#### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete	e this form.	1 Filer ID (Ethics Commis 00086313	ssion Filers)	2 Total pages	s filed: 145
3 CANDIDATE /	MS / MRS / MR	IRST	•	MI	OFFICE	E USE ONLY
OFFICEHOLDER	Ms.	Volly C.				
NAME		,			Date Received	
					ELECTRONI	ICALLY FILED
	NICKNAME	AST		SUFFIX	07/12/2024	
		Cook				
4 CANDIDATE /		SUITE #: CIT	· · · · · · · · · · · · · · · · · · ·	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE #, CIT	¥,	ZIP CODE	Date Hand-delivere	d of Date i Ostinarkeu
MAILING	PO Box 667238				Receipt #	Amount
ADDRESS					Receipt #	Anoun
Change of Address	Houston, TX 77266				Data Drawana d	
					Date Processed	
					<b>D</b> ( ) ( )	
					Date Imaged	
5 CAMPAIGN	MS/MRS/MR F	IRST		MI		
TREASURER	Mr. L	eif				
NAME						
		AST		SUFFIX		
	F	latlen				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE);	AP	r / SUITE #; CITY;	S	STATE; ZIP CODE
TREASURER ADDRESS	13527 N. Tracewood Bend					
(Residence or Business)	Houston, TX 77077					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
TREASURER	(281) 493-3107					
PHONE	, ,					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff		campaign treasurer
					-	officeholder only)
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (A	Attach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	05/19/2024	TF	IROUGH	06/30/2024	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	P	rimary	Runoff	Other	
	11/05/2024		ieneral	Special		
		XG				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Senator District 15 Ha	rrie		State Senator Dis		
		GO 1	O PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	S	Ver	rsion V4.1.0.d378aba0

#### **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

#### FORM C/OH **COVER SHEET PG 2** 2 of 145

13 C / OH NAME	Cook, Molly C. (Ms.)		<b>14</b> Filer ID ( 00086313	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	oolitical contributions accepted or political e These expenditures may have been made I officeholders are required to report this in	without the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER	NAME	
		COMMITTEE CAMPAIGN TREASURER	ADDRESS	
16 CONTRIBUTION TOTALS	\$ 0.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	F LOANS)	<b>\$</b> 136,296.19
EXPENDITURE TOTALS	URE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 198,153.07
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS O RIOD	F THE LAST DAY OF THE	<b>\$</b> 51,511.46
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LO TING PERIOD	ANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			er penalty of perjury, that the acc cludes all information required to n Code.	
			Ms. Molly C. Cook	
		Sig	nature of Candidate or Officehold	der
AFFIX NC	DTARY STAMP / SEAL AB	DVE		
Sworn to and subs	scribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of o		
Signature of offi	icer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH	FORM C/OH OVER SHEET PG 3 3 of 145	
18 FILER NAME Cook, Molly C. (Ms.)	<b>19</b> Filer ID 00086313	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 134,551.33
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 1,744.86
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 198,153.07
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

SCHEDULE	A1
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⊢						
	The Instru	iction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/105 Rpt: 4/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly		,		00086313	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/25/2024		,	Ι.	Amount of Continuence ()	\$100.00
	00/20/202					Ψ100
		6 Contributor address; City; State; Zip Code	ł			
			ļ			
		Houston, TX 77007-7268	,			
8	Principal occı		9 Employer (See Instructions	 (S)		
	Mediator	, paner, 200 art (111 - 111 - 1	Self	ς,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	Dale 05/29/2024	Full name of contributor out-of-state PAC (ID#: Adkisson, Sharon	/			\$2.50
	0312312027					φ2.00
		Contributor address; City; State; Zip Code	ļ			
			ł			
		Tracyton, WA 98393-0076	,			
$\vdash$	Drincinal OCCI	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Educator		Central Kitsap School D		int	
L			· · · · · · · · · · · · · · · · · · ·			
	Date	—	)		Amount of Contribution (\$)	
	05/22/2024	Agno, Julianne				\$25.00
		Contributor address; City; State; Zip Code	,	]		
			ļ			
			ļ			
L		Houston, TX 77006-6554	· · · · · · · · · · · · · · · · · · ·			
		upation / Job title (See Instructions)	Employer (See Instructions			
L	Network Mar	nager	Md Anderson Cancer Ce	ente	er	
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	06/22/2024	Agno, Julianne	ļ			\$25.00
		Contributor address; City; State; Zip Code		"		
			,			
			,			
		Houston, TX 77006-6554				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Network Mar	nager	Md Anderson Cancer Ce	Cente	er	
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	05/30/2024	Ainsworth, Alan				\$100.00
				·		
			,			
			,			
		Houston, TX 77061-1505	,			
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L s)		
	Professor		Houston Community Co		ie	
$\vdash$		J				

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 2/105 Rpt: 5/145		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/26/2024	Alexander, Laura				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77009-6640				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Public Policy	/ Manager	Ghp			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/21/2024	Allen, Karen				\$50.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75248-3039	T			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Optometrist		Self			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	_
	06/25/2024	Anderson, Margaret				\$40.00
		Contributor address; City; State; Zip Code				
		Northlaka II 60164 2202				
_	Dringing ogg	Northlake, IL 60164-2202	Employer (See Instructions	<u> </u>		
	Not Employe	upation / Job title (See Instructions)	Not Employed	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#10 F0</b>
	05/29/2024	Anderson, Roberta				\$12.50
		Contributor address; City; State; Zip Code				
		Mt Prospect, IL 60056-4113				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not Employe		Not Employed	<i>)</i>		
┝				<del></del>	Amount of Contribution (¢)	
	Date 05/19/2024	Full name of contributor out-of-state PAC (ID#: Angela Blanchard, Angela	)		Amount of Contribution (\$)	\$250.00
	03/19/2024					Φ200.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77004-5038				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Consultant /		Brown University	,		
┝						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/105 Rpt: 6/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/25/2024	Ard, Tom				\$5.00
		6 Contributor address; City; State; Zip Code	,	$\mathbf{I}$		
		Oak Park, IL 60302-1532				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed set of the set of t	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/14/2024	Arnsparger, John				\$10.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77059-6448				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	06/29/2024	Aronson, Harvey				\$36.00
		Contributor address; City; State; Zip Code		1		
	<u></u>	Houston, TX 77005-3008		Ĺ		
	Principal occu Psychothera	ipation / Job title (See Instructions)	Employer (See Instructions Self	5)		
	PSychothera		500	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> = 00
	05/30/2024	Arsaga, Cindy				\$5.00
		Contributor address; City; State; Zip Code				
		Fayetteville, AR 72701-8027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נו		
	Biz Owner		Self	5)		
╞━		Full name of contributor out-of-state PAC (ID#:		1	Amount of Contribution (\$)	
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#: Ashitey, Sarah	)		Amount of Contribution (\$)	\$500.00
	0312312027	Contributor address; City; State; Zip Code		•		ψ300.00
		Contributor address, City, State, Zip Code				
		Dallas, TX 75212-5340				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician		Self			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 4/105 Rpt: 7/145	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Cook, Molly	C. (Ms.)		00086313	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/20/2024	Atlas, Nancy		\$90	00.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77098			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>	
Not Employe		Not Employed	''	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
05/29/2024	Ayala, David			57.50
	Chicago, IL 60626-4552			
	ipation / Job title (See Instructions)	Employer (See Instructions		
Payroll Servi		Loyola University Chica	-	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/30/2024	Baer, Betty L		\$2	25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77025-3619			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Not Employe	€d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	<u>.</u> )	Amount of Contribution (\$)	
06/11/2024	Baer, Betty L		\$20	00.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77025-3619			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Not Employe		Not Employed	''	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
06/30/2024	Baker, Jerry			50.00
	Contributor address; City; State; Zip Code			
	• · · ·			
	Houston, TX 77008-4422			
-	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Auto Dealer		Liberty Auto		

	The Instru	ction Guide explains how to complet	te this fo	rm.	1	Total pages Schedule A1: Sch: 5/105 Rpt: 8/145	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)				00086313	-
4	Date	5 Full name of contributor out-of-state	PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/09/2024	Barahona, Gabriela				· · · · · ·	\$25.00
		6 Contributor address; City; State; Zip Code					
		Houston, TX 77019-6709					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	1 5)		
	Not Employe			Not Employed	,		
╞	Date	Full name of contributor out-of-state		)	<u> </u>	Amount of Contribution (\$)	
	05/29/2024	Barish, Rachel				Allound of Contribution (*)	\$5.00
	001201202.						Ψ0.00
		Contributor address; City; State; Zip Code					
		Oakland, CA 94610-4057					
$\vdash$	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Ils And SIs Ir			Las Trampas			
⊢	Date	Full name of contributor out-of-state		)		Amount of Contribution (\$)	
	05/25/2024	Barreto, Larisa				Allound of Contribution (*)	\$100.00
	00/20/202 .	Contributor address; City; State; Zip Code					Ψ100.00
		כטוונווטענטו מטעופיז, כונץ, סומוכ, בוף כסמכ					
		Houston, TX 77030-4188					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ة)		
	Government			Harris County			
	Date	Full name of contributor out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	06/18/2024	Barrios, Roberto					\$25.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77005-3703					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Physician			Houston Methodist Hos	pita	l	
	Date	Full name of contributor out-of-state	PAC (ID#:	)		Amount of Contribution (\$)	
	05/22/2024	Barrow, George					\$20.00
		Contributor address; City; State; Zip Code			1		
		Houston, TX 77009-6508					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Engineer			Tei Planning + Design			
			•				
1							

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/105 Rpt: 9/145	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Cook, Molly	C. (Ms.)		1 I	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/22/2024	Barrow, George			-	\$20.00
		6 Contributor address; City; State; Zip Code		·		
		Houston, TX 77009-6508				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Engineer		Tei Planning + Design			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/25/2024	Bartos, Janet P				\$10.00
		Contributor address; City; State; Zip Code				
		Little Rock, AR 72223-4297				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Batt, Patricia				\$5.00
		Contributor address; City; State; Zip Code		]		
	<b>-</b>	Bellevue, WA 98006-6529		Ĺ		
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions None	S)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/29/2024	Becker, Karen K				\$25.00
		Contributor address; City; State; Zip Code				
		Ponte Vedra Beach, FL 32082-1319				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Not Employe		Not Employed	S)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢1 00
	05/31/2024	Becker, Karen K				\$1.00
		Contributor address; City; State; Zip Code				
		Ponte Vedra Beach, FL 32082-1319				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	3)		
⊢						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/105 Rpt: 10/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/27/2024	Been, Candace				\$100.00
		6 Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Conroe, TX 77384-3983				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/25/2024	Bergman, Eldo				\$5.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77035-3416				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Retired From	۱ Non-Profit	Family Literacy Network	(		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/30/2024	Bergman, Eldo				\$5.00
		Houston, TX 77035-3416				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired From	n Non-Profit	Family Literacy Network	(		
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/29/2024	Bergman, Eldo				\$3.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77035-3416				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Retired From	n Non-Profit	Family Literacy Network	(		
	Date	Full name of contributor out-of-state PAC (ID#:	· )		Amount of Contribution (\$)	
	05/24/2024	Berry, Jason				\$25.00
		Contributor address; City; State; Zip Code				
		Kyle, TX 78640-3828				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Claims adjus	ster	Progressive ins			
			•			
1						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/105 Rpt: 11/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/26/2024	Bionat, Christian				\$100.00
		6 Contributor address; City; State; Zip Code				
		League City, TX 77573-3472				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Vice Preside	nt	Greater Houston Partne	rsł	nip	
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Blick, Suzanne				\$10.00
		Contributor address; City; State; Zip Code				
L		Sioux Falls, SD 57104-7048				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Truck Driver		Self			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/18/2024	Blick, Suzanne				\$4.00
		Contributor address; City; State; Zip Code				
	D i simel assu	Sioux Falls, SD 57104-7048		Ĺ		
	Principal occu Truck Driver	pation / Job title (See Instructions)	Employer (See Instructions Self	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 4 00
	06/27/2024	Blick, Suzanne				\$4.00
		Contributor address; City; State; Zip Code				
		Sioux Falls, SD 57104-7048				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נ)		
	Truck Driver		Self	''		
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	05/29/2024	Block, Robinson	/		Allount of Contribution (*)	\$27.00
	00,20,202	Contributor address; City; State; Zip Code				<b>4-</b>
		Continuation address, City, State, Zip Code				
		Houston, TX 77009-1488				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>.</b>		
	Firefighter		Houston Fire Departmer	nt		

