston, TX 77006	f:)		Amount of Contribution (\$)	\$200.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Fred Rhodes and Associ		es	

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS			SCHEDUI	LE A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.		1	Total pages Schedule A1: Sch: 26/34 Rpt: 29/58	
2	FILER NAME Cook, Molly	C. (Ms.)				3	Filer ID (Ethics Commission 00086313	on Filers)
4	Date 06/30/2023	5 Full name of contributor Roberts, Kendrick6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Houston, TX 77009 pation / Job title (See Instruction	5)	9 Employe	er (See Instructions) ;)		
	Date 06/30/2023	Full name of contributor Robinson, Marc Contributor address; City; S Houston, TX 77006	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	Principal occu Physician	pation / Job title (See Instruction:	5)		er (See Instructions College of Medic			
	Date 03/11/2023	Full name of contributor Ronneberg, Kristina Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77008 pation / Job title (See Instruction:	5)	Employe	er (See Instructions	;) 		
	Transportation	·	-/	BikeHo		,		
	Date 06/30/2023	Full name of contributor Ronneberg, Kristina Contributor address; City; S Houston, TX 77008	out-of-state PAC (ID#:_ tate; Zip Code)		Amount of Contribution (\$)	\$1,100.00
	Principal occu Policy Direct	pation / Job title (See Instruction: or	5)	Employe BikeHo	er (See Instructions uston	5)		
	Date 06/30/2023	Full name of contributor Rospierski, Carolyn Contributor address; City; S Cypress, TX 77429	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instruction: ed	5)	Employe Not Em	er (See Instructions ployed	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 27/34 Rpt: 30/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID# Routh, Morgan 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00
_		Chicago, IL 60605	To 5 1 (0 1 1 1)	<u></u>		
8	Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Sanchez, Felipe Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$40.00
	Dringing aggr	houston, TX 77080	Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions) ed	Not Employed	»)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Schoenfield, Miriam Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78763				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions UT	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Schopf, Britney Contributor address; City; State; Zip Code Portland, OR 97217	:)		Amount of Contribution (\$)	\$200.00
	•	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Renewable 6		ConnectGen	_		
	Date 05/31/2023	Full name of contributor out-of-state PAC (ID# Schultz, Mary Contributor address; City; State; Zip Code Houston, TX 77009	:)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u>(</u>		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/34 Rpt: 31/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor out-of-state PAC (ID#:_Schultz, Mary Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$35.00
8	Principal occu	Houston, TX 77009 Ipation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Scott, Andrea	Not Employed	•	Amount of Contribution (\$)	\$10.00
	Principal occu Administrativ	Ipation / Job title (See Instructions)	Employer (See Instructions Texas A&M University	<u>I</u> S)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Sen, Anindita Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$31.00
	Principal occu	West University Place, TX 77005 upation / Job title (See Instructions)	Employer (See Instructions	S)		
	Physician		MD Anderson Cancer C	en	ter	
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Simpson, Isabel Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$10.00
		Austin, TX 78751	T = 1	Ĺ		
	Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s) 		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Smith, David Contributor address; City; State; Zip Code Houston, TX 77007)		Amount of Contribution (\$)	\$100.00
	Principal occu union organi	pation / Job title (See Instructions)	Employer (See Instructions Texas AFT	5)		
	a.mo.r orgam					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 29/34 Rpt: 32/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor	:)	7	Amount of Contribution (\$)	\$10.00
_		HOUSTON, TX 77008-2699	10.5 1 (0.1 1)	Ĺ		
8	Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Smither, Alexandra Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$20.00
		Houston, TX 77019	1 - 4 - 4	Ĺ		
	Consultant	pation / Job title (See Instructions)	Employer (See Instructions Backpocket LLC	S)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Spinosa, Ciara Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$10.00
		Gainesville, FL 32608	1	Ĺ		
		pation / Job title (See Instructions) rogram Manager	Employer (See Instructions Johns Hopkins Universi	•		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Steffen, Becky Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$20.00