				—		
т	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/105 Rpt: 12/145	
<b>2</b> F	ILER NAME		+	3	Filer ID (Ethics Commission	n Filers)
С	Cook, Molly	C. (Ms.)	ļ		00086313	
4 D	Date	5 Full name of contributor out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	
0	06/29/2024	Block, Robinson				\$27.00
		6 Contributor address; City; State; Zip Code		1		
			ļ			
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		Houston, TX 77009-1488				
<b>8</b> P	rincipal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	s)		
F	-irefighter		Houston Fire Departmen	nt		
D	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
0	)5/21/2024	Bray, Sarah	ļ			\$100.00
		Contributor address; City; State; Zip Code		1		
			ļ			
			ļ			
		Houston, TX 77005-3929				
		upation / Job title (See Instructions)	Employer (See Instructions)	3)		
P	Public Relati	ions	Form Energy			
D	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
0	)5/29/2024	Bright, Larry	ļ			\$2.50
		Contributor address; City; State; Zip Code		1		
			ļ			
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		Ypsilanti, MI 48197-8985				
		upation / Job title (See Instructions)	Employer (See Instructions)	3)		
N	Not Employe	ed	Not Employed			
D	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
0	05/20/2024	Brooks, Allison				\$100.00
		Contributor address; City; State; Zip Code		1		
			ļ			
<u>⊢_</u>		Houston, TX 77006-6021		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
C	consulting		Brooks Stacy LLC	<del>.                                    </del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
0	06/09/2024	Brooks, Michael				\$100.00
		Contributor address; City; State; Zip Code				
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		United TV 77006 1000	ļ			
<u>├</u>	2 in simple and	Houston, TX 77096-1320		Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Physician		Vha			
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/105 Rpt: 13/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/29/2024	Brunetti, Maureen				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Duineirel ecou	Bellaire, TX 77401-2320				
8	Principal occu Nurse Educa	upation / Job title (See Instructions)	9 Employer (See Instructions Houston Methodist Hosp			
				μι		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	+050 00
	05/20/2024	Bryant, Lee				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77030-2020				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	<i></i> ,		
╞				Ξ	Amount of Contribution (¢)	
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$100.00
	05/29/2024					ΦT00.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77030-2020				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>Г</u> 3)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/06/2024	Bryant, Lee			· ·	\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77030-2020				
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	;d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/30/2024	Bube, Melissa				\$9.00
		Contributor address; City; State; Zip Code		1		
		High Point, NC 27265-9222	i			
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
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SCHEDULE	A1
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The Instruction Guide explains how to complete this form.         1         Trait pages Shadelide A1: Sch:: 11/105 Rpt: 14/145           2         FLER NAME Cook, Molly C, (Ms.)         3         File ID (Ethics Commission Filers)           4         Date         5         Full neame of contributor Buckley, Michelle         7           6         Contributor address; City: State: Zip Code         7         Amount of Contribution (\$) Buckley, Michelle         550.00           8         Principal occupation / Job title (See Instructions) Registrar         9         Employer (See Instructions) MFAH - Giassell School of Art           Date         Full name of contributor User explaint         Genologier (See Instructions) Not Employed         Amount of Contribution (\$) S1.00           Date         Full name of contributor User explander A1: Burker, Date         Employer (See Instructions) Not Employed         Amount of Contribution (\$) S250.00           Date         Full name of contributor User explander A1: Burker, Terri         Employer (See Instructions) Not Employed         Amount of Contribution (\$) S250.00           Date         Full name of contributor User explander A1: Burker, Terri         Employer (See Instructions) The Immunization Partnership         Amount of Contribution (\$) S250.00           Date         Full name of contributor User exployer (See Instructions) Not Employed         Amount of Contribution (\$) S10.00           Date         Full name		
2       FILER MAME       3       Filer ID       (Ethics Commission Filers)         2       6062/21/2024       5       Full name of contributor       out-of-state PAC (DD:::::::::::::::::::::::::::::::::::	The Instruction Guide explains how to complete this form.	
Cook, Moly C. (Ms.)       00083313         4 Date       5 Full name of contributor       out-of state PAC (D#)       7 Amount of Contribution (\$)         05/21/2024       6 Contributor address; City: State; Zip Code       7 Amount of Contribution (\$)       \$50.00         8 Principal occupation / Job tile (See Instructions)       9 Employer (See Instructions)       Amount of Contribution (\$)       \$1.00         Registrar       000601/2024       Full name of contributor       out-of state PAC (D#	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
05/21/2024       Buckley, Michelle       \$50.00         6       Contributor address; City; State; Zip Code       Houston, TX 77003-3230       9       Employer (See Instructions)         Registrat       Pall name of contributor       out of-state PAC (Der,		
6       Contributor address; City; State; Zip Code         Houston, TX 77003-3230       Principal occupation / Job title (See Instructions)         Registrar       MFAH - Glassell School of Art         Date       Full name of contributor       out-of-state PAC (ID#	4 Date         5 Full name of contributor         out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
6       Contributor address; City; State; Zip Code         Houston, TX 77003-3230       9       Employer (See Instructions)         Registrat       Paincipal occupation / Job title (See Instructions)       MFAH - Glassell School of Att         Date       O6/01/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         O6/01/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Not Employed         Date       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Date       Amount of Contribution (\$)		\$50.00
8       Principal occupation / Job title (See Instructions) Registrar       9       Employer (See Instructions) MFAH - Glassell School of Art         Date 06/01/2024       Full name of contributor       out-of-state PAC (Do:) Bunker, David       Amount of Contribution (\$) (Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$1.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership       \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Amount of Contribution (\$) \$10.00       \$10.00         Osf/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amoun		
8       Principal occupation / Job title (See Instructions) Registrar       9       Employer (See Instructions) MFAH - Glassell School of Art         Date 06/01/2024       Full name of contributor       out-of-state PAC (Do:) Bunker, David       Amount of Contribution (\$) (Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$1.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership       \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Amount of Contribution (\$) \$10.00       \$10.00         Osf/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amoun		
8       Principal occupation / Job title (See Instructions) Registrar       9       Employer (See Instructions) MFAH - Glassell School of Art         Date 06/01/2024       Full name of contributor       out-of-state PAC (Do:) Bunker, David       Amount of Contribution (\$) (Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$1.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$250.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership       \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Amount of Contribution (\$) \$10.00       \$10.00         Osf/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/27/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amount of Contribution (\$) \$10.00         Date 05/24/2024       Full name of contributor       out-of-state PAC (Do:) Not Employed       Amoun		
Registrar       MFAH - Glassell School of At         Date       Full name of contributor       out-dt-state PAC (Der.       Amount of Contribution (\$)         06/01/2024       Bunker, David       S1.00         Contributor address; City, State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Full name of contributor       out-of-state PAC (Der.         Date       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/27/2024       Burke, Terri       out-of-state PAC (Der.       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/27/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (Der.       Amount of Contribution (\$) <t< td=""><td></td><td><u> </u></td></t<>		<u> </u>
Date       Full name of contributor       out-of-state PAC (IDu       Amount of Contribution (\$)         06/01/2024       Bunker, David       S1.00         Contributor address; City; State; Zip Code       Morcester, MA 01605-1056         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Amount of Contributor (\$)         Date       Full name of contributor       out-of-state PAC (IDu;         O5/24/2024       Full name of contributor       out-of-state PAC (IDu;         Mouston, TX 77002-2241       Amount of Contribution (\$)       \$250.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S250.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$250.00         Date       Full name of contributor       out-of-state PAC (IDe;       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (IDe;       Amount of Contribution (\$)         Difference       Durham, NC 27712-8917       Employer (See Instructions)       \$10.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (IDe;       Amount of Contribution (\$)		
06/01/2024       Bunker, David		
Contributor address; City, State; Zip Code         Worcester, MA 01605-1056         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor		
Worcester, MA 01605-1056         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City, State; Zip Code       Amount of Contribution (\$) \$250.00         Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:) Houston, TX 77002-2241         Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:) Burkman, Marilyn       Amount of Contribution (\$) S10.00         O5/27/2024       Full name of contributor       out-of-state PAC (ID#:) Not Employed       Amount of Contribution (\$) S10.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S87.93         O5/24/2024       Full name of contributor       out-of-state PAC (ID#:) Not Employed       Amount of Contribution (\$) S87.93         O5/24/2024       Full name of contributor       out-of-state PAC (ID#:) Not Employed       Amount of Contribution (\$) S87.93         Of/24/2024       Full name of contributor       out-of-state PAC (ID#:) Contributor address; City, State; Zip Cod		\$1.00
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:		
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:	Warcester MA 01605-1056	
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (IDH:		2)
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Burke, Terri       \$250.00         Contributor address; City; State; Zip Code       Houston, TX 77002-2241       \$250.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/27/2024       Burkman, Marilyn       Amount of Contribution (\$)       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.00         Date       Durham, NC 27712-8917       Employer (See Instructions)       \$10.00         Principal occupation / Job title (See Instructions)       Not Employed       Amount of Contribution (\$)       \$87.93         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$87.93         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$87.93         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amou		5)
05/24/2024       Burke, Terri       \$250.00         Contributor address; City; State; Zip Code       Houston, TX 77002-2241         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         CEO       The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:		
Contributor address; City; State; Zip Code         Houston, TX 77002-2241         Principal occupation / Job title (See Instructions)         CEO         Date         Full name of contributor         05/27/2024         Burkman, Marilyn         Contributor address; City; State; Zip Code         Date         05/27/2024         Burkman, Marilyn         Contributor address; City; State; Zip Code         Durham, NC 27712-8917         Principal occupation / Job title (See Instructions)         Not Employed         Date         05/24/2024         Full name of contributor         out-of-state PAC (ID#:         Not Employed         Date         O5/24/2024         Full name of contributor         Out-of-state PAC (ID#:         Not Employed         Date         O5/24/2024         COOK, MARK D         Contributor address; City; State; Zip Code         Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Montgomery, TX 77356-4648		
Houston, TX 77002-2241       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         CEO       The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:)         05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Durham, NC 27712-8917       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Full name of contributor       out-of-state PAC (ID#:		
Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership         Date       Full name of contributor out-of-state PAC (ID#:) Burkman, Marilyn       Amount of Contribution (\$)         05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#:) COOK, MARK D       Amount of Contribution (\$)         05/24/2024       Full name of contributor out-of-state PAC (ID#:) COOK, MARK D       Amount of Contribution (\$)         05/24/2024       Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) CEO       Employer (See Instructions) The Immunization Partnership         Date       Full name of contributor out-of-state PAC (ID#:) Burkman, Marilyn       Amount of Contribution (\$)         05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#:) COOK, MARK D       Amount of Contribution (\$)         05/24/2024       Full name of contributor out-of-state PAC (ID#:) COOK, MARK D       Amount of Contribution (\$)         05/24/2024       Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$87.93		
CEO       The Immunization Partnership         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       \$10.00         Durham, NC 27712-8917       Employer (See Instructions)       Secondary         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       COOK, MARK D	Houston, TX 77002-2241	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917       Full name of contributor         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mot Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Montgomery, TX 77356-4648       Montgomery, TX 77356-4648       Employer (See Instructions)       Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)
05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:) COOK, MARK D         05/24/2024       Foull name of contributor       out-of-state PAC (ID#:) COOK, MARK D         05/24/2024       Foull name of contributor       out-of-state PAC (ID#:) COOK, MARK D         Principal occupation / Job title (See Instructions)       Kamployed         Montgomery, TX 77356-4648       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	CEO The Immunization Partr	nership
05/27/2024       Burkman, Marilyn       \$10.00         Contributor address; City; State; Zip Code       Durham, NC 27712-8917       \$10.00         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:) COOK, MARK D       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       Full name of contributor       better participart (participart (participart (participart (participart (participart (participart (participart (participart (participar	Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
Durham, NC 27712-8917         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor or out-of-state PAC (ID#:)         05/24/2024       COOK, MARK D         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Montgomery, TX 77356-4648       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		
Durham, NC 27712-8917         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor or out-of-state PAC (ID#:)         05/24/2024       COOK, MARK D         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Montgomery, TX 77356-4648       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Not Employed         Date       Full name of contributor out-of-state PAC (ID#:)         05/24/2024       COOK, MARK D         Contributor address; City; State; Zip Code       \$87.93         Montgomery, TX 77356-4648       Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Not Employed         Date       Full name of contributor out-of-state PAC (ID#:)         05/24/2024       COOK, MARK D         Contributor address; City; State; Zip Code       \$87.93         Montgomery, TX 77356-4648       Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       COOK, MARK D       \$87.93         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Function (\$)         Montgomery, TX 77356-4648       Employer (See Instructions)       Employer (See Instructions)	Durham, NC 27712-8917	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/24/2024       COOK, MARK D       \$87.93         Contributor address; City; State; Zip Code       Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)       Employer (See Instructions)		s)
05/24/2024       COOK, MARK D       \$87.93         Contributor address; City; State; Zip Code       Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Not Employed Not Employed	
Contributor address; City; State; Zip Code Montgomery, TX 77356-4648 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code         Montgomery, TX 77356-4648         Principal occupation / Job title (See Instructions)         Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Principal occupation / Job title (See Instructions) Employer (See Instructions)		
Not Employed Not Employed		s)
	Not Employed Not Employed	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/105 Rpt: 15/145
2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Cook, Molly				00086313
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)
	06/03/2024	COOK, MARK D			\$15,000.00
		6 Contributor address; City; State; Zip Code			
		Montgomery, TX 77356-4648			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Not Employe	эd	Not Employed		
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	06/26/2024	Calvert, Rogene			\$200.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77025-5719			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	
	Philanthropic	c Consultant	Self		
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	06/18/2024	Cannon, Veronica			\$5.00
		Contributor address; City; State; Zip Code			
		-			
		Seattle, WA 98118-3501			
		upation / Job title (See Instructions)	Employer (See Instructions	5)	
	Not Employe	ed	Not Employed		
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	05/30/2024	Caramagno, Lisa			\$67.50
		Contributor address; City; State; Zip Code			
		Novi, MI 48374-3686			
		upation / Job title (See Instructions)	Employer (See Instructions	5)	
	Not Employe	ed	Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	05/29/2024	Carls, Beth			\$5.00
		Contributor address; City; State; Zip Code		1	
		Liberty Hill, TX 78642-2482	_		
		upation / Job title (See Instructions)	Employer (See Instructions	5)	
	Ceo		Oneseventeen Media		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/105 Rpt: 16/145	
2	FILER NAME			2	Filer ID (Ethics Commission	- Eilore)
2	Cook, Molly				00086313	I FIICISJ
4	Date	· · ·				
4	Dale 06/11/2024	5 Full name of contributor out-of-state PAC (ID#: Cazares, Gabe	)	ľ	Amount of Contribution (\$)	\$100.00
	00/11/2024					Φ100.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77011-2822				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Nonprofit Ma	anagement	Link Houston			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Chatterjee, Sumitra				\$25.00
		Contributor address; City; State; Zip Code		1		
		Minneapolis, MN 55401-2693				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Research		Food Company			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/23/2024	Chou, Benjamin				\$50.00
		Contributor address; City; State; Zip Code		1		
		San Francisco, CA 94114-1936				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Program Off	icer	Packard Foundation			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Clark, Erlann				\$10.00
		Contributor address; City; State; Zip Code		1		
		Victor, NY 14564-9503				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/03/2024	Clark, Linda				\$5.00
		Contributor address; City; State; Zip Code		1		
		Torrance, CA 90505				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/105 Rpt: 17/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/24/2024	Claypool, James				\$25.00
	I	6 Contributor address; City; State; Zip Code		1		
	I					
	I					
		Spicewood, TX 78669-6435				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Cofield, Brandon				\$25.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
		Houston, TX 77020-6122	•			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Cohen, Bobbie & Roy				\$200.00
	I	Contributor address; City; State; Zip Code		1		
	I					
	I					
		Houston, TX 77071-2303	1			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed	-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/26/2024	Conyngham, Karen		]		\$25.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Austin TV 70746 4115				
$\vdash$	Dringingl oog	Austin, TX 78746-4115		<u> </u>		
	Researcher	upation / Job title (See Instructions)	Employer (See Instructions Self	5)		
				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	¢1 00
	05/31/2024	Corbin, Troy				\$1.00
	I	Contributor address; City; State; Zip Code				
	I					
	I	Happy Valley, OR 97086-4329				
	Dringingl occu		Employer (See Instructions	<u> </u>		
	H&S Consult	ipation / Job title (See Instructions) tant	Employer (See Instructions Nw Eh&Sa	5)		
			INW EIIQJA			
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SCHEDULE	A1
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⊢						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/105 Rpt: 18/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/29/2024	Crochet, Carolyn				\$2.50
		6 Contributor address; City; State; Zip Code		ł		
		Gretna, LA 70056-4016				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ل</u> ے (		
	Not Employe	ed .	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/04/2024	Crochet, Carolyn				\$1.50
	I	Contributor address; City; State; Zip Code		ł		
		Gretna, LA 70056-4016				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Not Employe	ed	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/29/2024	Crochet, Carolyn				\$2.50
		Contributor address; City; State; Zip Code		1		
		Gretna, LA 70056-4016				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	∋d	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/21/2024	Cross Oak Group				\$1,000.00
	I	Contributor address; City; State; Zip Code		1		
		Austin, TX 78701-1819				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
		,				
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/27/2024	Crowley, Ann				\$100.00
	I	Contributor address; City; State; Zip Code				
		Houston, TX 77005-3830				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	}d	Not Employed			
┢			1			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/105 Rpt: 19/145	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/27/2024	Cuddy, Ron				\$20.00
		6 Contributor address; City; State; Zip Code		ł		
		Thornton, CO 80602-4677				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	IT		Umoja			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/10/2024	Culp, Pj				\$50.00
		Contributor address; City; State; Zip Code		1		
		Atlanta, GA 30339-7603				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/29/2024	Cummings, Ana Guerrero				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77098-1708	1			
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	30 	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/01/2024	Cylkowski, Andrew		]		\$5.00
		Contributor address; City; State; Zip Code				
		Eureka Springs, AR 72632-0186				
┝	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
╞				<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀጋ ደብ
	05/21/2024	Dace, Letitia				\$2.50
		Contributor address; City; State; Zip Code				
		Manhattan, KS 66502-3538				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Not employe		Not employed	5)		
$\vdash$			The employed			

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/105 Rpt: 20/145	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Cook, Molly				00086313	-
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
05/21/2024	Damri, Mehroo				\$5.00
	6 Contributor address; City; State; Zip Code		1		
	Euless, TX 76040-4684				
	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/29/2024	Dante Jr, Joseph J				\$2.50
	Contributor address; City; State; Zip Code		1		
	Lancaster, CA 93534				
	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/23/2024	Dao, Kathryn				\$250.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75229-2739		ļ		
•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Physician		Aurinia	-		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/23/2024	Darrah, Glenn				\$20.00
	Contributor address; City; State; Zip Code		]		
	Houston, TX 77025-4543				
Drincinal occu		Employer (See Instructions	<u> </u>		
Economic A	ipation / Job title (See Instructions) nalvst	Employer (See Instructions Stafflink Inc	5)		
			<del>.</del>		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>ന</b> വ വവ
06/23/2024	Darrah, Glenn				\$20.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77025-4543				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ב)		
Economic A		Stafflink Inc	5)		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/105 Rpt: 21/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/10/2024					\$10.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Houston, TX 77042-5920	t <u> </u>			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
L	Graduate St		Rice University	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/06/2024					\$33.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027-4004				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	Executive		Vynckier	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	
	06/06/2024	Davey, Robert	/			\$33.00
	00,00,21	Contributor address; City; State; Zip Code		ł		<b>400</b>
		Houston, TX 77027-4004				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive		Vynckier			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/19/2024	Davey, Robert				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77027-4004				
_	Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Executive		Vynckier	5)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	06/29/2024	Full name of contributor out-of-state PAC (ID#: Davey, Robert	J			\$5.00
	00.20.202	Contributor address; City; State; Zip Code		ł		40.01
		Houston, TX 77027-4004				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Executive		Vynckier			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 19/105 Rpt: 22/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/18/2024	Davis, James				\$12.50
		6 Contributor address; City; State; Zip Code		1		
		Spring, TX 77373-8185				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/29/2024	Davis Jr, Donald G				\$2.50
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78731-6008				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	None			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/10/2024	Day, Linda				\$10.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005-1935				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/30/2024	Derosa, Kimberly				\$10.00
		Contributor address; City; State; Zip Code		1		
		Flower Mound, TX 75028-2279				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Musician		Self	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/21/2024	Desai, Nisha				\$100.00
		Contributor address; City; State; Zip Code		]		
		Houston, TX 77027-4006	t			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Founder		Intention			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 20/105 Rpt: 23/145
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly			00086313
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/21/2024	Dharma, Chrisette		\$1,000.00
	6 Contributor address; City; State; Zip Code		1
	Dallas, TX 75209-2837	1	<u> </u>
<ul> <li>8 Principal occu</li> <li>Doctor</li> </ul>	upation / Job title (See Instructions)	9 Employer (See Instructions Chrisette Dharma	<i>;</i> )
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/19/2024	Dharmagunaratne, Tissa		\$100.00
			•
	Dallas, TX 75219-4817		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Not Employe		Not Employed	·/
Date			Amount of Contribution (\$)
06/24/2024	Full name of contributor out-of-state PAC (ID#: Di Gann, Jan L	)	4mount of Contribution (\$) \$100.00
0012412024			φ±00.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019-6809		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Not Employe		Not Employed	<i>"</i>
		<u> </u>	Amount of Contribution (\$)
Date 05/30/2024	Full name of contributor out-of-state PAC (ID#: Dinwiddie_Sandra	)	Amount of Contribution (\$)
05/30/2024	Dinwiddie, Sandra		\$5.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77062-4424		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Not Employe		Not Employed	,
Date		<u> </u>	Amount of Contribution (\$)
06/25/2024	Full name of contributor out-of-state PAC (ID#: Docktor, Desiree	)	\$25.00
00/25/2024			ψ20.00
	Contributor address; City; State; Zip Code		
	Palo Alto, CA 94303-4143		
Dringing occu		Employer (See Instructions	
Principal occu Realtor	upation / Job title (See Instructions)	Employer (See Instructions	3)
Realion		Compass	

SCHEDULE	A1
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The Instruction Guide explains how to complete this form.       1 Total pages Schedule A1: Sch: 21/105 Rpt: 24/145         2       FILER NAME Cook, Molly C. (Ms.)       3 Filer ID (Ethics Commission 00086313         4       Date 06/14/2024       5 Full name of contributor out-of-state PAC (ID#:) Doherty, Kyle       7 Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code Houston, TX 77007-7404       9 Employer (See Instructions) Baker Botts Llp	\$24.00
2       FILER NAME Cook, Molly C. (Ms.)       3       Filer ID (Ethics Commission 00086313         4       Date 06/14/2024       5       Full name of contributor out-of-state PAC (ID#:) Doherty, Kyle       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       4       4       4       4         8       Principal occupation / Job title (See Instructions) Attorney       9       Employer (See Instructions) Baker Botts Llp       9	
Cook, Molly C. (Ms.)       00086313         4       Date       5       Full name of contributor out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         06/14/2024       Doherty, Kyle       6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       Houston, TX 77007-7404       9       Employer (See Instructions) Baker Botts Llp         8       Principal occupation / Job title (See Instructions) Attorney       9       Employer (See Instructions) Baker Botts Llp	
06/14/2024       Doherty, Kyle         6       Contributor address; City; State; Zip Code         Houston, TX 77007-7404       Houston, TX 77007-7404         8       Principal occupation / Job title (See Instructions) Attorney       9       Employer (See Instructions) Baker Botts Llp	\$24.00
06/14/2024       Doherty, Kyle         6       Contributor address; City; State; Zip Code         Houston, TX 77007-7404       Houston, TX 77007-7404         8       Principal occupation / Job title (See Instructions) Attorney       9       Employer (See Instructions) Baker Botts Llp	\$24.00
6       Contributor address; City; State; Zip Code         Houston, TX 77007-7404         8       Principal occupation / Job title (See Instructions) Attorney         9       Employer (See Instructions) Baker Botts Llp	
Houston, TX 77007-7404  8 Principal occupation / Job title (See Instructions) Attorney  9 Employer (See Instructions) Baker Botts Llp	
8     Principal occupation / Job title (See Instructions)     9     Employer (See Instructions)       Attorney     Baker Botts Llp	
8     Principal occupation / Job title (See Instructions)     9     Employer (See Instructions)       Attorney     Baker Botts Llp	
Attorney Baker Botts Llp	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	
06/21/2024 Dougherty, Jim & Judy	\$50.00
Contributor address; City; State; Zip Code	
Houston, TX 77007-2077	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Attorneys Dougherty & Dougherty	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	<b>*</b> 50.00
06/18/2024 Driscoll, Vic	\$50.00
Contributor address; City; State; Zip Code	
Houston, TX 77005-1451	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Attorney Self	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
05/29/2024 Duff, Carol	\$5.00
Contributor address; City; State; Zip Code	
Red Wing, MN 55066-2414	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
	\$50.00
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	\$50.00
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       05/25/2024     Elizondo, Eduardo	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Elizondo, Eduardo       Contributor address; City; State; Zip Code       Amount of Contribution (\$)	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Elizondo, Eduardo       Contributor address; City; State; Zip Code       Houston, TX 77019-3617	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Elizondo, Eduardo       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Houston, TX 77019-3617       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	\$50.00
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Elizondo, Eduardo       Contributor address; City; State; Zip Code       Houston, TX 77019-3617	\$50.00

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 22/105 Rpt: 25/145 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cook, Molly C. (Ms.) 00086313 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/22/2024 Emmanuel Guerrero Campaign \$1,000.00 6 Contributor address; City; State; Zip Code Pasadena, TX 77506-5133 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/30/2024 \$2.50 Erickson, Mary Contributor address; City; State; Zip Code Langley, WA 98260-8623 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/29/2024 Eriksen, Erin \$50.00 Contributor address; City; State; Zip Code Houston, TX 77008-6964 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2024 \$50.00 Eriksen, Erin Contributor address; City; State; Zip Code Houston, TX 77008-6964 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/26/2024 \$250.00 Evbagharu, Odus Contributor address; City; State; Zip Code Katy, TX 77449-7593 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Communications Director** Harris County Democratic Party

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/105 Rpt: 26/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/28/2024	Fahey, Dennis			······	\$5.00
		6 Contributor address; City; State; Zip Code		ł		·
		Denver, CO 80238-2347				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/06/2024	Falender, Allie			· · · · · · · · · · · · · · · · · · ·	\$33.00
		Contributor address; City; State; Zip Code		ł		• -
		Houston, TX 77005-4324				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager		Shell			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Fallon, Jennifer			······	\$50.00
				ł		
		Houston, TX 77006-3241				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Feifer, Barbara				\$2.50
		Contributor address; City; State; Zip Code		1		
		Boulder, CO 80301-1757				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	None			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	06/14/2024	Feigelson, Gene				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77265-6717				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Self		Self			
			·			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 24/105 Rpt: 27/145	
2 FILER NAME			3 Filer ID (Ethics Commission	
Cook, Molly	C. (Ms.)		00086313	
4 Date 06/06/2024	5 Full name of contributor out-of-state PAC (ID#: Fiesinger, Troy	)	7 Amount of Contribution (\$)	\$62.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77096-3910			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	)	
Physician		Village Medical		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/29/2024	Fink, Ed			\$50.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77006-3838			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Director		Uthealth Houston		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/29/2024	Forney, Jan Lynette			\$5.00
	Contributor address; City; State; Zip Code	,		
	······			
	Houston, TX 77006-4403			
·	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Geophysicis	.t	Swift Energy		
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
06/29/2024	Forney, Jan Lynette			\$5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77006-4403			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Geophysicis		Swift Energy		
Date	Full name of contributor Out-of-state PAC (ID#:	· )	Amount of Contribution (\$)	
06/30/2024	Frank, Barr	/		\$2,000.00
	Contributor address; City; State; Zip Code			+-,
	Houston, TX 77024			
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions)	)	
Afex Interna		Director	, 	
		<u> </u>		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 25/105 Rpt: 28/145	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/05/2024	Franklin, Olive				\$3.00
		6 Contributor address; City; State; Zip Code		ł		
		Ukiah, CA 95482-6849				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	3d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	05/27/2024	Franks, Gene				\$10.00
		Contributor address; City; State; Zip Code		1		
		Denton, TX 76209-1078				
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Water Treatr	ment Retired	Pure Water Products			
	Date		)	Γ	Amount of Contribution (\$)	
	05/30/2024	Friedman, Ellen				\$50.00
		Contributor address; City; State; Zip Code		1		
		San Francisco, CA 04117 2016				
	Dringing occu	San Francisco, CA 94117-3816 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
╘				1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	Ф <u>Э</u> Е ОО
	05/25/2024	Friedrich, Mary Anne Anne				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77096-6109				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Not Employe		Not Employed	- ,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	05/24/2024	Fullem, Robert	/			\$20.00
	0012712021	Contributor address; City; State; Zip Code		-		Ψ20.00
		Continuation address, City, State, Zip Code				
		Houston, TX 77005-1704				
$\vdash$	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Analyst	•	Nih	-		
⊢						

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/105 Rpt: 29/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/24/2024	Fullem, Robert			······	\$20.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77005-1704				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<b></b> 5)		
	Analyst		Nih			
╞	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/30/2024	Gafner, David	/		,	\$12.50
		Contributor address; City; State; Zip Code				·
		West Palm Beach, FL 33417-8217				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Gaines, Diana				\$100.00
		Contributor address; City; State; Zip Code				
		Spring, TX 77380-4057				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Commercial	Real Estate Broker	self employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/28/2024	Garrett, Karen				\$15.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77019-6432				
Γ		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/20/2024	Garza, Natalie				\$100.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78212-2815				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Deputy Orga	anizing Director	NextGen America			
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/105 Rpt: 30/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/20/2024	George, Karen				\$100.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77005-2622				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Financial cor	nsultant	Ralph S. O'Connor & As	SS0	ciates	
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/30/2024	Geppert, Sharon				\$2.50
		Contributor address; City; State; Zip Code		1		
		Leawood, KS 66224-9793				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/21/2024	Gerhard, Earl William			• •	\$50.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77042-2633				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chemical En	ıgineer	Kelly Services			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/18/2024	Gerstenhaber, Suzi				\$12.50
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77056-4116				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Waldman Smallwood			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Ghazarian, Seta				\$25.00
		Contributor address; City; State; Zip Code		1		
		Victorville, CA 92395-9710				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Hesperia Unified			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 28/105 Rpt: 31/145	
Ļ	FILER NAME			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Ľ				3	Filer ID (Ethics Commissio	on Fliers)
Ļ	Cook, Molly	· · ·		Ļ	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	÷000.00
	05/29/2024	Gibbs, Richard				\$200.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77098-1607				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	 S)		
	Scientist		Baylor College Of Medic	cine	9	
	Date	Full name of contributor out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
	05/26/2024	Gibson, Cynthia			• · ·	\$50.00
		Contributor address; City; State; Zip Code				
		Williamsburg, VA 23185-2476				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	social work		Community Care			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Т	Amount of Contribution (\$)	
	06/18/2024	Gilliam, Lance				\$1,000.00
		Houston, TX 77019-6209				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Real Estate		Wsg-Re Llc			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
	06/30/2024	Gillis, Gretchen				\$10.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006-6133				
		upation / Job title (See Instructions)	Employer (See Instructions			
	Geologist		Aramco Services Comp	Jany	У	
	Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	05/24/2024	Godfrey, Justin				\$100.00
	Contributor address; City; State; Zip Code			"		
		Austin, TX 78721-2544	<u>.</u>			
		upation / Job title (See Instructions)	Employer (See Instructions			
	Vice Preside	ent/Treasurer	Barilla Management Inc	<u></u>		

SCHEDULE	A1
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Cook, Molly C. (Ms.) 00086313						
Cook, Molly C. (Ms.)       00086313         4 Date 06/21/2024       5 Full rame of contribution   wut-of-state PAC (IDF:)       7 Amount of Contribution (S) Godmillow, Jill       5 Lill rame of contribution (S) 6 Contribution address; City: State; Zip Code       7 Amount of Contribution (S) S1.50         8 Principal occupation / Job title (See Instructions) Not Employed       9 Employer (See Instructions) Not Employed       Amount of Contribution (S) Goldblatt, Steven       Amount of Contribution (S) Goldblatt, Steven         Date 05/27/2024       Full name of contributor   out-of-state PAC (IDF:	The Instruc	ction Guide explains how to complete this f	orm.	1		
Cook, Molly C. (Ms.)       00086313         4 Date 06/21/2024       5 Full rame of contribution	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
06/21/2024       Godmilow, Jill       \$1.50         6       Contributor address; City; State; Zip Code       New York, NY 10035-2389         8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date       Goldblatt, Steven       Ost/21/2024       Amount of Contributor       Amount of Contribution (\$) Goldblatt, Steven       \$50.00         Principal occupation / Job title (See Instructions) Physician       Full name of contributor       ext-of-state PAC (De:		C. (Ms.)				-
06/21/2024       Godmilow, Jill       \$1.50         6       Contributor address; City; State; Zip Code       New York, NY 10035-2389       9       Employer (See Instructions) Not Employed         8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S50.00         Date 05/27/2024       Full name of contributor Goldblatt, Steven Contributor address; City; State; Zip Code       Amount of Contribution (\$) S50.00         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care       Amount of Contribution (\$) \$2.50         Date 05/28/2024       Full name of contributor Golding, Constance       Amount of Contribution (\$) \$2.50       \$2.50         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Date 06/28/2024       Full name of contributor Golding, Constance       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50.00         Principal occupation / Job title (See Instructions) Not Employed <td>4 Date</td> <td>5 Full name of contributor out-of-state PAC (ID#:_</td> <td>)</td> <td>7</td> <td>Amount of Contribution (\$)</td> <td></td>	4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date 05/27/2024       Full name of contributor out-of-state PAC (De: 	06/21/2024					\$1.50
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date 05/27/2024       Full name of contributor out-of-state PAC (De: 		6 Contributor address; City; State; Zip Code				
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date 05/27/2024       Full name of contributor       out-of-state PAC (Def:) Goldblatt, Steven       Amount of Contribution (\$) \$50.00         Date 05/27/2024       Full name of contributor Contributor address; City; State; Zip Code       Amount of Contribution (\$) \$50.00         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care         Date 05/28/2024       Full name of contributor       out-of-state PAC (Def:) Golding, Constance       Amount of Contribution (\$) \$2.50         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Date 06/28/2024       Full name of contributor       out-of-state PAC (Def:) Not Employed       Amount of Contribution (\$) \$2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) \$2.50         Date 05/28/2024       Full name of contributor       out-of-state PAC (DF:) Not Employed       Amount of Contribution (\$) \$2.50.00         Date 05/28/2024       Full name of contributor       ou						
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date 05/27/2024       Full name of contributor       out-of-state PAC (DBF:) Goldblatt, Steven       Amount of Contribution (\$)         S50.00       Full name of contributor       out-of-state PAC (DBF:) Goldblatt, Steven       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health Care       Amount of Contribution (\$)         Date 05/28/2024       Full name of contributor       out-of-state PAC (DBF:) Golding, Constance       Amount of Contribution (\$)         Not Employed       S2.50       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Not Employed       Not Employed       Amount of Contribution (\$)       \$2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date 06/28/2024       Full name of contributor       out-of-state PAC (DBF:) Not Employed       Amount of Contribution (\$)         Date 06/28/2024       Full name of contributor       out-of-state PAC (DBF:) Not Employed       Amount of Contribution (\$)         Date 05/28/2024       Full name of contributor       out-of-state PAC (DBF:) Not Employed       Amount of Contribution (\$)						
Not Employed       Not Employed         Date 05/27/2024       Full name of contributor       out-of-state PAC (ID# Goldblatt, Steven       Amount of Contribution (\$) S50.00         Contributor address; City: State; Zip Code       Filliname of contributor address; City: State; Zip Code       Amount of Contribution (\$) S50.00         Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care       Amount of Contribution (\$) S2.50         Date 05/28/2024       Full name of contributor       out-of-state PAC (ID# Contributor address; City: State; Zip Code       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S2.50         Oaf28/2024       Full name of contributor       out-of-state PAC (ID# Oaf28/2024       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Mamount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Amount of Contribution (\$) S2.50.00         Date 05/28/2024       Full name of contributor       out-of-state PAC (ID# Oate (See Instructions) Not Employed       Am						
Date       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         05/27/2024       Goldblatt, Steven       \$50.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$50.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Physician       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         05/28/2024       Golding, Constance       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Not Employed       New York, NY 10025-5825       Employer (See Instructions)       Not Employed         Date       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         06/28/2024       Golding, Constance       contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/28/2024       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (IDF       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (IDF       Amount of Contributi				;)		
05/27/2024       Goldblatt, Steven       \$50.00         Contributor address; City; State; Zip Code       Higganum, CT 06441-4316       Fincipal occupation / Job title (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Hartford Health care         Date       Full name of contributor       out-of-state PAC (IDE:	Not Employe	?d	Not Employed			
Contributor address; City; State; Zip Code         Higganum, CT 06441-4316         Principal occupation / Job title (See Instructions)         Physician         Date         Golding, Constance         Contributor address; City; State; Zip Code         Mew York, NY 10025-5825         Principal occupation / Job title (See Instructions)         New York, NY 10025-5825         Principal occupation / Job title (See Instructions)         Not Employed         Date         Golding, Constance         Contributor address; City; State; Zip Code         Not Employed         Date         Golding, Constance         Golding, Constance         Contributor address; City; State; Zip Code         Not Employed         Date         Golding, Constance         Contributor address; City; State; Zip Code         Not Employed         New York, NY 10025-5825         Principal occupation / Job title (See Instructions)         New York, NY 10025-5825         Principal occupation / Job title (See Instructions)         Not Employed         Date         Of/28/2024         Golding, Constance         Contributor address; City; State; Zip Code	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code       Higganum, CT 06441-4316         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Physician       Amount of Contribution (\$)         Date       Full name of contributor	05/27/2024					\$50.00
Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care         Date       Full name of contributor       out-of-state PAC (ID#:						
Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care         Date       Full name of contributor       out-of-state PAC (ID#:						
Principal occupation / Job title (See Instructions) Physician       Employer (See Instructions) Hartford Health care         Date       Full name of contributor       out-of-state PAC (D#:						
Physician       Hartford Health care         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$2.50         Not Employed       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Not Employed       Amount of Contribution (\$)       \$2.50         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.50         Not Employed       Not Employed       Amount of Contribution (\$)       \$2.50         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)       \$250.00         O5/28/2024       Full name of contributor       out-of-state PAC (ID#:				L		
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       New York, NY 10025-5825       State; Zip Code         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:		pation / Job title (See Instructions)		;)		
05/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       New York, NY 10025-5825       Employer (See Instructions)         Not Employed       Golding, Constance       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#;)       Amount of Contribution (\$)         06/28/2024       Golding, Constance          Contributor address; City; State; Zip Code	Physician		Hartford Health care	_		
Contributor address; City; State; Zip Code         New York, NY 10025-5825         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#;) Golding, Constance       Amount of Contribution (\$) S2.50         O6/28/2024       Full name of contributor out-of-state PAC (ID#;) Golding, Constance       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S2.50         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$) S250.00         Date 05/28/2024       Full name of contributor out-of-state PAC (ID#;) Gomez, Placido       Amount of Contribution (\$) S250.00       \$250.00         Of/28/2024       Full name of contributor out-of-state PAC (ID#;) Houston, TX 77007-5728       Amount of Contribution (\$)       \$250.00			)		Amount of Contribution (\$)	
New York, NY 10025-5825       Employer (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (D#:) Golding, Constance       Amount of Contribution (\$)         06/28/2024       Golding, Constance       S2.50         Contributor address; City, State; Zip Code       New York, NY 10025-5825       Amount of Contributions) Not Employed         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#:) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#:) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#:) Not Employed       Amount of Contribution (\$)         05/28/2024       Gomez, Placido       \$250.00       \$250.00         Contributor address; City, State; Zip Code       Houston, TX 77007-5728       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       S250.00	05/28/2024	I				\$2.50
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance        \$2.50         Contributor address; City; State; Zip Code        Amount of Contribution (\$)         New York, NY 10025-5825       Employer (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Gomez, Placido		Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance        \$2.50         Contributor address; City; State; Zip Code        Amount of Contribution (\$)         New York, NY 10025-5825       Employer (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Gomez, Placido						
Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance		Now York NY 1003E E03E				
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       \$2.50         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.50         Not Employed       Not Employed       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Gomez, Placido       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Houston, TX 77007-5728       Houston, TX 77007-5728       Employer (See Instructions)	Dringing oggu		Employer (See Instructions	$\sum_{i=1}^{n}$		
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       New York, NY 10025-5825         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Not Employed         Date       Full name of contributor         05/28/2024       Gomez, Placido         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         05/28/2024       Full name of contributor       out-of-state PAC (ID#:)         Of Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Houston, TX 77007-5728       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				Э Э		
06/28/2024       Golding, Constance       \$2.50         Contributor address; City; State; Zip Code       New York, NY 10025-5825         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)         05/28/2024       Gomez, Placido       amount of Contribution (\$)         05/28/2024       Gomez, Placido       \$250.00         Principal occupation / Job title (See Instructions)       Amount of Contribution (\$)         Houston, TX 77007-5728       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				—		
Contributor address; City; State; Zip Code         New York, NY 10025-5825         Principal occupation / Job title (See Instructions)         Not Employed         Date         Full name of contributor         0st/28/2024         Gomez, Placido         Contributor address; City; State; Zip Code         Houston, TX 77007-5728         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Not Employed			)		Amount of Contribution (\$)	÷0 50
New York, NY 10025-5825         Principal occupation / Job title (See Instructions) Not Employed       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)         05/28/2024       Gomez, Placido       \$250.00         Contributor address; City; State; Zip Code       Houston, TX 77007-5728       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       State Stat	06/28/2024	-				\$2.50
Principal occupation / Job title (See Instructions) Employer (See Instructions)   Not Employed Employer (See Instructions)   Date Full name of contributor out-of-state PAC (ID#:)   05/28/2024 Gomez, Placido \$250.00   Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code   Houston, TX 77007-5728 Employer (See Instructions)   Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions)   Not Employed Employer (See Instructions)   Date Full name of contributor out-of-state PAC (ID#:)   05/28/2024 Gomez, Placido S250.00   Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code   Houston, TX 77007-5728 Employer (See Instructions)   Principal occupation / Job title (See Instructions) Employer (See Instructions)						
Principal occupation / Job title (See Instructions) Employer (See Instructions)   Not Employed Employer (See Instructions)   Date Full name of contributor out-of-state PAC (ID#:)   05/28/2024 Gomez, Placido \$250.00   Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code   Houston, TX 77007-5728 Employer (See Instructions)   Principal occupation / Job title (See Instructions) Employer (See Instructions)		New York, NY 10025-5825				
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Gomez, Placido       \$250.00         Contributor address; City; State; Zip Code       Houston, TX 77007-5728       Full output (See Instructions)         Principal occuration / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)	Princinal occu	·	Employer (See Instructions	<u> </u> ເ)		
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/28/2024       Gomez, Placido       \$250.00         Contributor address; City; State; Zip Code       Houston, TX 77007-5728         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				ワ		
05/28/2024 Gomez, Placido \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007-5728 Principal occupation / Job title (See Instructions) Employer (See Instructions)				_	Array of Cantribution (f)	
Contributor address; City; State; Zip Code         Houston, TX 77007-5728         Principal occupation / Job title (See Instructions)         Employer (See Instructions)			)			ቀንድባ በበ
Houston, TX 77007-5728       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	0312012024					Φ200.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions)						
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Houston. TX 77007-5728				
	Principal occu		Employer (See Instructions	<u>ا</u>		
	-		1			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 30/105 Rpt: 33/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly				00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/31/2024	Gomoll, Terry				\$1.00
		6 Contributor address; City; State; Zip Code		1		
		Apopka, FL 32703-6244				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/25/2024	Gonzales, Mark				\$30.00
		Contributor address; City; State; Zip Code				
		Humble, TX 77396-2465				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	IT		Reynolds & Reynolds			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/01/2024	Goodrich, Donna				\$1.00
	-	Contributor address; City; State; Zip Code				
		Montpelier, VT 05602-2153				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b>.</b> 5)		
	Manuscript E	Editor	Jnspg			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	06/26/2024	Grace & McEwan Consulting LLC Political Fund			(1)	\$1,000.00
		Contributor address; City; State; Zip Code				+_,000.00
		Contributor address, City, State, Zip Code				
		Austin, TX 78701-1629				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ټ)		
				,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	
	06/06/2024	Graff, Ann	)			\$33.00
	00/00/2024	Contributor address: City; State: Zip Code				φ00.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77007-5153				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Engineer		Chevron	<i>)</i>		
	Lingineer					
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/105 Rpt: 34/145	
2	FILER NAME	NAME		3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/28/2024	Graham, Susan				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77009-1482				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/11/2024	Graham, Susan				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77009-1482	1			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	05/27/2024	Green, Christine				\$100.00
		Contributor address; City; State; Zip Code				
		Lummi Island, WA 98262-8681				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not Employe		Not Employed	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Г	Amount of Contribution (\$)	
	05/24/2024	Gregg, Kerry	/		Allount of Contribution (4)	\$250.00
	0012 11202 .	Contributor address; City; State; Zip Code				Ψ200.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77003-1610				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Marketing	1	LAN Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/31/2024	Gutfeld, Karen				\$1.00
	Contributor address; City; State; Zip Code			1		
		Glendale, CA 91204-1131				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/105 Rpt: 35/145	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/25/2024	Hafizi, Niloufar				\$100.00
	I	6 Contributor address; City; State; Zip Code		1		
		Katy, TX 77450-8792				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Nonprofit		Emgage			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/12/2024	Hallenbeck, Robert				\$20.00
	I	Contributor address; City; State; Zip Code		1		
	I	Houston, TX 77019-6701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager		Waste Management			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Halvorson, Jennifer				\$25.00
	I	Contributor address; City; State; Zip Code		1		
		Pasadena, TX 77506-4107				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	accountant		OMG Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Halvorson, Jennifer				\$50.00
	I	Contributor address; City; State; Zip Code		1		
		Pasadena, TX 77506-4107	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	accountant		OMG Inc			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ţ	Amount of Contribution (\$)	
	06/26/2024	Hampton, Dennis				\$1.50
	I	Contributor address; City; State; Zip Code		]		
		Denver, CO 80203-4646	1			
		Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	3d	Not Employed			