		The Woodlands, TX 77382				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Steinbach, Douglas Contributor address; City; State; Zip Code Houston, TX 77098	:		Amount of Contribution (\$)	\$20.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Graduate St	udent Research Assistant	Rice University			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 30/34 Rpt: 33/58	
2	FILER NAME Cook, Molly	C (Ms)		3	Filer ID (Ethics Commission 00086313	on Filers)
4	Date 06/30/2023	Full name of contributor	#:)	7	Amount of Contribution (\$)	\$5.00
		6 Contributor address; City; State; Zip Code				
_	Deinsinal	Houston, TX 77062	Continue (Continue to an			
8	Supervisor	pation / Job title (See Instructions)	9 Employer (See Instructions Retail	s)		
	Date	Full name of contributor ut-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	06/30/2023					\$2,400.00
		Contributor address; City; State; Zip Code				
		Washington, DC 20001				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Federal emp	lloyee	FDA			
	Date	Full name of contributor out-of-state PAC (ID)#:)		Amount of Contribution (\$)	#200.00
	06/30/2023	Szczepanski, Adam Contributor address; City; State; Zip Code				\$300.00
		Houston, TX 77006				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> s)		
	Consultant	, ,	Racca Solutions	,		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	06/30/2023	Taylor, Kiera				\$20.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77009				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Fundraiser		Strong Strategies LLC			
	Date	Full name of contributor ut-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	06/30/2023	Valdez, Stephany				\$20.00
		Contributor address; City; State; Zip Code				
		Dayton, TX 77535				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
_	Not Employe	ed	Not Employed			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 31/34 Rpt: 34/58	
2	FILER NAME Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$15.00
	Dringing aggr	Dayton, TX 77535	9 Employer (See Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions) ed	Not Employed	·)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Valdez, Stephany Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Dayton, TX 77535 upation / Job title (See Instructions)	Employer (See Instructions	·/		
	Not Employe		Not Employed	·)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Valle, Tiffany Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Houston, TX 77023				
	Principal occu Community	ipation / Job title (See Instructions) Outreach	Employer (See Instructions Small Places	5)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Valverde, William Contributor address; City; State; Zip Code Stafford, TX 77477)		Amount of Contribution (\$)	\$250.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	President		VFE LLC			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Villanueva, Stephanie Contributor address; City; State; Zip Code Cypress, TX 77433			Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Community /	Aide	Harris County			

	MONEI	ARY POLITICAL CO	NIRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 32/34 Rpt: 35/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	 5 Full name of contributor W Carpenter, April 6 Contributor address; City; State 	out-of-state PAC (ID#:; Zip Code)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Physical The			MD Anderson Cancer C		er	
	Date 06/30/2023	Full name of contributor Wells, Carol Contributor address; City; State	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$20.00
	5	Spring, TX 77379			<u></u>		
	Artist	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 06/30/2023	Full name of contributor Williams, Brad Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77007					
	Principal occu Actuary	pation / Job title (See Instructions)		Employer (See Instructions General Reinsurance Co	•		
	Date 06/30/2023	Full name of contributor Woessner Gauci, Kathryn Contributor address; City; State Houston, TX 77041	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions None	5)		
	Date 05/31/2023	Full name of contributor Wosner, Jim Contributor address; City; State Houston, TX 77019	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$250.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

	MONEI	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 33/34 Rpt: 36/58	
2	FILER NAME Cook, Molly	C. (Ms.)			3	Filer ID (Ethics Commission 00086313	n Filers)
4	Date 06/30/2023	5 Full name of contributorWu, Steven6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
8		Houston, TX 77081 pation / Job title (See Instructions) !	9 Employer (See Instructions	<u> </u> s)		
	Date 06/30/2023	Full name of contributor Zaragoza, Lily Contributor address; City; St Kingwood, TX 77339	out-of-state PAC (ID#: ate; Zip Code	Woori Juntos	•	Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u>l</u> S)		
	Date 06/30/2023	Full name of contributor bonner, Hiram Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$200.00
	Deinsinal sass	houston, TX 77084	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Frankrian (Coo Instruction	$\overline{\Gamma}$		
	Not employe	pation / Job title (See Instructions d)	Employer (See Instructions Not employed	>)		
	Date 06/30/2023	Full name of contributor laciste, noena Contributor address; City; St Sugar Land, TX 77478	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	<u>I</u> S)		
	Date 06/30/2023	Full name of contributor lightsey, anne Contributor address; City; St albuquerque, NM 87102	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Ombuds	pation / Job title (See Instructions)	Employer (See Instructions Unm	5)		

	MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 34/34 Rpt: 37/58		
2	FILER NAME Cook, Molly			3 Filer ID (Ethics Commission Filers) 00086313	
4	Date 06/30/2023	Full name of contributor		7 Amount of Contribution (\$) \$5,000.00	
		Houston, TX 77005			
8	physician	upation / Job title (See Instructions)	9 Employer (See Instruction physician acute care se		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ skelly, michael Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$1,000.00	
		houston, TX 77003			
	Principal occu banker	upation / Job title (See Instructions)	Employer (See Instruction lazard	s)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mac Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

1 Total pages Schedule F1: 2 FILER NAME Sch: 1/21 Rpt: 38/58 Cook, Molly C. (Ms.) 3 Filer ID (Ethics Commission F 00086313	ilers)
Sch: 1/21 Rpt: 38/58 Cook, Molly C. (Ms.) 00086313 4 Date 5 Payee name	
4 Date 5 Payee name	
- Layer name	
0E/16/2022	
05/16/2023 ATT	
6 Amount (\$) 7 Payee address; City; State; Zip Code	
\$174.77 2625 Louisiana St suite E	
Houston, TX 77006	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Taxas Complete Schedule T	
Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
IPhone fee	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
'	
Date Payee name	
06/30/2023 ActBlue Texas	
Amount (\$) Payee address; City; State; Zip Code	
\$876.75 P.O. Box 441146	
Somerville, MA 02144	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description (b) Description	
Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
transaction fee	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
Date Payee name	
04/11/2023 Adams, Tasia	
Amount (\$) Payee address; City; State; Zip Code	
\$225.00 c/of Molly Cook	
2503 Park St	
Houston, TX 77019	
PURPOSE OF (a) Category (See Categories listed at the top of this schedule) Fivent Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
EVENT Expense EVENT Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Advocacy trip to State legislature-child care sti	pend
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries	/Wages	s/Contract Labor		OTHER (enter a	category not listed abo	ove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 2/21 Rpt: 39/58	Cook, Moll						00086313		
4	Date	5 Payee name	9							
	06/14/2023	Agora								
6	Amount (\$) \$21.43	7 Payee addre 1712 West	ess; City; heimer RD	State; Zip C	Code					
		Houston, T	X 77098							
8	PURPOSE	(a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Beve	rage Expense			_			plete Schedule T.	
						_		, officeholder living		
						meeting with	CO	illillullity act	IVISIS	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ought			Office he	eld	
⊨		ı								
	Date	Payee name								
	04/12/2023	Archie, La	Ashley							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$227.99	c/of Molly	Cook							
		2503 Park	St							
		Houston, T	X 77019							
H	PURPOSE	(a) Category (See Categories listed at the to	n of this sphodule)	(b)	Description				
	OF	Event Exp		p of this schedule)	``	_	outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		31133			Check if Austin	, TX	, officeholder living	g expense	
						Advocacy trip	to	State legisl	ature-child care	stipend
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ought			Office h	eld	
	Date	Payee name	9							
	04/11/2023	Avis								
H	Amount (\$)	Payee addre	ess; City;	State; Zip C	Code					
	\$496.75	1010 Web	•	otato,p c	, , ,					
	Ψ-100.10	1010 11010	55161 61							
		Houston, T	X 77002							
	PURPOSE OF		See Categories listed at the to		(b)	Description				
	EXPENDITURE		tion Equipment & R	elated		ш			plete Schedule T.	
		Expense				_		, officeholder living	g expense trip to legislatur	Δ.
						rental of van	10	Auvocacy	inp to legislatur	C
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	lught			Office he	ald.	
	expenditure to benefit C/O		nocholaci Haitic	Onice St	Jugiit			Onice III	OIG.	
\vdash										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair		ages/Contract Labor	Travel Out of Distr OTHER (enter a c	ict ategory not listed above)
1	Total pages Schedule F1:	FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Sch: 3/21 Rpt: 40/58	Cook, Molly C. (Ms.)			00086313	
4	Date	Payee name		I		
	05/31/2023	Bayou Blue Democrats				
6	Amount (\$)	Payee address; City; Sta	te; Zip Coo	de		
	\$30.00	3051 Locke Ln.				