SCHEDULE	A1
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The Instruction Guide explains how to comp	lete this form.       1 Total pages Schedule A1:         Sch: 33/105 Rpt: 36/145
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Cook, Molly C. (Ms.)	00086313
4 Date 5 Full name of contributor out-of-sta	ate PAC (ID#:) 7 Amount of Contribution (\$)
05/21/2024 Hanes, Jenna	\$10.00
6 Contributor address; City; State; Zip Cod	
Austin, TX 78723-4900	
8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Not Employed	Not Employed
Date Full name of contributor out-of-sta	ate PAC (ID#:) Amount of Contribution (\$)
06/21/2024 Hanes, Jenna	\$10.00
Contributor address; City; State; Zip Cod	
Austin, TX 78723-4900	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed
	ate PAC (ID#:) Amount of Contribution (\$)
06/02/2024 Hanlon, Kevin	\$1.05
Contributor address; City; State; Zip Cod	e
Vancouver, WA 98685	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed
	ate PAC (ID#:) Amount of Contribution (\$)
05/31/2024 Hardy, Kevin	\$1.00
Contributor address; City; State; Zip Cod	
San Rafael, CA 94901-1714	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Plumber	Swp
Date Full name of contributor out-of-sta	ate PAC (ID#:) Amount of Contribution (\$)
05/30/2024 Harman, Eva	\$7.50
Contributor address; City; State; Zip Cod	e
Kittery, ME 03904-1139	
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Not Employed	Not Employed

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 34/105 Rpt: 37/145	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/26/2024	Harmon, Jeff				\$25.00
		6 Contributor address; City; State; Zip Code		•		
	ļ					
		Houston, TX 77002-8897				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	÷)	Γ	Amount of Contribution (\$)	
	06/04/2024	Harper, Andrew				\$2.50
		Contributor address; City; State; Zip Code		1		
		Snohomish, WA 98296-5246				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher!!		Everett Public Schools			
Γ	Date	Full name of contributor Out-of-state PAC (ID#	ŧ:)	Γ	Amount of Contribution (\$)	
	06/25/2024	Harrington, Marilyn				\$25.00
	ļ	Contributor address; City; State; Zip Code		1		
		D				
	<u> </u>	Boerne, TX 78015-8300		Ĺ		
	Principal occu Not Employe	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷=0.00
	05/24/2024	Harris, Quin R				\$50.00
		Contributor address; City; State; Zip Code				
	ļ	Houston, TX 77008-4144				
$\vdash$	Dringing occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Ρπιτυραί στου			5)		
╞				<del>.</del>		
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:	.:)		Amount of Contribution (\$)	\$400.00
	0512912024	Hartsough, Amy		•		<b>Φ400.00</b>
	Contributor address; City; State; Zip Code					
	ľ					
	ľ	Hoffman Estates, IL 60169-2638				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
⊢		<u></u>				

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/105 Rpt: 38/145	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	-	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/20/2024	Harvey, Nick				\$10.00
	I	6 Contributor address; City; State; Zip Code				
		Tomales, CA 94971				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/08/2024	Harvey, Nick				\$25.00
	I	Contributor address; City; State; Zip Code				
		Tomales, CA 94971				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2024	Harvey, Nick				\$10.00
	I	Contributor address; City; State; Zip Code				
		Tomales, CA 94971				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	۶d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/21/2024	Hausenfluck, Amber L				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78704-1060				
$\vdash$	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	PIIICipai occu		Employer (See instructions	5)		
┝	<u> </u>			<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	ቀጋ ደብ
	05/30/2024	Heeb, William				\$2.50
		Contributor address; City; State; Zip Code				
		Cincinnati, OH 45215-1160				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not Employe		Not Employed	"		
<u> </u>						

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 36/105 Rpt: 39/145	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Cook, Molly	C. (Ms.)		00086313	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
05/25/2024	Hernandez, Amy		\$2	20.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77018-4108	1 <u></u>		
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Communicat		CHRISTUS Foundation		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/06/2024			\$10	.00.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78751-4721			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Lecturer		Ut-Austin	7	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
05/24/2024	Heston, Will	/		\$3.00
· · · · ·	Contributor address; City; State; Zip Code			+
	Hewitt, TX 76643-3989			
	upation / Job title (See Instructions)	Employer (See Instructions		
Office Mana	ger	McLennan County Dem	ocratic Party	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/19/2024	Hillegas, Bob		\$2	510.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77080-3815			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Not Employe		Not Employed	·)	
Date			Amount of Contribution (\$)	
06/19/2024	Full name of contributor out-of-state PAC (ID#: Hillegas, Bob	/	.,	10.00
00,10,202.	Contributor address; City; State; Zip Code			10.00
	Houston, TX 77080-3815			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Employe	ed (	Not Employed		

SCHEDULE	A1
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The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 37/105 Rpt: 40/145
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly			00086313
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/31/2024			\$1.00
	6 Contributor address; City; State; Zip Code		•
	Coral Gables, FL 33134-6163		
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employ	/ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/06/2024	· · · · · · · · · · · · · · · · · · ·		\$25.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77081-7409		
	upation / Job title (See Instructions)	Employer (See Instructions	3)
Teacher		Alief I.S.D.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/06/2024	Hoffman, Joseph		\$5.00
	Contributor address; City; State; Zip Code		1
	Los Angeles, CA 90041-2946	1	
	upation / Job title (See Instructions)	Employer (See Instructions	\$)
Not Employ		Not Employed	<del> </del>
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/31/2024			\$20.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77022-4709		
Drincinal occ	upation / Job title (See Instructions)	Employer (See Instructions	>\
Not Employ		Not Employed	>)
Date 05/31/2024	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$) \$4.00
03/31/2024			
	Contributor address; City; State; Zip Code		
	East Windsor, CT 06088-7902		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Retired		None	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/105 Rpt: 41/145	
2	2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/15/2024	Hopper, Clair				\$5.00
	00,10,202			-		40.0-
		6 Contributor address; City; State; Zip Code				
		Pittsburgh, PA 15224-2239				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
	Not Employe		Not Employed	,		
⊨				1	1	
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	<u>*0 500 00</u>
	05/22/2024	Hospitality Health ER Political Action Committee				\$2,500.00
		Contributor address; City; State; Zip Code				
		Bellaire, TX 77401	•			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Houston Fire Fighters Political Action Fund				\$5,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77009-8334				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	-	•				
⊢	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/08/2024	Howard, Heather	/			\$5.00
	00/00/202-					ψ0.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75248-3480				
L	Dringingl oog		Employer (See Instructions	<u> </u>		
	•	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Social Worke	er 	Lifepoint Health	_		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/15/2024	Howard, Scott				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77019-3704				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
⊢						

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/105 Rpt: 42/145	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Cook, Molly				00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
06/19/2024	Howze, William				\$20.00
	6 Contributor address; City; State; Zip Code		1		
	Houston, TX 77009-7130				
8 Principal occu	I upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
Not Employe		Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
05/27/2024	Hoyt, Cliff				\$100.00
	Contributor address; City; State; Zip Code		ł		-
	Martinsburg, WV 25403-1429				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Not employe	;d	Not employed			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
05/30/2024	Hriljac, Donna				\$4.50
	Contributor address; City; State; Zip Code		1		
	Bull Valley, IL 60098-8102				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions			
Not Employe		Not Employed	5)		
			Т	Amount of Contribution (ft)	
Date 05/25/2024	Full name of contributor out-of-state PAC (ID#: Huebel, Martha Ann	)		Amount of Contribution (\$)	\$50.00
00/20/2024					Φ <u></u> Ο0.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77035-2424				
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Consultant	•	Skillsoft Corp			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
06/19/2024	Huebel, Martha Ann			-	\$100.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77035-2424				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Consultant		Skillsoft Corp			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/105 Rpt: 43/145	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/27/2024	Humphreys, Carlos				\$25.00
		6 Contributor address; City; State; Zip Code		1		
_		El Paso, TX 79930-1718	1 <u>-</u> , <u>/o</u> hastaatiaa	Ĺ		
8	Principal occu Librarian	upation / Job title (See Instructions)	9 Employer (See Instructions		10	
╞			El Paso Community Col	liey		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷= 00
	05/24/2024	Hunn, William Roland				\$5.00
		Contributor address; City; State; Zip Code				
		Humble, TX 77346-2640				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Sales Manag		Material Handling And C		itrols	
╞	Date		)	Π	Amount of Contribution (\$)	
	06/24/2024	Hunn, William Roland	/		Allount of Contribution (+)	\$5.00
		Contributor address; City; State; Zip Code		1		• -
		Humble, TX 77346-2640				
	•	upation / Job title (See Instructions)	Employer (See Instructions			
	Sales Manag	ger	Material Handling And C	Con	itrols	
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/25/2024	Hunn, Wm				\$25.00
		Contributor address; City; State; Zip Code		]		
		Humble, TX 77346-2640				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	Ls)		
	Product Spe		Mhc-Cmi	-,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	06/18/2024	Hunn, Wm			, undern di Gonne (.)	\$10.00
		Contributor address; City; State; Zip Code		1		
		Humble, TX 77346-2640				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Product Spe	cialist	Mhc-Cmi			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/105 Rpt: 44/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	ŕ
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/06/2024	Huse, Kelsey				\$33.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78705-1184				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Software En	gineer	Realtor.Com			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/12/2024	Huse, Kelsey				\$100.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78705-1184				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Software En	gineer	Realtor.Com			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/26/2024	Ineson, Lisa				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006-2622				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Ingebretson, Emily				\$25.00
		Contributor address; City; State; Zip Code		1		
		San Diego, CA 92117-1923				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Nurse Practi	tioner	Hospital			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/18/2024	lyegbu, Ugo				\$9.87
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77089-7025				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Certified Me	dication Aide	Shiftkey Llc			
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/105 Rpt: 45/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/18/2024	Jackson Walker LLP PAC				\$750.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75201-2725				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/26/2024	Jacques, Maureen				\$10.00
		Contributor address; City; State; Zip Code				
		Virginia Beach, VA 23456-3546				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe	}d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/06/2024	Jacques, Maureen				\$10.00
		Contributor address; City; State; Zip Code				
		Virginia Beach, VA 23456-3546				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe	2d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/01/2024	Jarnot, Jeannie				\$10.00
		Contributor address; City; State; Zip Code				
		Novato, CA 94947-3751				
		pation / Job title (See Instructions)	Employer (See Instructions	)		
	Self Employe	ed	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/26/2024	Jaworski, Joseph				\$250.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77550-5134				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Attorney		Joseph S. Jaworski P.C.			
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/105 Rpt: 46/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/24/2024	Jett, Joan				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		White Plains, NY 10601-1828				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	musician		self			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/24/2024	Jeudy, Wil				\$200.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77008-2691				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Physician		Next Level Urgent Care	!		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/07/2024	Johnson, Claire				\$5.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77080-3819				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Nonprofit Ex	ecutive Director	Doyenne Initiative			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/28/2024	Johnson, lan				\$10.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77040-6840				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Engineer		Foxconn			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/18/2024	Jones, Isiah				\$7.50
		Contributor address; City; State; Zip Code		1		
		Hampton, VA 23666-6174				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Sailor		U.S. Navy			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 44/105 Rpt: 47/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/20/2024	Journeay, Pat				\$25.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Houston, TX 77056-4117		Ļ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe		Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	T	Amount of Contribution (\$)	
	06/05/2024	Jurestovsky, Rosann				\$5.00
		Contributor address; City; State; Zip Code		]		
$\vdash$	Deir singl oppu	Golden, CO 80403-0101		Ĺ		
	•	pation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
	Not Employe			-		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/05/2024	Kantor, Laurence				\$18.00
		Contributor address; City; State; Zip Code				
		Tarzana, CA 91356-1446				
$\vdash$	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> נו		
	Сра		Kac Partners	"		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	05/31/2024	Full name of contributor out-of-state PAC (ID#: Kaplan, Barbara	)			\$1.00
	00/01/2027					Ψ1.00
		Contributor address; City; State; Zip Code				
		New York, NY 10025-5206				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	05/20/2024	Kaplan, David	/		Allount of Contribution (*)	\$100.00
	00/20/202	Contributor address; City; State; Zip Code		-		Ψ100.02
		Contributor address, City, State, Zip Code				
		Houston, TX 77023-1306				
$\vdash$	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
$\vdash$						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/105 Rpt: 48/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/21/2024	Kaplan, Jay				\$100.00
	1	6 Contributor address; City; State; Zip Code		1		
	I					
	I					
		Houston, TX 77024-5404	-			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	real estate		self			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/19/2024	Kaz, Nancy				\$100.00
	I	Contributor address; City; State; Zip Code	······	1		
	I					
	I					
		Santa Fe, NM 87506-8502	-			
		ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	not employe	d	None			
	Date		)	Γ	Amount of Contribution (\$)	
	05/25/2024	Keller, Raymond				\$15.00
	I	Contributor address; City; State; Zip Code	,	1		
	I					
	I					
		Fort Worth, TX 76111-4334		L		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	20 	Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/28/2024	Kennedy, Leanne				\$25.00
	I	Contributor address; City; State; Zip Code	1	1		
	I					
	I					
		Tacoma, WA 98422-1848	1 _ · · /2 · · · ·	Ļ		
		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe		Not Employed	—		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/29/2024	Kennedy, Patricia				\$7.50
	I	Contributor address; City; State; Zip Code	ļ			
	I					
	I					
		Brookfield, VT 05036-9465	1	Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	20	Not Employed			