		Houston, TX 77019				
8	PURPOSE	Category (See Categories listed at the top of this s	schedule)	(b) Description		
	OF	Contributions/Donations Made By	scricuale)		outside of Texas. Compl	ete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Com	mittee	—	TX, officeholder living e	expense
				membership		
_						
9	Complete ONLY if direct expenditure to benefit C/OI	andidate/Officeholder name	Office soug	ght	Office hel	d
	Date	Payee name				
	04/11/2023	Burks, Parys				
	Amount (\$)	* * * * * * * * * * * * * * * * * * * *	te; Zip Coo	de		
	\$225.00	c/of Molly Cook				
		2503 Park St				
		Houston, TX 77019				
	PURPOSE	Category (See Categories listed at the top of this s	schedule)	(b) Description		
	OF EXPENDITURE	Event Expense		<u> </u>	outside of Texas. Compl TX, officeholder living o	
				ш		ture-child care stipend
	Complete ONLY if direct	andidate/Officeholder name	Office soug	ght	Office hel	d
	expenditure to benefit C/OI			,		
	Date	Payee name				
	06/09/2023	Cecil's Pub				
	Amount (\$)		te; Zip Cod	de		
	\$27.72	B00 W Gray	, _, 500			
		Houston, TX 77019				
	PURPOSE OF	Category (See Categories listed at the top of this s	schedule)	(b) Description		
	EXPENDITURE	Food/Beverage Expense		ш	outside of Texas. Compl TX, officeholder living o	
					community activ	
				9 3	,	
	Complete ONLY if direct	andidate/Officeholder name	Office soug	ght	Office hel	d
	expenditure to benefit C/OI			-		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

l	Credit Cara r ayment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
L	Sch: 4/21 Rpt: 41/58	Cook, Molly C. (Ms.)		00086313
4	Date	5 Payee name		
L	04/12/2023	Chick-fil-a		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	е	
	\$103.16	500 E Ben White Blvd, building B		
		Austin, TX 78704		
8	PURPOSE OF	,	b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				refreshments for advocacy trip to state legislature
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ht	Office held
L	·			
	Date 04/12/2023	Payee name Chipotle		
L	Amount (\$)	Payee address; City; State; Zip Cod	0	
	\$134.81	801 Congress Ave	E	
	¥20.102	60_ 661.g. 6667. W		
		Austin, TX 78701		
	PURPOSE OF	, , ,	b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense		Check if Austin, TX, officeholder living expense
				refreshments for advocacy trip to state legislature
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	ht	Office held
L	Parts			
	Date 04/11/2023	Payee name Coleman, Jasmine		
	Amount (\$)	Payee address; City; State; Zip Cod	<u>e</u>	
	\$225.00	c/of Molly Cook	•	
		2503 Park St		
		Houston, TX 77019		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Advocacy trip to State legislature-child care stipend
				, tarocacy trip to clate regionatare crime care cliperia
H	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht	Office held
	expenditure to benefit C/O	1		
_				

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/21 Rpt: 42/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	01/29/2023	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$133.25	1601 Trapelo
L		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email service
		Cital Scivide
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Davida marra
	03/29/2023	Payee name
		Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.25	1601 Trapelo
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense email service
		email service
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
⊨	D-4-	
	Date	Payee name
	05/01/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.25	1601 Trapelo
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense email service
		email Service
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		
1		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/21 Rpt: 43/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	06/29/2023	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$133.25	1601 Trapelo
		Waltham, MA 02451
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		email service
		Citical Scivice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	_	
	Date	Payee name
	05/30/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$133.25	1601 Trapelo
		Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense email service
		Citical Scivice
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 04/11/2023	Payee name
		Conway, Courtney
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	c/of Molly Cook
		2503 Park St
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Advocacy trip to State legislature-child care stipend
_	Complete ONLY if alice at	Candidate/Officeholder name Office sought
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/21 Rpt: 44/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	06/18/2023	Cypress/Tomball Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	16215 Diamond Rock Dr.
		Cypress, TX 77362
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense membership
		The model of the second
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/11/2023	Dr. Letitia Plummer Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO box 667204,
		Houston, TX 77266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Campaign contribution
		Sampaight continuation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/09/2023	Fadi's Mediterran Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.77	4738 Beechnut
		Houston, TX 77096
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meeting with community activists
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 8/21 Rpt: 45/58	Cook, Molly C. (Ms.) 00086313			
4	Date	5 Payee name			
	05/31/2023	Greater Heights Dems			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$20.00	1510 Tulane St.			
		Houston, TX 77008			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
		Candidate/Officeholder/Political Committee			
		membership			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
ľ	expenditure to benefit C/OI	the state of the s			
-	Date	Payee name			
	03/29/2023	HEB			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$102.99	5106 bissonet			
	Ψ102.33	5155 bissoriet			
		Bellaire, TX 77401			
	PURPOSE	<u></u>			
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Meeting with Democratic Clubs			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experialitire to benefit C/Oi				
	Date	Payee name			
	04/12/2023	HEB			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$86.66	5106 bissonet			
		Bellaire, TX 77401			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		refreshments for advocacy trip to state legislature			
		in the state of th			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
_	Sch: 9/21 Rpt: 46/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	04/12/2023	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
Ī	\$69.68	5106 bissonet
	400.00	
		Bellaire, TX 77401
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Transportation Equipment & Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		gas for vaan
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/29/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.99	5106 bissonet
	402.00	
		Bellaire, TX 77401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		meeting with community activists
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/14/2023	Harris County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4619 Lyons Avenue
		Houston, TX 77020
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORL	Candidate/Officeholder/Political Committee
		contribution
	Operation ONE VIII II	Operation of the second
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	te this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/21 Rpt: 47/58	Cook, Molly C. (Ms.)	00086313
4	Date	5 Payee name	•
	05/31/2023	Harris County Young Democrats	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$50.00	2028 Buffalo Terrace	
		Houston, TX 77019	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
			membership
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
_	Data		
	Date 04/12/2023	Payee name Holllywood Food and Cigars	
		-	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3.00	1660Westheimer	
		Houston, TX 77019	
	PURPOSE OF	,	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			refreshments for advocacy trip to state legislature
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/12/2023	Hot Bagel	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$121.61	2015 S Shepherd Dr #900	
		Houston, TX 77019	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			refreshments for advocacy trip to state legislature
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/21 Rpt: 48/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	05/31/2023	Houston Black American Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	4806 Edfield St
		Houston, TX 77033
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense membership
		memberenip
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/18/2023	Houston GLBT Political Caucus PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	P.O. Box 66664
		Houston, TX 77266
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living eveness
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/03/2023	Houston Galveston Area PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	2503 Park St
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Contribution
		Contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/21 Rpt: 49/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	04/13/2023	Izzi Market
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.45	1800 Houston Ave
		Houston, TX 77019
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T. Expense Check if Austin, TX, officeholder living expense
		Expense
		g-10 1-1 1-1.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	04/11/2023	Jones, Stephen
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	c/of Molly Cook
		2503 Park St
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Advocacy trip to State legislature-child care stipend
┡	Commists ONII V if direct	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┡		
	Date	Payee name
	06/01/2023	Juiceland
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.98	1340Westheimer Rd
		Houston, TX 77006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense campaign meeting with activists
		Campaign meeting with activists
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/21 Rpt: 50/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	06/09/2023	Lesley Briones Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	PO Box 56386
		Houston, TX 77256
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Candidate/Officeholder living expense campaign contribution
		Campaign contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	Complete ONLY if direct expenditure to benefit C/O	
⊨	Date	Payron namo
	06/29/2023	Payee name Local Foods
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$309.58	2555 Kirby Dr
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense refreshments for debriefing meeting on the legilature.
		refreshinents for debriefing theeting on the legitature.
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Power name
	04/12/2023	Payee name McDonalds
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.74	1302 Westheimer
		Houston, TX 77006
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		refreshments for advocacy trip to state legislature
		Torroommente for davocacy trip to clate regionatare
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/21 Rpt: 51/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	04/12/2023	McDonalds
6	Amount (\$) \$23.74	7 Payee address; City; State; Zip Code 1302 Westheimer
		Houston, TX 77006
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense refreshments for advocacy trip to state legislature
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/16/2023	Numero
	Amount (\$) \$810.00	Payee address; City; State; Zip Code 695 Town Center Drive, suite580
		Costa Mesa, CA 92626
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donor Database Program
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/31/2023	Oak Forest Dems
	Amount (\$) \$20.00	Payee address; City; State; Zip Code 1046 Stonecrest Dr.