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 46/105 Rpt: 49/145 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cook, Molly C. (Ms.) 00086313 4 Date **5** Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/26/2024 Kickapoo Traditional Tribe of Texas \$10,000.00 6 Contributor address; City; State; Zip Code Eagle Pass, TX 78852 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/19/2024 \$17.50 King, Daniel Contributor address; City; State; Zip Code Houston, TX 77081-6630 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/28/2024 Kingsley, Grace \$25.00 Contributor address; City; State; Zip Code Houston, TX 77030-3100 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Registered Nurse** Houston Methodist Hospital Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/28/2024 \$25.00 Kingsley, Grace Contributor address; City; State; Zip Code Houston, TX 77030-3100 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Registered Nurse** Houston Methodist Hospital Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/30/2024 \$5.00 Kirkwood, Claudia Contributor address; City; State; Zip Code Macon, GA 31211-1954 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/105 Rpt: 50/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	-
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
ľ	05/29/2024	Klass, Katherine	/	[	, unoun of 2211112111 (1)	\$100.00
	00/20/202	6 Contributor address; City; State; Zip Code		ł		<b>#±00</b>
		Contributor address, City, State, Zip Code				
		New Franken, WI 54229-9422				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/15/2024	Klopp, Tonya	/			\$20.00
	00,10,202	Contributor address; City; State; Zip Code		ł		Ψ <b>L</b> 0.02
		Houston, TX 77007-5040				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L		
	Not Employe		Not Employed	.,		
⊢	Date			Π	Amount of Contribution (\$)	
	05/31/2024	Kohlmeyer, Katherine	)			\$100.00
	00/31/2027	-				Φ100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006-6029				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ار</u>		
	Not Employe		Not Employed	<i></i> ,,		
╞				<del>—</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷0.50
	06/01/2024	Kopacz, Janish				\$2.50
		Contributor address; City; State; Zip Code				
		Bayside, CA 95524-9023				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ē	Amount of Contribution (\$)	
	06/25/2024	Kornweibel, Samia				\$12.50
		Contributor address; City; State; Zip Code		1		
		Kirkland, WA 98033-5950				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Coach		Samia Kornweibel			
⊢						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	<sup>i</sup> orm.	1	Total pages Schedule A1: Sch: 48/105 Rpt: 51/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/13/2024	Kowalchuk, Alicia Ann				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77098-1000				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Physician		Bcm			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/22/2024	LGBTQ+ Victory Fund Federal PAC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Washington, DC 20005-6005				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/18/2024	Laday, Sharon				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77004-5459				
	-	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Marketing		Servicenow			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/15/2024	Lancaster, Ann-Marie				\$10.00
		Contributor address; City; State; Zip Code		1		
L		Sheboygan, WI 53081-2901	1	Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
L	It Consultant	[ 	Wtc Consulting Inc.	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	_
	05/29/2024	Lang, Beth		]		\$25.00
		Contributor address; City; State; Zip Code				
		Turner A7 05710 6656				
┡	Deir singl oppi	Tucson, AZ 85712-6656		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe		Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 49/105 Rpt: 52/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/25/2024	Lange, Michael				\$100.00
		6 Contributor address; City; State; Zip Code		1		
	ľ					
	ľ					
	·	Houston, TX 77096-1236				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Director		Ariel Equities			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/06/2024	Laperriere, Danielle				\$62.00
	ł	Contributor address; City; State; Zip Code				
	ļ					
	ļ					
		Houston, TX 77023-1179				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sustainability	y Operations	Texas A&M University			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/25/2024	Latham, Jacob				\$1.00
		Contributor address; City; State; Zip Code				
	ļ					
		Knoxville, TN 37919-8749				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Associate Pr	ofessor	Ut			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/07/2024	Lauderdale, Jarrett				\$33.00
	1	Contributor address; City; State; Zip Code				
	ļ					
		Houston, TX 77007-3358				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Construction		Mc2			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Lauderdale, Jarrett				\$200.00
	1	Contributor address; City; State; Zip Code		1		
	ł					
		Houston, TX 77007-3358				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Construction		Mc2			
I						

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 50/105 Rpt: 53/145 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cook, Molly C. (Ms.) 00086313 out-of-state PAC (ID#: 4 Date **5** Full name of contributor 7 Amount of Contribution (\$) 06/21/2024 Law Offices of A. Craig Eiland PC \$250.00 6 Contributor address; City; State; Zip Code Austin, TX 78701-1854 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2024 \$1,000.00 Law Offices of Kevin C. Stewart Contributor address; City; State; Zip Code Austin, TX 78759-3066 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 05/31/2024 Laycock, David \$1.00 Contributor address; City; State; Zip Code Chester, NJ 07930-2637 Principal occupation / Job title (See Instructions) Employer (See Instructions) Driver Ups Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/27/2024 \$25.00 Leach, Stewart Contributor address; City; State; Zip Code Lafayette, CO 80026-8045 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/01/2024 \$5.00 Lefforge, Nan Contributor address; City; State; Zip Code Houston, TX 77079-7331 Principal occupation / Job title (See Instructions) Employer (See Instructions) Psychotherapist Self

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 51/105 Rpt: 54/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/12/2024	Lefforge, Nan				\$5.00
		6 Contributor address; City; State; Zip Code		$\mathbf{I}$		
		Houston, TX 77079-7331				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Psychothera	ipist	Self			
	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Lemley, Audrey	/			\$2.50
				ł		
		White Salmon, WA 98672-0685				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Project Mana	ager	Saturno			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/04/2024	Lemmond, Byron				\$5.00
	I	Contributor address; City; State; Zip Code		$\mathbf{I}$		
		Katy, TX 77449-7504				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
	05/31/2024	Leonard, Shae				\$1.00
	I	Contributor address; City; State; Zip Code		1		
		Malone, NY 12953-1515				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe	3d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
	06/21/2024	Leroy Cook, Nathan				\$500.00
	I	Contributor address; City; State; Zip Code		]		
L		Magnolia, TX 77354-2663	1			
		Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
L		Government Relations	Rice University			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 52/105 Rpt: 55/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/29/2024	Levy, Latasha				\$12.50
		6 Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Seattle, WA 98126-2598				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Educator		University Of Washingto	n		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/26/2024	Light, Felicia				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77091-2845				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/29/2024	Lighthall, Wayne				\$2.50
		Contributor address; City; State; Zip Code				
		Hazelhurst, WI 54531-9702				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Truck Driver		EC			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/29/2024	Lindewall, Dianne				\$100.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78731-2685				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Lobur, Connie				\$50.00
		Contributor address; City; State; Zip Code				
		Peekskill, NY 10566-4629				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 53/105 Rpt: 56/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	ŕ
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/04/2024	Locke, Debra				\$2.00
		6 Contributor address; City; State; Zip Code				
		Brentwood, TN 37027-5728				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/26/2024	Locke Lord Llp, Robert Miller				\$500.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75201-2708				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Locke Lord Llp			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/20/2024	Loewy, Sara				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77096-2106	·			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Administrato	1	Houston Methodist	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/15/2024	Lomax, Nancy Robinson				\$20.00
		Contributor address; City; State; Zip Code				
	Duin since acou	Houston, TX 77025-3535	Englisher (Cas Instructions	Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/29/2024	Lomax, Nancy Robinson				\$100.00
		Contributor address; City; State; Zip Code				
		Lewston TV 7702E 252E				
	Deineineleeen	Houston, TX 77025-3535	Frankriger (Oser hastmatism			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	<u>.</u>	Not Employed			

SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1 Sch: 54/105 Rpt: 57/1	
2 FILER NAME			3 Filer ID (Ethics Commi	ssion Filers)
Cook, Molly	C. (Ms.)		00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (	\$)
05/29/2024	Looper, Amy			\$5.00
	6 Contributor address; City; State; Zip Code			
	Liberty Hill, TX 78642-2482			
-	upation / Job title (See Instructions)	9 Employer (See Instructions	)	
Coo		Oneseventeen Media		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (	
05/28/2024	Lopez, David			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77080-5319			
	upation / Job title (See Instructions)	Employer (See Instructions	)	
Consultant		Lee		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (	
05/19/2024	Lousteau, Beth			\$200.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77009-5619			
Drincinal occu		Employer (See Instructions	\ \	
self-employe	upation / Job title (See Instructions) ed	Employer (See Instructions Beth Lousteau	)	
				· <b>*</b> \
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (	
05/26/2024	Lucas, Mauri			\$25.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77007-3403			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)	
Not Employe	,	Not Employed	'	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (	¢)
05/26/2024	Lucas, Steven	/	Amount of Continuation (	\$10.00
	Contributor address; City; State; Zip Code			+=+
	Albany, CA 94706-2530			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)	
Chef		Bon Appetit		

SCHEDULE	A1
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The Instruction Guide explains how to complete this form.1 Total pages Schedule A1: Sch: 55/105 Rpt: 58/1452 FILER NAME3 Filer ID (Ethics Commission I)	
2 FILER NAME 3 Filer ID (Ethics Commission)	
	ilers)
Cook, Molly C. (Ms.) 00086313	
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)	
06/18/2024 Luke, Ana	\$7.50
6 Contributor address; City; State; Zip Code	
Humble, TX 77346-1621	
8 Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)	
Controller Jerold B. Katz Interests Company	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
05/28/2024 Lynch, Kathleen	\$10.00
Contributor address; City; State; Zip Code	
New York, NY 10023-2097	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
	\$200.00
Contributor address; City; State; Zip Code	
Houston, TX 77030-1206	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Musician Self Employed	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	
06/18/2024 Malloy, Elaine	\$10.00
Contributor address; City; State; Zip Code	
Houston, TX 77024-3232	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date       Full name of contributor       Out-of-state PAC (ID#:)       Amount of Contribution (\$)	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/30/2024       Malo, Christopher       Amount of Contribution (\$)	\$5.00
05/30/2024 Malo, Christopher	\$5.00
05/30/2024 Malo, Christopher	\$5.00
05/30/2024 Malo, Christopher Contributor address; City; State; Zip Code	\$5.00
05/30/2024 Malo, Christopher Contributor address; City; State; Zip Code Larkspur, CA 94939-1420	\$5.00
05/30/2024       Malo, Christopher         Contributor address; City; State; Zip Code         Larkspur, CA 94939-1420         Principal occupation / Job title (See Instructions)         Employer (See Instructions)	\$5.00
05/30/2024 Malo, Christopher Contributor address; City; State; Zip Code Larkspur, CA 94939-1420	\$5.00

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 56/105 Rpt: 59/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/31/2024	Malo, Christopher			· · · · · · · · · · · · · · · · · · ·	\$1.00
				ł		·
		Larkspur, CA 94939-1420				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/22/2024	Marie, Nicole				\$100.00
		Contributor address; City; State; Zip Code		1		
		Newington, CT 06111-3203				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager Va	ascular Surgery	Hartford Healthcare			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/29/2024 Marie, Nicole					\$100.00
	Contributor address; City; State; Zip Code		1			
		Newington, CT 06111-3203				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Manager Va	ascular Surgery	Hartford Healthcare			
_	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Marsh, Sandra				\$12.50
		Contributor address; City; State; Zip Code		1		
	<u></u>	Pacific Palisades, CA 90272-4167	1	Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/19/2024	Martin, Cynthia				\$17.50
		Contributor address; City; State; Zip Code				
	D 1 start and	Houston, TX 77092-5229		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Education		Pearson			

SCHEDULE	A1
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6       Contributor address; City; State; Zip Code         Houston, TX 77009-7213       Houston, TX 77009-7213         8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:) Martinez, Cathryn       Amount of Contribution (\$)         \$1       \$1       \$1	ers) 12.50
2       FILER NAME Cook, Molly C. (Ms.)       3       Filer ID (Ethics Commission File 00086313         4       Date 05/29/2024       5       Full name of contributor out-of-state PAC (ID#:) Martin, Patric       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       6       Contributor address; City; State; Zip Code       7         8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed       9         Date       Full name of contributor out-of-state PAC (ID#:) Martinez, Cathryn       Amount of Contribution (\$)       \$:	-
Cook, Molly C. (Ms.)       00086313         4       Date       5       Full name of contributor out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         05/29/2024       Martin, Patric       6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)         6       Contributor address; City; State; Zip Code       Houston, TX 77009-7213       9       Employer (See Instructions) Not Employed       9         8       Principal occurributor / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$         05/25/2024       Martinez, Cathryn       Out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$	-
4       Date       5       Full name of contributor       out-of-state PAC (ID#:)       7       Amount of Contribution (\$)         05/29/2024       Martin, Patric       6       Contributor address; City; State; Zip Code       7       Amount of Contribution (\$)       9         8       Principal occuration / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed       9       Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$         05/25/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$	12.50
05/29/2024       Martin, Patric       S         6       Contributor address; City; State; Zip Code       Houston, TX 77009-7213         8       Principal occupation / Job title (See Instructions) Not Employed       9         Employer (See Instructions) Not Employed       9         Employed       Full name of contributor out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$1         05/25/2024       Martinez, Cathryn	
6       Contributor address; City; State; Zip Code         Houston, TX 77009-7213       Houston, TX 77009-7213         8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Martinez, Cathryn       \$:	
B     Principal occupation / Job title (See Instructions) Not Employed     9     Employer (See Instructions) Not Employed       Date     Full name of contributor out-of-state PAC (ID#:) 05/25/2024     Amount of Contribution (\$) Martinez, Cathryn	
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Martinez, Cathryn       \$1	
8       Principal occupation / Job title (See Instructions) Not Employed       9       Employer (See Instructions) Not Employed         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         05/25/2024       Martinez, Cathryn       \$1	
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       05/25/2024     Martinez, Cathryn     \$1	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       05/25/2024     Martinez, Cathryn     \$:	
05/25/2024 Martinez, Cathryn \$	
05/25/2024 Martinez, Cathryn \$	
	00.00
Contributor address; City; State; Zip Code	
Houston, TX 77009-8324	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Community Engagement Calpine	
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
05/30/2024 Mathrani, Janet	\$5.00
Contributor address; City; State; Zip Code	
Vero Beach, FL 32966-6522	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)	
05/28/2024 Matthews, Cecilia	50.00
Contributor address; City; State; Zip Code	
Exeter, CA 93221-1058	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)	
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/19/2024     Matujec, James     State	15.00
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution (\$)       06/19/2024     Matujec, James     state	15.00
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)       06/19/2024     Matujec, James     Amount of Contribution (\$)	15.00
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)       06/19/2024     Matujec, James     Amount of Contribution (\$)       Contributor address; City; State; Zip Code     State; Zip Code	15.00
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)       06/19/2024     Matujec, James     Amount of Contribution (\$)       Contributor address; City; State; Zip Code     Houston, TX 77092-5118	15.00
Not Employed       Not Employed         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/19/2024       Matujec, James       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Houston, TX 77092-5118       Houston / Job title (See Instructions)       Employer (See Instructions)	15.00
Not Employed     Not Employed       Date     Full name of contributor     out-of-state PAC (ID#:)       06/19/2024     Matujec, James     Amount of Contribution (\$)       Contributor address; City; State; Zip Code     Houston, TX 77092-5118	15.00

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 58/105 Rpt: 61/145	
2 FILER NAME			3 Filer ID (Ethics Commission File	rs)
Cook, Molly C	C. (Ms.)		00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/31/2024	Mauldin, Karen			\$1.00
ľ	6 Contributor address; City; State; Zip Code			
	1			
	Falls Church, VA 22044-3203			
8 Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Not Employe	d	Not Employed		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/12/2024	May, George C			\$6.00
ŀ	Contributor address; City; State; Zip Code			
	Colorado Springs, CO 80918-4107			
	pation / Job title (See Instructions)	Employer (See Instructions		
Electrical Eng	jineer	Boeing Space Exploration	ion	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/25/2024	Mboup, Khady		\$4	40.00
Contributor address; City; State; Zip Code				
	Listen TV 77000 00E0			
Driveinel ecour	Houston, TX 77082-2850		<u> </u>	
Field director	pation / Job title (See Instructions)	Employer (See Instructions Clubs in action pac	S)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/20/2024	McGuffee, Elizabeth		⇒∠:	50.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77253-3021			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	
Not Employee	d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/17/2024	McGuire Woods Federal PAC Fund		\$50	00.00
ľ	Contributor address; City; State; Zip Code			
	Richmond, VA 23219-3956			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	s)	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 59/105 Rpt: 62/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/20/2024	McNiel, Kathryn C.				\$250.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ		Houston, TX 77006-6110	1	Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Consultant		Self	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/05/2024	Mccauley, Kevin		]		\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77092-7902				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> い		
	Photographe		Self	"		
⊢	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	06/26/2024	Mccreery, Jan	)			\$10.00
	00/20/2021					Ψ10.00
		Contributor audress, City, State, Lip Code				
		Tujunga, CA 91042-1275				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Mcdargh Elvins, Eileen				\$12.50
	1	Contributor address; City; State; Zip Code		1		
		Dana Daint CA 02620 4400				
$\vdash$	Dringing occu	Dana Point, CA 92629-4488 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Consultant	pation / Job lille (See instructions)	Employer (See Instructions Self-Employed	5)		
╞				г		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#: Mcdermott, Jerrine	)		Amount of Contribution (\$)	\$12.50
	03/30/2024					Φ12.30
		Contributor address; City; State; Zip Code				
		Wayne, PA 19087-5126				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Not Employe		Not Employed	-		
$\vdash$			<u>I</u>			

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 60/105 Rpt: 63/145	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
Cook, Molly (	C. (Ms.)		00086313	-,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
06/25/2024	Mcsherry, Noelle		\$10	00.00
	6 Contributor address; City; State; Zip Code			
Dringing oggu	Houston, TX 77007-3716	2 Employer (Cap Instructions)		
Technical Tra		9 Employer (See Instructions) Rocrich		
		T	tt -f Ωt-ibution (Φ)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/26/2024	Medellin, Anastacio		ΦΖ	25.00
	Contributor address; City; State; Zip Code			
	I			
	Houston, TX 77063-4451			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Writer		Self Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/30/2024	Meecham, Amanda			52.50
	Contributor address; City; State; Zip Code			
Dringingloggy	Novato, CA 94949-6150			
	pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employed Not Employed			
Date			American the Constraint of the stinue (the state of the s	
05/20/2024	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	2 50
05/29/2024	Meisenheimer, Lester	)		62.50
05/29/2024		)		2.50
05/29/2024	Meisenheimer, Lester	)		2.50
05/29/2024	Meisenheimer, Lester	)		\$2.50
	Meisenheimer, Lester Contributor address; City; State; Zip Code	)  Employer (See Instructions)	\$	52.50
	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions)	Employer (See Instructions) Not Employed	\$	\$2.50
Principal occu	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions)		\$	52.50
Principal occur Not Employe	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions)		\$. Amount of Contribution (\$)	52.50
Principal occu Not Employe Date	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_		\$. Amount of Contribution (\$)	
Principal occu Not Employe Date	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#:_ Meissner, Robert		\$. Amount of Contribution (\$)	
Principal occu Not Employe Date	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Meissner, Robert Contributor address; City; State; Zip Code		\$. Amount of Contribution (\$)	
Principal occur Not Employe Date 05/20/2024	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Meissner, Robert Contributor address; City; State; Zip Code Pottstown, PA 19465-8142	Not Employed	\$ Amount of Contribution (\$) \$	
Principal occur Not Employe Date 05/20/2024	Meisenheimer, Lester Contributor address; City; State; Zip Code Issaquah, WA 98027-4536 pation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: Meissner, Robert Contributor address; City; State; Zip Code Pottstown, PA 19465-8142 pation / Job title (See Instructions)		\$ Amount of Contribution (\$) \$	

SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	örm.	1	Total pages Schedule A1: Sch: 61/105 Rpt: 64/145	
2 FILER NAME			12	Filer ID (Ethics Commissio	n Eilers)
Cook, Molly			ľ	00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/30/2024	Melanson, Christianne				\$10.00
	6 Contributor address; City; State; Zip Code		1		
	Bellaire, TX 77401-2503				
-	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Accountant		Retired			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
05/28/2024	Melugin, Joseph				\$50.00
	Contributor address; City; State; Zip Code		1		
D in single and	Houston, TX 77009-7323		Ĺ		
Principal occu Trial Lawyer	upation / Job title (See Instructions) r	Employer (See Instructions Melugin Law Firm Pllc	S)		
			<del>.</del>		
Date		)		Amount of Contribution (\$)	÷=
06/30/2024	Melza, Barr				\$2,000.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77024				
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employ	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/29/2024	Mett, Richard				\$7.50
	Contributor address; City; State; Zip Code		1		
<b>-</b> 1 - 1 - 1	Cedarburg, WI 53012-8819	1 <u>/0 hastaation</u>	Ĺ		
	upation / Job title (See Instructions)	Employer (See Instructions			
Professor		Medical College Of Wise	COI		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
06/01/2024	Meyer, Naomi				\$1.00
	Contributor address; City; State; Zip Code				
	Waltham, MA 02453-5128				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Lawyer		Greater Boston Legal S		ices	
-					

SCHEDULE	A1
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	The Instru	iction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 62/105 Rpt: 65/145		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/24/2024		,			\$25.00
	00/2	6 Contributor address; City; State; Zip Code	!	$\mathbf{I}$		+=0.00
		6 Contributor address, City, State, Zip Code				
		La Crescenta, CA 91214-1311				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Not Employe		Not Employed	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	06/12/2024	Miller, Keith	/		Amount of Contribution (4)	\$33.00
	0011212024			-		Ψ00.00
		Contributor address; City; State; Zip Code				
		La Crescenta, CA 91214-1311				
_	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	<i>''</i>		
				—	1	
	Date Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	<b>*</b> 250.00	
	06/25/2024	Mincberg, David				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77046-0107				
┝	Drincinal occi	upation / Job title (See Instructions)	Employer (See Instructions	$\overline{\Gamma}$		
	Finance Inve		Flagship Capital Partner			
				.s ==		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Minchak, Martha				\$50.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Proctor, MN 55810-2126		L		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	3d	Not Employed			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Mintz, Evan				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77004-4240				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Communica	tions Director	Arnold Ventures			
$\vdash$			<u>.</u>			

SCHEDULE	A1
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The Instru	iction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 63/105 Rpt: 66/145	
2 FILER NAME			2	Filer ID (Ethics Commissio	n Filers)
Cook, Molly			ľ	00086313	JITT IICTS)
_			<u> </u>		
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	<b> </b> ′	Amount of Contribution (\$)	ቀጋ ደብ
06/25/2024					\$2.50
	6 Contributor address; City; State; Zip Code				
	Highland Park, NJ 08904-2711				
8 Principal occ	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u>		
Sales	upation 7 Job title (See instructions)	National Indl Supply	5)		
Sales					
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/31/2024	Mizia, Rosemarie				\$5.00
	Contributor address; City; State; Zip Code		]		
	Phoenixville, PA 19460-1074				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Employ	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/18/2024	Moak Casey PAC				\$1,000.00
			·		
	Austin, TX 78701-5002				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)	
05/29/2024	Montague, Alice	)		/ income of Contains allow (+)	\$2.50
	Contributor address; City; State; Zip Code		·		+=.00
	Contributor address, City, State, Zip Code				
	Washington, DC 20011-2809				
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Self		Sally Montague	5)		
			_		
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#10.00</b>
06/20/2024					\$10.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77070-5212	<b>.</b>			
	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Attorney		Transperfect			

#### SCHEDULE A1

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 64/105 Rpt: 67/145	
	FILER NAME				· · · · ·	n Filoro)
Ĺ	Cook, Molly	C. (Ms.)		3	Filer ID (Ethics Commission 00086313	on Fliers)
4	Date	5 Full name of contributor out-of-state PAC (ID#	4.	7	Amount of Contribution (\$)	
ľ	06/20/2024	Moritz, Michael	r)	ľ		\$5,000.00
	00/20/2024					ψ5,000.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77011-1517				
8	Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Engineer		ConnectGen			
⊨	Date	Full name of contributor out-of-state PAC (ID#	t: )	Г	Amount of Contribution (\$)	
	05/29/2024	Morris, Carl	f)			\$12.50
	03/29/2024					Ψ12.30
		Contributor address; City; State; Zip Code				
		Mckinney, TX 75072-3616				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Owner		Carl Morris	5)		
╞				_		
	Date	Full name of contributor Out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	*****
	06/21/2024	Morris, Robert				\$250.00
		Contributor address; City; State; Zip Code				
		Southlake, TX 76092-7000				
_	Dringingloggy	pation / Job title (See Instructions)	Employer (See Instructions			
	Healthcare A		Complete Care	5)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#	t:)		Amount of Contribution (\$)	*****
	05/25/2024	Morris, Talya				\$250.00
		Contributor address; City; State; Zip Code				
	Deineineleen	Houston, TX 77005-3038	Enveloper (Operational)			
		pation / Job title (See Instructions)	Employer (See Instructions			
	Policy Adviso		Harris County Precinct	4		
	Date	Full name of contributor out-of-state PAC (ID#	ŧ:)		Amount of Contribution (\$)	
	06/29/2024	Murdock, Doris L				\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008-3831				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 65/105 Rpt: 68/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/19/2024	Murray, Bridgette				\$50.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77029-3411				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/23/2024	Myers, Tracey	/		· · · · · · · · · · · · · · · · · · ·	\$100.00
	• • • • • • •	Contributor address; City; State; Zip Code		-		**
		Irving, TX 75039-3066				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Project Mana		Tracey Myers			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	·)		Amount of Contribution (\$)	
	06/20/2024	NRG Energy Inc Political Action Committee				\$2,000.00
	-					
		Princeton, NJ 08540-6023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/26/2024	Nakamoto, Doreen				\$12.50
		Contributor address; City; State; Zip Code		1		
		Menifee, CA 92586-3746				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	≥d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/06/2024	Narcisse, Jude				\$33.00
		Contributor address; City; State; Zip Code		1		
		Pearland, TX 77584-2529				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	3d	Not Employed			
			•			
L						

#### SCHEDULE A1

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 66/105 Rpt: 69/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/19/2024	Nasser, Faiz (Dr.)				\$3,350.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Houston, TX 77025				
8	•		9 Employer (See Instructions			
	Anesthesiolo		Houston Methodist Hosp	pita		
	Date		)		Amount of Contribution (\$)	
	05/25/2024	Natarajan, Rufi H		]		\$60.00
		Contributor address; City; State; Zip Code				
		Usuatan TV 77007 0040				
$\vdash$	Drinsipal acqu	Houston, TX 77007-8243	Employer (Cool potructions	<u> </u>		
	Events Direc	ipation / Job title (See Instructions)	Employer (See Instructions Harris County Precinct 4			
╞				+		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 25 00
	05/27/2024					\$25.00
		Contributor address; City; State; Zip Code				
		Felton, CA 95018-8932				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Facs manag		UC	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/30/2024	Nelsen, Lisa	/			\$25.00
	•••••	Contributor address; City; State; Zip Code		ł		**
		Houston, TX 77007-5325				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Lawyer		Texas Southern Univers	sity		
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/15/2024	Nelsen, Lisa				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77007-5325				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	Lawyer		Texas Southern Univers	sity		

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 67/105 Rpt: 70/145	
2	FILER NAME	FILER NAME		3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/30/2024	Nelsen, Lisa	/			\$25.00
		6 Contributor address; City; State; Zip Code		ł		
		Houston, TX 77007-5325				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Lawyer		Texas Southern Univers	sity		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	05/31/2024	Nelson, Bruce	/		(1)	\$25.00
		Contributor address; City; State; Zip Code		ł		
		Palmetto, FL 34221-1258				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/31/2024	Nelson, Katherine				\$10.00
	Contributor address; City; State; Zip Code		1			
		Rock Hill, SC 29732-8262				
	Principal occupation / Job title (See Instructions) Employer (See Instructions)		5)			
Not Employed Not Employed						
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/26/2024	Nesom, Patricia Gayle				\$100.00
		Contributor address; City; State; Zip Code		1		
	Houston, TX 77074					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/28/2024	Newman, Penny				\$10.00
	Contributor address; City; State; Zip Code			]		
	LaPorte, TX 77571			Ĺ		
I		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe	Q	Not Employed			

SCHEDULE	A1
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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 68/105 Rpt: 71/145		
2 FILER N	AME	<b>3</b> Filer ID (Ethics Commission Filers)			
Cook, M	olly C. (Ms.)		00086313		
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)		
05/25/20	Newsham, Lawrence		\$2.		
	6 Contributor address; City; State; Zip Code		1		
	Millis, MA 02054-1429				
-	occupation / Job title (See Instructions)	9 Employer (See Instructions	3)		
Not Emp		Not Employed			
Date		C (ID#:)	Amount of Contribution (\$)		
05/29/20			\$1.		
	Contributor address; City; State; Zip Code				
	De Peyster, NY 13633-3405				
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	s)		
Not Emp		Not Employed	"		
Date	Full name of contributor Out-of-state PAC		Amount of Contribution (\$)		
06/30/20		, (ID#)	\$25.		
00,00,1	Contributor address; City; State; Zip Code				
	Contributor address; City; State; Zip Code				
	Magnolia, TX 77355-1907				
	occupation / Job title (See Instructions)	Employer (See Instructions	3)		
Surety E	ond Associate	Swiftbonds Llc			
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Contribution (\$)		
06/03/20	Obrien, Thomas		\$25.		
	Contributor address; City; State; Zip Code		1		
	Auctin TV 70727-1720				
Austin, TX 78737-1720       Principal occupation / Job title (See Instructions)       Employer (See Instructions)		Employer (See Instructions	<u></u>		
Not Emp		Not Employed	»)		
Date			Amount of Contribution (\$)		
05/29/20		; (ID#:)	S5.		
00/20/20	Contributor address; City; State; Zip Code				
	Contributor address, City, State, Zip Code				
	Lavon, TX 75166-1735				
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Emp	loyed	Not Employed			

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 69/105 Rpt: 72/145	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly C. (Ms.)			1	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/22/2024	Osborne Valdez, Katherine				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77008-6833	-			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Nonprofit		Powell Foundation			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/05/2024	Overton, David				\$250.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78723-5445				
		ipation / Job title (See Instructions)	Employer (See Instructions		· .	
	Partner		Opus Faveo Innovation	Dev	/elopment	
	Date		)	Γ	Amount of Contribution (\$)	
	05/25/2024	Pagni, Jean				\$10.00
		Contributor address; City; State; Zip Code		1		
	Duincipal acou	Reno, NV 89503-2850		Ĺ		
	Not Employe	upation / Job title (See Instructions)	Employer (See Instructions Not Employed	S)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷10.00
	06/27/2024	Pagni, Jean				\$10.00
		Contributor address; City; State; Zip Code				
		Reno, NV 89503-2850				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	Not Employe		Not Employed	5)		
╞				1	Amount of Contribution (\$)	
	Date 05/28/2024	Full name of contributor out-of-state PAC (ID#: Patlan, Stephen	)		Amount of Contribution (\$)	\$60.00
	0312012024			•		Φ00.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77027-6512				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Engineer		Sgt Inc.	- /		
⊢			Ŭ			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 70/105 Rpt: 73/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly				00086313	•
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/03/2024	Patterson, William				\$100.00
		6 Contributor address; City; State; Zip Code				
Ļ		Houston, TX 77044-1494	<b>1</b>			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/24/2024	Pearson, Pamela				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78702-1805				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> יו		
	Not Employe		Not Employed	"		
	Date			<u> </u>	Amount of Contribution (\$)	
	05/27/2024	Full name of contributor out-of-state PAC (ID#: Peck, Ann	)		Amount of Contribution (\$)	\$100.00
	001211202					Ψ100.00
		CUltimbutor address, City, State, Lip Code				
		Houston, TX 77025-2423				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/06/2024	Peeler, John				\$150.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77061-1106				
$\vdash$	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> •)		
	Attorney		Coveler & Peeler Pc	"		
⊨		Full name of contributor Out-of-state PAC (ID#:		1	Amount of Contribution (\$)	
	Date 05/20/2024	Full name of contributor out-of-state PAC (ID#: Pellett, Clark	)		Amount of Contribution (\$)	\$250.00
	0012012024	Contributor address; City; State; Zip Code				Φ200.00
		Continuation address, City, State, Zip Code				
		Chicago, IL 60611-4546				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self			
$\vdash$						

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 71/105 Rpt: 74/145	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	)
Cook, Molly	C. (Ms.)		00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
06/07/2024			\$33	3.00
	6 Contributor address; City; State; Zip Code			
Dringinglocg	Austin, TX 78741-7640	Content (See Instructions)		
B Principal occu Government	upation / Job title (See Instructions) It Relations	9 Employer (See Instructions) Texas Aft	)	
		<u> </u>	the state of the s	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	ן 100 נ
05/24/2024			ΦΖυ	0.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78745-1018			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Art Assistan		Picrow Streaming - Panio		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/24/2024		,		0.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78745-1018			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)		
Art Assistan	.t	Picrow Streaming - Panio	c	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/19/2024	Pfeiffer-Traum, Deborah		\$15	5.00
	Contributor address; City; State; Zip Code			
	University 77010 4010			
Dringing and	Houston, TX 77018-4312			
Not Employe	upation / Job title (See Instructions)	Employer (See Instructions) Not Employed		
		<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	- 00
06/10/2024			φζΟ	5.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77023-1348			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Developer		Grid United Llc	'	

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 72/105 Rpt: 75/145	
2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/04/2024	Popham, Jay				\$10.00
		6 Contributor address; City; State; Zip Code				
	D de sizal sasu	Austin, TX 78744-4510				
	Principal occu Editor	ipation / Job title (See Instructions)	9 Employer (See Instructions Choice Magazine Lister		N	
		<b></b>		1111ų 1		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>*</b> 22.00
	06/07/2024	Powell, Paige				\$33.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77019-2600				
_	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<b></b> s)		
	Policy Mana		Commission Shift			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
	05/29/2024	Power, Leigh				\$5.00
		Contributor address; City; State; Zip Code				
		Seattle, WA 98133-8001				
-	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ج)		
	Not Employe		Not Employed	-)		
	Date	Full name of contributor Out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	05/25/2024	Powers, Rachel	/			\$100.00
		Contributor address; City; State; Zip Code		·		
		Houston, TX 77007-1718				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Pureka, Michael				\$20.00
	Contributor address; City; State; Zip Code			1		
		Cambridge, MA 02139-1810				
	Bringinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Software En		Nanthealth Inc.	5)		

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 73/105 Rpt: 76/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly			-	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/20/2024	Purser, Thomas Ray				\$250.00
		6 Contributor address; City; State; Zip Code				
		New Braunfels, TX 78132-3439				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Consultant		Self Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/24/2024	Qaddumi, Anan				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008-2501				
		upation / Job title (See Instructions)	Employer (See Instructions	)		
	Developer		Lamar Builders			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/06/2024	Qaddumi, Anan				\$62.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008-2501				
_	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Developer		Lamar Builders	9		
╞	Date	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	Dale 06/26/2024	Full name of contributor out-of-state PAC (ID#: Qaddumi, Anan	)			\$250.00
	0012012027	-				Ψ200.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008-2501				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Developer		Lamar Builders			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/31/2024	Quasnitschka, Ben				\$100.00
		Contributor address; City; State; Zip Code				
		Fort Worth, TX 76104-3495				
		upation / Job title (See Instructions)	Employer (See Instructions	)		
	Rn		Not Saying			

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 74/105 Rpt: 77/145	
2	2 FILER NAME			3 Filer ID (Ethics Commission	Filers)
	Cook, Molly			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
	05/25/2024	Quist, Kevin			\$50.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77006-1443			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
	Real Estate	Development	New Hope Housing		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	05/25/2024	Raley, John			\$100.00
		Contributor address; City; State; Zip Code			
		Hauston TV 77024 6726			
	Dringing occu	Houston, TX 77024-6725	Employer (See Instructions		
	Attorney	ipation / Job title (See Instructions)	John Raley & Associates		
╞					
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	ቀርሳ በበ
	05/28/2024	Rayner, Rob			\$50.00
		Contributor address; City; State; Zip Code			
		Pflugerville, TX 78660-2571			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
	Not Employe	¢d	Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
	06/28/2024	Rayner, Rob			\$50.00
		Contributor address; City; State; Zip Code			
		Pflugerville, TX 78660-2571			
	•	ipation / Job title (See Instructions)	Employer (See Instructions	)	
	Not Employe		Not Employed		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	+
	06/06/2024	Reasoner, Harry M			\$100.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77019-3316			
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	() ()	
	Not Employe		Not Employed	)	
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SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 75/105 Rpt: 78/145
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly	C. (Ms.)		00086313
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
05/31/2024	Reasons, Jo		\$1.00
	6 Contributor address; City; State; Zip Code		4
	Port Orchard, WA 98367-4544		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	• )	Amount of Contribution (\$)
06/21/2024	Redeker, Janet		\$25.00
	Contributor address; City; State; Zip Code		4
	Houston, TX 77025-1503		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/20/2024	Reisch, Kelsey		\$100.00
			4
	Dallas, TX 75215-1823		
	upation / Job title (See Instructions)	Employer (See Instructions	
Nurse Practi	itioner	Southwest Family Medic	cine
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
06/18/2024	Renteria, Anita F.		\$75.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77055-6728		
	upation / Job title (See Instructions)	Employer (See Instructions	s)
Chief Growth	h Officer	Barrios Technology	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/26/2024	Resendez, Joel		\$100.00
	Contributor address; City; State; Zip Code		1
	Austin, TX 78741-3097		
	upation / Job title (See Instructions)	Employer (See Instructions	5)
Government	t Relations Director	Rice University	