		Houston, TX 77018
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense membership
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 15/21 Rpt: 52/58	Cook, Molly C. (Ms.)	00086313				
4 Date	5 Payee name	•				
03/15/2023	Office Max					
6 Amount (\$)	7 Payee address; City; State; Zip Co	de				
\$152.33	1576 W Gray					
	Houston, TX 77019					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF	Printing Expense	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE		Check if Austin, TX, officeholder living expense				
		flyers for Community Outreach				
		200				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held				
·						
Date	Payee name					
04/05/2023	Office Max					
Amount (\$)	Payee address; City; State; Zip Co	de				
\$68.00	1576 W Gray					
	Houston, TX 77019					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		flyers for Community Outreach				
		nyoro ioi Gommanny Galloadii				
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held				
expenditure to benefit C/O	expenditure to benefit C/OH					
Date	Payee name					
04/11/2023	Office Max					
Amount (\$)	Payee address; City; State; Zip Co	de				
\$14.55	1576 W Gray					
	Houston, TX 77019					
PURPOSE		(b) Description				
OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Tilling Expense	Check if Austin, TX, officeholder living expense				
		flyers for Community Outreach				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held				
experiorare to benefit C/O						

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/21 Rpt: 53/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	05/01/2023	Office Max
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$48.87	1576 W Gray
		Houston, TX 77019
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense flyers for Community Outreach
		nyers for community outleach
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	04/12/2023	Pay to Park
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$9.00	1206 San jacinto
	7	
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense parking fee
		paiking lee
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/12/2023	Perez, Elizabeth
H	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	4412 Gillis Street unit B
	Ψ400.00	4412 Onlis Street unit B
		Austin, TX 78745
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Videography
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	1
Γ		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/21 Rpt: 54/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	06/30/2023	Profitable Non-Profits
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$3,000.00	14526 Cypress Falls
		Cypress, TX 77429
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaaign management
		Campaaign management
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
F	Date	Payee name
	06/09/2023	Retrospective Coffee
H	Amount (\$)	Payee address; City; State; Zip Code
	\$11.55	3709 LaBranch St
	411.00	or of Eastwinding.
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense meeting with community activists
		meeting with confindintly activists
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Payso nama
	05/31/2023	Payee name River Oaks Area Democratic Women
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	15327 N Tracewood Bend
		Houston, TX 77077
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		membership
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)	
	Sch: 18/21 Rpt: 55/58	Cook, Molly C. (Ms.)		00086313		
4	Date	5 Payee name		·		
	06/12/2023	Slowpokes Oak Forest				
6	Amount (\$)	7 Payee address; City; State; Zip Code	le			
	\$25.64	1203 W 34th St, suite G				
		Houston, TX 77018				
8	PURPOSE OF	,	(b) De	escription		
	EXPENDITURE	Food/Beverage Expense	님	Check if travel outside of Texas. Com Check if Austin, TX, officeholder living		
			Ш me	eeting with community act		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht	Office he	eld	
	expenditure to benefit C/O	1				
	Date	Payee name				
	05/31/2023	Southwest Democrats				
	Amount (\$)	Payee address; City; State; Zip Code	le			
	\$20.00	7803 Barberton Dr				
		Houston, TX 77036				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	(b) De	scription		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	H	Check if travel outside of Texas. Com Check if Austin, TX, officeholder living		
		Candidate/Oniceriolden/Political Committee	Ш me	embership	, oxponice	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht	Office he	eld	
	expenditure to benefit C/Ol	1				
	Date	Payee name				
	05/15/2023	Squarespace				
	Amount (\$)	Payee address; City; State; Zip Code	le			
	\$161.29	225 Varick St				
		New York, NY 10014				
	PURPOSE OF	,	(b) De	escription		
	EXPENDITURE	Fees	H	Check if travel outside of Texas. Com Check if Austin, TX, officeholder living	•	
			W	ebsite	,	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	ht	Office he	eld	
L	expenditure to benefit C/Ol	1				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 19/21 Rpt: 56/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	05/22/2023	Squarespace
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.72	225 Varick St
		New York, NY 10014
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Website
_	Operation ONLY if allowed	One districts (Office health and a second se
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/06/2023	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.98	225 Varick St
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Website
	Operation ONLY if allowed	Openhalte Office helder was a supply of the second of the
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/21/2023	Squarespace
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.72	225 Varick St
		New York, NY 10014
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Website
	Operation Children	Operation to the Contract of t
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/21 Rpt: 57/58	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	02/16/2023	US Postal Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$210.00	1319 Richmond Ave
		Houston, TX 77006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense PO Box rental
		1 O Box Territal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Dougo nama
	06/14/2023	Payee name Veritex Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.49	5900 Memorial DR Ste 100
		Houston, TX 77007
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printed checks
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/31/2023	West U Area Dems
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	4119Cason Ave
		Houston, TX 77005
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXPENDITORE	Candidate/Officeholder/Political Committee
		membership
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

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