SCHEDULE	A1
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1	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 76/105 Rpt: 79/145	
<b>2</b> F	ILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly				00086313	
<b>4</b> C	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
C	)5/25/2024	Reyes, Conchita				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77003-1073				
		Ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
F	Fractional C		CR Financials Group			
C	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
C	05/19/2024	Reyes, Elishoel				\$100.00
		Contributor address; City; State; Zip Code		1		
		Eagle Pass, TX 78852-3656	1			
		upation / Job title (See Instructions)	Employer (See Instructions			
ŀ	Registered N	Jurse	STAT Specialty Hospita			
	Date		)	T	Amount of Contribution (\$)	
C	)5/21/2024	Reyes, Rebecca				\$1,000.00
		Contributor address; City; State; Zip Code		]		
		Houston, TX 77024-2610				
		ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
				1		
		Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	ቀንፍ ሰባ
ι	06/07/2024	Reynolds, Ladd				\$25.00
		Contributor address; City; State; Zip Code	ſ			
			ſ			
		Houston, TX 77062-4731				
F	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	nvestor		Self	,		
	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	Γ	Amount of Contribution (\$)	
	06/25/2024	Reynolds, Ladd			• -	\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77062-4731				
F	rincipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
l	nvestor		Self			

SCHEDULE	A1
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1	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 77/105 Rpt: 80/145	
<b>2</b> F	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly (	C. (Ms.)			00086313	
4 [	-	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/25/2024	Rhodes, George	/		,	\$100.00
		6 Contributor address; City; State; Zip Code				<b>*-·</b> ···
		Continuation address, City, State, Zip Code				
		Houston, TX 77006-6035				
<b>8</b> F	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
٢	Not Employe	ed (	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	06/18/2024	Richards, Susan			• •	\$10.00
		Contributor address; City; State; Zip Code				
	1					
	1					
		Houston, TX 77009-5014				
F	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Speech Path		Memorial Hermann			
╞╴	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	05/24/2024	Richardson, Scott	/		Allount of Contribution (*)	\$25.00
	1012712021					Ψ20.00
		Contributor address; City; State; Zip Code				
		Spring, TX 77386-2990				
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
			- r - y - x	,		
╞─╴	Date	Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	05/27/2024	Rilling, Karon	/			\$50.00
	1012112024	-				φυυ.υυ
		Contributor address; City; State; Zip Code				
		Austin, TX 78736-3109				
┝╴	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> יו		
	Adjunct Facu		Austin Community Colle			
				i T		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<u>محم مم</u>
	05/21/2024					\$50.00
	1	Contributor address; City; State; Zip Code				
		0.5k Derk III (0204.2200				
Ļ	<u> </u>	Oak Park, IL 60304-2208	<u> </u>			
		pation / Job title (See Instructions)	Employer (See Instructions			
	Professor		University of Illinois Chic	cag	]0	

SCHEDULE	A1
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	The Instrue	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 78/105 Rpt: 81/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)		-	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/28/2024	Rivlin, Sarah				\$100.00
		6 Contributor address; City; State; Zip Code		ł		
		Houston, TX 77017-3608				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Teacher		Hisd			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/23/2024	Roberts, Kathryn				\$24.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77077-4254				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Nurse Educa	ator	Houston Methodist			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/27/2024	Rochen, Shari Dawn				\$50.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005-2413				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Physician		Veteran?s Health Admir	nist	ration	
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/21/2024	Rodriguez, Jennifer S				\$250.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78767-1316				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Rose-Moehnke, Marcy				\$250.00
		Contributor address; City; State; Zip Code		1		
		Katy, TX 77494-8598				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Consultant		Bain & Co.			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 79/105 Rpt: 82/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	06/04/2024	Rothstein, Tracy				\$2.00
		6 Contributor address; City; State; Zip Code				
		Santa Rosa Beach, FL 32459-7351				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2024	Rothstein, Tracy	/			\$10.00
	00/21/2024					φ10.00
		Contributor address; City; State; Zip Code				
		Santa Rosa Beach, FL 32459-7351				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	9		
╘				_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/21/2024	Rynders, Dustin				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005-3958				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney		Texas Civil Rights Proje	ct		
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/21/2024	Safier, Ellen J				\$200.00
		Contributor address; City; State; Zip Code				
		Bellaire, TX 77401-5016				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Social Worke	er	Self			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Safier, Ellen J				\$200.00
		Contributor address; City; State; Zip Code				
		Bellaire, TX 77401-5016				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
1	Social Worke		Self			
⊢			1			
1						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 80/105 Rpt: 83/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/06/2024	Safier, Ellen J				\$62.00
	I	6 Contributor address; City; State; Zip Code		1		
Ļ		Bellaire, TX 77401-5016	1	Ĺ		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
L	Social Worke	1	Self	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/30/2024	Safier, Ellen J				\$100.00
		Contributor address; City; State; Zip Code				
┡		Bellaire, TX 77401-5016		Ĺ		
	Principal occu Social Worke	ipation / Job title (See Instructions)	Employer (See Instructions Self	5)		
L				_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/30/2024	Sakellarides, Adam				\$7.00
		Contributor address; City; State; Zip Code				
		Pasadena, CA 91106-2913				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
		blics Designer	Self	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	06/30/2024	Sakellarides, Adam	/			\$7.00
	00,00,202	Contributor address; City; State; Zip Code				¥1.55
		Continuation address, City, State, Zip Code				
		Pasadena, CA 91106-2913				
┝	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	-	hics Designer	Self			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/19/2024	Salinas, Hector				\$17.50
	I	Contributor address; City; State; Zip Code				
		Houston, TX 77092-5047				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	)d	Not Employed			
┢						
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 81/105 Rpt: 84/145	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Cook, Molly	C. (Ms.)			00086313	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	06/06/2024	Samandari, Sudy				\$33.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77030-1825				
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	President		On Sunset Boulevard Ir			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	05/24/2024	Sanders, Vincent				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77071-1519				
_	Drinoinal again	pation / Job title (See Instructions)	Employer (See Instructions	$\frac{1}{2}$		
	Systems Pla		Houston METRO	>)		
⊨	-			<u> </u>	Amount of Contribution (\$)	
	Date 05/24/2024	Full name of contributor Out-of-state PAC (ID# Schultz, Mary E.	)		Amount of Contribution (\$)	\$50.00
	03/24/2024					ψ50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77009-4438				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	05/20/2024	Schwartz, Roberta				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77025-3662	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	05/21/2024	Schweitzer, Carrie				\$25.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75214-4818				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	7)		
⊢						

SCHEDULE	A1
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⊢						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 82/105 Rpt: 85/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/29/2024	Scott, Robert				\$12.50
		6 Contributor address; City; State; Zip Code				
		-				
		Cloverdale, CA 95425-3679	1			
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe		Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Shah, Saurabh				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006-3708				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Attorney		Self	,		
_	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	06/24/2024	Shaw, John	J			\$15.00
	00.2 2 . 2					*=•
		Seattle, WA 98117-6239				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/07/2024	Shaw, Kathleen				\$33.00
		Contributor address; City; State; Zip Code		1		
		Haustan TV 7700E 262E				
$\vdash$	Drincinal occi	Houston, TX 77005-3635 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		
				<u> </u>		
	Date 06/25/2024	Full name of contributor out-of-state PAC (ID#: Sheehan, Anthony	)		Amount of Contribution (\$)	\$9.00
	0012312024	Contributor address; City; State; Zip Code				49.00
		Contributor address, City, State, Zip Code				
		Saint Paul, MN 55116-2138				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 83/105 Rpt: 86/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly				00086313	•
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/25/2024	Shepard, Eulundia Kay				\$102.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77019-4732				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/21/2024	Shields, Rebecca Anderson				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005-3335				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	05/22/2024	Shipley, George				\$2,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78703-2206				
		upation / Job title (See Instructions)	Employer (See Instructions			
	CEO		Shipley &Associates <inc< td=""><td>с</td><td></td><td></td></inc<>	с		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/16/2024	Shirley, Charles				\$20.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77007-1715	1			
	•	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Computer So		Finastra			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/18/2024	Shoemaker, Rodney				\$25.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77007-1643	1			
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Purchasing		Pentair			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 84/105 Rpt: 87/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/22/2024	Shook, Beth				\$50.00
	1	6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77006-2146				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Software Eng	gineer	Rice University			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/18/2024	Shook, Beth				\$100.00
	l	Contributor address; City; State; Zip Code		]		
		Hauston TV 77006 2146				
$\vdash$	Dringing occu	Houston, TX 77006-2146 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Software Eng		Rice University	5)		
╞				<del>.</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#100 00</b>
	06/18/2024	Shook, Kit Frieden				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006-2033				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2024	Shook, Kit Frieden				\$250.00
	1	Contributor address; City; State; Zip Code		1		
		Houston, TX 77006-2033				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/29/2024	Siemers-Kennedy, Laura		]		\$5.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77019-4318				
┝	Dringingl occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Engineer	pation / Job lille (See instructions)	Employer (See Instructions Mott Macdonald	5)		
	Engineer					

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 85/105 Rpt: 88/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	06/29/2024	Siemers-Kennedy, Laura			······	\$5.00
	•••••	6 Contributor address; City; State; Zip Code		ł		Ŧ
	I					
	l					
	I	Houston, TX 77019-4318				
8	Principal occu	I Ipation / Job title (See Instructions)	9 Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Engineer		Mott Macdonald	,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	—	Amount of Contribution (\$)	
	05/22/2024	Sigala, Hector	/		Allount of Contribution (4)	\$1.66
	001221202	-		ł		Ψ±
	I	Contributor address; City; State; Zip Code				
	I					
	I	Washington, DC 20012-1026				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Consultant		Middle Seat	,		
⊢	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u> )	—	Amount of Contribution (\$)	
	06/06/2024	Smalley, Charles	/			\$25.00
	0010012027	Contributor address; City; State; Zip Code				Ψ20.00
	I	Continuation address, City, State, Zip Code				
	l					
	I	Madison, WI 53704-1012				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	上 3)		
	Not Employe		Not Employed			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	05/28/2024	Smith, Bo & Josie	/			\$25.00
	00,20,212	Contributor address; City; State; Zip Code		•		+=0
	I	Continuation address, City, State, Zip Code				
	I					
	I	Houston, TX 77277-3199				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Not Employe		Not Employed	,		
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/28/2024	Smith, Bo & Josie	/			\$100.00
	00,20.2	Contributor address; City; State; Zip Code		ł		<b>+-</b>
	l	Contributor address, City, State, Lip Solie				
	I					
	I	Houston, TX 77277-3199				
$\vdash$	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	上 3)		
	Not Employe		Not Employed			
$\vdash$						

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 86/105 Rpt: 89/145
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly			00086313
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/23/2024	Smith, David		\$100.00
	6 Contributor address; City; State; Zip Code		1
	Houston, TX 77007-1633	-	
-	upation / Job title (See Instructions)	9 Employer (See Instructions	,
union organi	.zer	Houston Organization o	of Public Employees
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/18/2024	Smith, Josanna		\$100.00
	Contributor address; City; State; Zip Code		]
	Laustan TV 77277 2100		
Dringing occu	Houston, TX 77277-3199 upation / Job title (See Instructions)	Employer (See Instructions	
Self-Employ		Www United Inc.	5)
· · ·			
Date 05/24/2024	—	)	Amount of Contribution (\$) \$2.00
03/24/2024	Smith, William J		φ2.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77008-3914		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	bed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/29/2024	Solitario, Margaret		\$7.50
	Contributor address; City; State; Zip Code		•
	Lansdale, PA 19446-6544		
	upation / Job title (See Instructions)	Employer (See Instructions	
Semi-Retired		Independent Contractor	For Varsity Tutors
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/13/2024	Sorelle, Paul		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77035-2428		
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	c)
Retired		Retired	5)
1			

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 87/105 Rpt: 90/145	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	;)
Cook, Molly			00086313	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/24/2024	Sorola-Pohlman, Lenora		\$100	0.00
	6 Contributor address; City; State; Zip Code		1	
	Houston, TX 77008-3049			
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Owner		Sorola Consulting Servio	ces Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
06/06/2024	Sorola-Pohlman, Lenora		\$62	2.00
	Contributor address; City; State; Zip Code		1	
	Houston, TX 77008-3049			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	,	
Owner		Sorola Consulting Service	ces Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/25/2024	Sparkes, Lisa		\$15	5.00
	Contributor address; City; State; Zip Code		1	
	Leander, TX 78641-4029			
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/30/2024	Spurr, Charles		\$100	0.00
	Contributor address; City; State; Zip Code		1	
	Wakefield, MA 01880-3105			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Software Eng	gineer Retired	Retired		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/24/2024	Stake, Steven		\$100	0.00
	Contributor address; City; State; Zip Code	1	1	
	Phoenix, AZ 85014-1267	1		
-	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Reimbursem	ient Analyst	MDS Inc		
		1		

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 88/105 Rpt: 91/145	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Cook, Molly	C. (Ms.)			00086313	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
05/30/2024	Steinbach, Douglas				\$5.00
	6 Contributor address; City; State; Zip Code		1		
	Houston, TX 77098-1454				
	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Graduate Stu	udent Research Assistant	Rice University			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/30/2024	Steinbach, Douglas				\$5.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77098-1454	· · · · · · · · ·	<u> </u>		
	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
Graduate Su	udent Research Assistant	Rice University	_		
Date	—	)	T	Amount of Contribution (\$)	
05/29/2024	Stokes Hilton, Lee		]		\$250.00
	Contributor address; City; State; Zip Code		]		
	Austin, TX 78735-1620				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	d	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
06/03/2024	Stucko, Craig				\$10.00
	Contributor address; City; State; Zip Code				
	Commack, NY 11725-1619				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Engineer		Royal Products			
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
06/10/2024	Stucko, Craig				\$10.00
	Contributor address; City; State; Zip Code		1		
	Commack, NY 11725-1619				
-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Engineer		Royal Products			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 89/105 Rpt: 92/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/31/2024	Sullivan, Brent	/	-		\$27.00
	00/01/2021					¢21100
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77007-4228				
_	Duin sin stars a			Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Business Ma	anagement	Vmware			
	Date	Full name of contributor Dut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/25/2024	Sung, Anne				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77063-6109				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions			
	None		None			
	Date	Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/26/2024		)		Amount of Contribution (\$)	\$100.00
	00/20/2024					\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77063-6109				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	None		None			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/27/2024	Swann, Chris				\$3.00
		Contributor address; City; State; Zip Code				
		Palm Springs, CA 92264-1303				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	ed	Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	05/30/2024	Sweigart, Albert	)			\$2,000.00
	00/00/2024	-				Ψ2,000.00
		Contributor address; City; State; Zip Code				
		Seattle WA 09100 0722				
⊢	Drincipal	Seattle, WA 98109-0732	Employer (Cashattant)	<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Author		Self-Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 90/105 Rpt: 93/145	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	
	06/29/2024	Swilley, Vivian				\$25.00
		6 Contributor address; City; State; Zip Code		ł		
		Garland, TX 75044-4404				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Not Employe	эd	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	06/17/2024	Sysco Corp. Good Government Committee Inc				\$1,500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77077-2025				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/06/2024	TSAPAC				\$3,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701-1624	-			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
			<u> </u>			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/29/2024	Taylor, Jan				\$12.50
		Contributor address; City; State; Zip Code	Ţ	1		
L		Cross Lanes, WV 25313-1221	1	L		
		upation / Job title (See Instructions)	Employer (See Instructions		0	
L	Director Scie	ence &Research	Wv Higher Education Po		y Commission	
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	06/30/2024	Taylor Iii, John				\$50.00
		Contributor address; City; State; Zip Code	ļ			
		Austin, TX 78751-3721	1	Ļ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Not Employe	id	Not Employed			

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 91/105 Rpt: 94/145 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Cook, Molly C. (Ms.) 00086313 4 Date **5** Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/24/2024 Texas Academy of Family Physicians PAC \$5,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78727-6207 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/20/2024 **Texas Medical Association PAC** \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78701-1624 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/18/2024 **Texas Nurse Practitioners PAC** \$1,000.00 ..... Contributor address; City; State; Zip Code Austin, TX 78735-6713 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/18/2024 **Texas Trial Lawyers Association PAC** \$10,000.00 Contributor address; City; State; Zip Code Austin, TX 78701-1814 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/20/2024 \$1,000.00 **TexasNurse PAC** Contributor address; City; State; Zip Code Austin, TX 78759-8444 Principal occupation / Job title (See Instructions) Employer (See Instructions)

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 92/105 Rpt: 95/145	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
ľ	Cook, Molly	C. (Ms.)		ľ	00086313	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/29/2024	Torres, Diane				\$2.50
		6 Contributor address; City; State; Zip Code				
		Hillsborough, CA 94010-6152				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/29/2024	Torres, Diane				\$2.50
		Contributor address; City; State; Zip Code				
		Hillsborough, CA 94010-6152				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)	<u> </u>	Amount of Contribution (\$)	
	05/29/2024	Torres, Tomas Manuel	)			\$5,000.00
	00/20/2021					40,000.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77027-6204				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/20/2024	Toumajian, Gina				\$200.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005-4018				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Grants Mana	ager	Hope Clinic			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/19/2024	Toumajian, Lulu				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005-4018				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Grants Mana	ager	HOPE Clinic			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 93/105 Rpt: 96/145	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Cook, Molly	C. (Ms.)			00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	05/25/2024	Tran, Taylor				\$15.00
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77006-5250				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	Supply Chai		Amazon	,		
╞		-		_		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	±0.50
	05/29/2024	Travis, Scott				\$2.50
		Contributor address; City; State; Zip Code				
		N Little Rock, AR 72116-8110				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Programmer	-	Dillards			
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	05/30/2024	Tressel, Patricia				\$25.00
		Contributor address; City; State; Zip Code		1		
		Seattle, WA 98125-7836				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/25/2024	Trevino Jr, Agustin				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77093-8722				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
		ction Manager	Citibank	,		
╞				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	¢100.00
	05/20/2024					\$100.00
		Contributor address; City; State; Zip Code				
$\vdash$		Houston, TX 77091-3324		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Developer		Grid United			

SCHEDULE	A1
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			<u> </u>	T	Total pages Cabadula A1	
The	e Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 94/105 Rpt: 97/145	
2 FILE	ER NAME			3	Filer ID (Ethics Commissio	on Filers)
Coc	ok, Molly	C. (Ms.)			00086313	
4 Date	e	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/2	26/2024	Tschirch, Poldi				\$100.00
	ļ	6 Contributor address; City; State; Zip Code		·		
	ļ					
	ļ					
		League City, TX 77573-4211				
		pation / Job title (See Instructions)	9 Employer (See Instructions			
Edu	ucator		University of St. Thomas	IS		
Date	э	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
05/2	27/2024	Tucker, Eliot P.				\$100.00
	P	Contributor address; City; State; Zip Code	,			
	ļ					
	ļ					
		Houston, TX 77019-1511				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
Atto	orney		Self			
Date	e	Full name of contributor out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)	
06/1	18/2024	Tucker, Eliot P.				\$200.00
1	,	Contributor address; City; State; Zip Code		1		
	ļ					
	ļ					
		Houston, TX 77019-1511				
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Atto	orney		Self			
Date	э	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/2	22/2024	TxANA PAC				\$1,000.00
	ļ	Contributor address; City; State; Zip Code	·····	1		
	ļ					
1	ļ					
	· • • • • • •	Austin, TX 78701-2444		Ĺ		
Princ	cipal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
<u> </u>			<u> </u>	<del>—</del>		
Date		Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
06/2	21/2024	UA Plumbers & Pipefitters Local 286 PAC Fund				\$4,000.00
	ļ	Contributor address; City; State; Zip Code				
1	ļ					
	ļ	Austin, TX 78702-4106				
Prin			Employer (See Instructions	$\overline{\Gamma}$		
PIIIR	Cipai occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
<b> </b>			1			
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SCHEDULE	A1
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 95/105 Rpt: 98/145
2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly C. (Ms.)	00086313
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
05/30/2024 Underdown, Eleanor Bly	\$5.00
6 Contributor address; City; State; Zip Code	
Lenoir, NC 28645-8293	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction	ns)
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/11/2024 Upham, Joshua	\$25.00
Contributor address; City; State; Zip Code	
Houston, TX 77008-2050	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Lawyer The Lanier Law Firm	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/25/2024 Urgenc, Sefa	\$25.00
Contributor address; City; State; Zip Code	
Brooklyn, NY 11231-3014	
Principal occupation / Job title (See Instructions) Employer (See Instruction	ns)
Not employed Not employed	
Date     Full name of contributor     out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/26/2024 Vasquez, Gloria	\$50.00
Contributor address; City; State; Zip Code	
Sun Prairie, WI 53590-9235	
Principal occupation / Job title (See Instructions) Employer (See Instruction Nurse State of WI	ns)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
05/27/2024 Vega, Angelo	\$10.00
Contributor address; City; State; Zip Code	
Bronx, NY 10461-1620	
DIOIA, NT 10401-1020	•
Dringing oppuration / Joh title (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instruction Not Employed	ns)
Principal occupation / Job title (See Instructions)       Employer (See Instruction         Not Employed       Not Employed	ns)

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 96/105 Rpt: 99/145	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Cook, Molly	C. (Ms.)			00086313	-
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/30/2024	Vogt, Barbara				\$7.50
	6 Contributor address; City; State; Zip Code		1		-
	Washington, DC 20016-3759				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
05/31/2024	Von Briesen, Hans				\$1.38
	Contributor address; City; State; Zip Code		•		·
	Santa Fe, NM 87501-1536				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
06/25/2024	W Walker, Cliff				\$250.00
	Contributor address; City; State; Zip Code		1		
	Austin, TX 78701-1186				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Political Ope	rative	Seeker Strategies			
Date	Full name of contributor out-of-state PAC (ID#:	<u>.                                    </u>	Γ	Amount of Contribution (\$)	
05/29/2024	Wagner, Audrey				\$12.50
	Contributor address; City; State; Zip Code		1		
	Billings, MT 59101-3732				
	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/30/2024	Walker, Geoffrey				\$250.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77098				
	upation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
		·			

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 97/105 Rpt: 100/145	
2 FILER NAME				Filer ID (Ethics Commission	n Filers)
Cook, Molly				00086313	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
06/25/2024	Walker, Mary				\$100.00
	6 Contributor address; City; State; Zip Code		1		
	Houston, TX 77035-2310				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ج)		
Not Employe		Not Employed	5)		
Date			Г	Amount of Contribution (\$)	
05/30/2024	Full name of contributor out-of-state PAC (ID#: Walker, Tama	)		Amount of Contribution (\$)	\$12.50
03/30/2024					φ12.00
	Contributor address; City; State; Zip Code				
	Houston, TX 77081-4656				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Employe	ed	Not Employed			
Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
05/26/2024	Wallace, Tammi				\$250.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77006-2712	i			
	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Consultant		EnFocus Strategies			
Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
06/06/2024	Walling, Vicki				\$50.00
	Contributor address; City; State; Zip Code				
	Santa Rosa, CA 95409-3432				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Not Employe		Not Employed	5)		
	1		<u> </u>		
Date 06/01/2024	Full name of contributor out-of-state PAC (ID#: Wardlaw, Andrea	)		Amount of Contribution (\$)	\$50.00
06/01/2024					\$50.00
	Contributor address; City; State; Zip Code				
	Cypress, TX 77429-4101				
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u>і</u> 5)		
Shipping Co		Hh Oil Tools Inc.			

SCHEDULE	A1
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L			
The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 98/105 Rpt: 101/145
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)	
Cook, Molly			00086313
4 Date	5 Full name of contributor Out-of-state PAC (ID#:_	)	<ul><li>7 Amount of Contribution (\$)</li></ul>
06/29/2024	Wareing, Bess		\$100.00
00,20,202.	-		
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77027-4117		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u>
Psychologis		Self	)
			Amount of Contribution (\$)
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/26/2024	Warner, Frederic		\$350.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019-6436	<u> </u>	
	upation / Job title (See Instructions)	Employer (See Instructions	,
Chief Gover	mment Relations Officer	Memorial Hermann Hea	alth System
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/20/2024	Warren, Benjamin & Joy		\$500.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77024-7751		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
CEO-Financ	ce/Homemaker	ITC Trading Company L	_td
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/27/2024	Washington, Paulette		\$10.00
	Contributor address; City; State; Zip Code		·
	New York, NY 10029-3042		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Not Employe		Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)
06/06/2024	Washington, Paulette	/	\$15.00
00,00,202.	-		······································
	Contributor address; City; State; Zip Code		
	New York, NY 10029-3042		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)
Not Employe		Not Employed	5)

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 99/105 Rpt: 102/145	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
Cook, Molly			00086313	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	
05/28/2024	Weatherford, Hedwiga C			\$25.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77008-1222	<u> </u>		
	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/26/2024	Weaver, Kevin			\$5.00
	Contributor address; City; State; Zip Code			
	Franklin Lakes, NJ 07417-1135			
	Ipation / Job title (See Instructions)	Employer (See Instructions)		
Not Employe	2d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
05/29/2024	Webber, Johelen.			\$5.00
	Contributor address; City; State; Zip Code			
	Austin TV 20756 2020			
Dringing loopu	Austin, TX 78756-2030			
Principal occu Not Employe	Ipation / Job title (See Instructions)	Employer (See Instructions) Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	±15.00
05/25/2024	Wehrli, Christine			\$15.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77009-7709			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	vices Manager	Conscious Capitalism Inc		
		· · · · · · · · · · · · · · · · · · ·		
Date 05/20/2024	Full name of contributor out-of-state PAC (ID#: Welborn, Tes	)	Amount of Contribution (\$)	\$2.00
0312012024				Φ2.00
	Contributor address; City; State; Zip Code			
	San Francisco, CA 94117-1802			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Not Employe		Not Employed		
100				

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 100/105 Rpt: 103/145
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Cook, Molly	C. (Ms.)		00086313
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
06/12/2024	Weltge, Arlo		\$100.00
	6 Contributor address; City; State; Zip Code		
	Bellaire, TX 77401-4826		
	upation / Job title (See Instructions)	9 Employer (See Instructions	)
Physician		Self	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/23/2024	Wheeler, Richard		\$5.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098-5225		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
06/23/2024	Wheeler, Richard		\$5.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098-5225		
	upation / Job title (See Instructions)	Employer (See Instructions	)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/28/2024	Wiggins, Jessica		\$25.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77098-3533		
	pation / Job title (See Instructions)	Employer (See Instructions	)
Planner		Harris County	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/24/2024	Wilder, Laura		\$10.00
	Contributor address; City; State; Zip Code		
	Garland, TX 75043-3431		
	upation / Job title (See Instructions)	Employer (See Instructions	)
Not Employe	ed	Not Employed	

The Instruction Guide e	explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 101/105 Rpt: 104/145	5
2 FILER NAME		3 Filer ID (Ethics Commission	Filers)	
Cook, Molly C. (Ms.)			00086313	
4 Date 5 Full name of	f contributor 🔲 out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
05/29/2024 Wilder, Lau	ıra			\$5.00
6 Contributor a	address; City; State; Zip Code			
	X 75043-3431		-	
8 Principal occupation / Job title (	(See Instructions)	9 Employer (See Instructions	i)	
Not Employed		Not Employed		
Date Full name of		)	Amount of Contribution (\$)	
05/25/2024 Wilkinson, V	Wendy			\$20.00
Contributor a	address; City; State; Zip Code			
Houston, T				
Principal occupation / Job title (	(See Instructions)	Employer (See Instructions	3)	
Not Employed		Not Employed		
Date Full name of	f contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/24/2024 Williams, B	rad			\$100.00
Contributor a	address; City; State; Zip Code			
	X 77007-3907			
Principal occupation / Job title (	(See Instructions)	Employer (See Instructions		
Actuary		General Reinsurance Co	orporation	
Date Full name of	f contributor 🔲 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
05/31/2024 Willis, Andr	rew			\$100.00
Contributor a	address; City; State; Zip Code			
	X 77005-1647			
Principal occupation / Job title (	(See Instructions)	Employer (See Instructions	,	
Pra Analyst		Ares Technical Services	; 	
Date Full name of	f contributor 🔲 out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
06/30/2024 Willis, Andr	rew			\$100.00
Contributor a	address; City; State; Zip Code			
Houston, T	X 77005-1647			
Principal occupation / Job title (	(See Instructions)	Employer (See Instructions		
Pra Analyst		Ares Technical Services	; 	

				_		
The In	struction Guide explains how t	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 102/105 Rpt: 105/145	
2 FILER N	IAME			3	Filer ID (Ethics Commission	Filers)
	Molly C. (Ms.)			-	00086313	,
4 Date	<b>5</b> Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
05/28/2		_				\$10.00
	6 Contributor address; City; Stat			1		
	Moorhead, MN 56561-1064	Λ				
<b>9</b> Princina	l occupation / Job title (See Instructions)		9 Employer (See Instructions	د) ۲		
Not Em			Not Employed	<i>&gt;)</i>		
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/27/2	.024 Wingate, Elizabeth	_				\$5.00
	Contributor address; City; Stat	te; Zip Code		1		
	Valdez, AK 99686-1503					
	l occupation / Job title (See Instructions)		Employer (See Instructions	5)		
Not Em	ployed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
06/27/2	024 Wingate, Elizabeth					\$5.00
	Contributor address; City; Stat			1		
	Valdez, AK 99686-1503					
-	l occupation / Job title (See Instructions)		Employer (See Instructions	3)		
Not Em	ployed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
05/23/2	· · ·					\$100.00
	Contributor address; City; Stat			1		
	Belleville, IL 62221-6803	T		Ĺ		
	l occupation / Job title (See Instructions)		Employer (See Instructions	5)		
Not Em			Not Employed	<u> </u>		
Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
05/24/2	2024 Woessner Gauci, Kathryn			]		\$25.00
	Contributor address; City; Stat	te; Zip Code		]		
	Houston, TX 77007-8000	T				
	l occupation / Job title (See Instructions)		Employer (See Instructions	5)		
Nanny			None			

				_		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 103/105 Rpt: 106/14	45
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Cook, Molly				00086313	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	05/29/2024	Wolf, Jim				\$2.50
		6 Contributor address; City; State; Zip Code		1		
		Jenks, OK 74037-3232				
8	Princinal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
0	Sr Tech Writ		Cloverleaf	5)		
_	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	06/13/2024	Working Families Party National PAC	)			\$2,200.00
	00/13/2024			ł		Φ2,200.00
		Contributor address; City; State; Zip Code				
		Brooklyn, NY 11201-1431				
-	Principal occur	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Finopa oooa			5)		
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Τ	Amount of Contribution (\$)	
	06/26/2024	Wright, Colby			Allount of Contribution (+)	\$100.00
	00,20,202.			ł		Ψ±00.00
		Continuutor address, City, State, Zip Code				
		Katy, TX 77449-6216				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Marketing		Self Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	05/22/2024	Y, Bert				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77007-3528				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Legal		Archer			
F	Date	Full name of contributor out-of-state PAC (ID#:	······)	Γ	Amount of Contribution (\$)	
	05/31/2024	Young, Alan				\$1.00
		Contributor address; City; State; Zip Code		1		
		Hilo, HI 96720-5325				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Caterer		Self			
┢						

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 104/105 Rpt: 107/14	45
2	FILER NAME			3	Filer ID (Ethics Commissio	
	Cook, Molly	C. (Ms.)			00086313	
4	Date 06/19/2024	5 Full name of contributor out-of-state PAC (ID#: Young, Kyle	)	7	Amount of Contribution (\$)	\$50.00
	00/10/2021	6 Contributor address; City; State; Zip Code				400.00
		Houston, TX 77057-2913				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Marketing		Theatre Under The Star	s		
	Date	Full name of contributor out-of-state PAC (ID#:	· )		Amount of Contribution (\$)	
	05/21/2024	atkinson, alan				\$2,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77020-8418				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	self-employe		alan atkinson			
	Date	Full name of contributor Out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	05/26/2024	fussell, carrie	)		(1)	\$25.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78702-4847				
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	musician/foc		free lunch	,		
-	Date	Full name of contributor Out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	05/23/2024	lemaitre, rafael	)			\$50.00
	00/20/2024	Contributor address; City; State; Zip Code				400.00
		Contributor address, City, State, Zip Code				
		Alexandria, VA 22301-1035				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Communicat		FEMA	,		
_	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	
	05/20/2024	powers, sylvia	)			\$100.00
	03/20/2024					φ100.00
		Contributor address; City; State; Zip Code				
		Grapevine, TX 76051-6640				
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Digital Rep		FedEx	<i>י</i> י		
	Sigilaritep					

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 105/105 Rpt: 108/145
2 FILER NAME Cook, Molly C. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00086313
05/21/2024 skelly, michael 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$1,000.00
Houston, TX 77003-2411       8     Principal occupation / Job title (See Instructions) energy exec     9     Employer (See Instructions) grid united	
Date       Full name of contributor       out-of-state PAC (ID#:)         05/23/2024       yeager, james mccarty         Contributor address; City; State; Zip Code         Santa Fe, NM 87505-2802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)     Employer (See Instructions)       Not Employed     Not Employed	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE	A2
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/1 Rpt: 109/145				
2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)				
Cook, Molly	C. (Ms.)	00086313				
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 05/22/2024	<ul> <li>6 Full name of contributor out-of-state PAC (ID#:</li> <li>LGBTQ+ Victory Fund Federal PAC</li> <li>7 Contributor address; City; State; Zip Code</li> </ul>	)	8 Amount of 9 In-kind contribution contribution (\$) description \$357.50 Postcards			
	Washington, DC 20005-6005					
<b>10</b> Principal occu	•	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule TJUDICIAL) (See instructions)			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 05/31/2024	Full name of contributor out-of-state PAC (ID#: The First Ask Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$723.61 I Staff time			
	Washington, DC 20003-4303		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributc	r's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 06/26/2024	Full name of contributor out-of-state PAC (ID#: Wu, Gene Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$663.75   Food drinks and bar service for campaign event			
	Houston, TX 77274		Check if travel outside of Texas. Complete Schedule T.			
Principal occu State Repre	upation / Job title (FOR NON-JUDICIAL) (See instructions) sentative	Employer (FOR NON State of Texas				
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	e (FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			EXPENDITURE ( Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	oense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2					3	Filer ID	(Ethics Commission Filers)
-	Sch: 1/36 Rpt:	<b> </b>	Cook, Molly C. (Ms.)					00086313	
4	Date	5	Payee name						
	05/21/2024		A. Philip Randolph Institute						
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	le			
	\$1,000.00	815 Black Lives Matter Plaza							
			Washington, DC 20006						
8	PURPOSE	(a)	Category (See Categories listed at the to	on of this sch	edule)	(b) Description			
	OF		Contributions/Donations Made		ouuro)		outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Politica	,	nittee	Check if Austi	n, TX	, officeholder living	g expense
						Rainbow Tea	a Sj	ponsorship	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Dffice sou	ıht		Office h	əld
	Date		Payee name						
	05/24/2024		Acres Homes Chamber for Bu	siness a	nd Econo	omic Developme	nt		
Amount (\$) Payee address; City; State; Zip Code									
	\$1,500.00		6112 Wheatley St						
			Houston, TX 77091						
	PURPOSE OF	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b) Description			
	EXPENDITURE		Contributions/Donations Made					side of Texas. Com	
	-		Candidate/Officeholder/Politica	al Comm	nittee			, officeholder living	g expense
						For disaster	reli	et meals	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ıht		Office h	eld
-	Date	r							
	06/30/2024		Payee name ActBlue Texas						
	00/30/2024		ACIBILIE TEXAS						
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$2,126.04		P.O. Box 441146						
			Somerville, MA 02144						
	PURPOSE	(a)	Category (See Categories listed at the to	op of this sch	edule)	(b) Description			
	OF EXPENDITURE		Solicitation/Fundraising Expen	ise				ide of Texas. Com	
								, officeholder living	) expense
						transaction f	ee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	Jht		Office h	eld
⊢									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment			Fees         Office Overhead/Rental Expense         Tool/Beverage Expense         Polling Expense         Tool/Beverage           / -         Gift/Awards/Memorials Expense         Printing Expense         Tool/Beverage			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 2/36 Rpt:		Cook, Molly C. (Ms.)					00086313		
4	Date	5	Payee name							
	05/30/2024		Airbnb							
6	Amount (\$)	7	Payee address; City; State; Zip Code							
	\$234.23		888 Brannan St							
			San Francisco, TX 94103							
8	PURPOSE	(a)				<b>b)</b> Description				
0	OF	(a)	Category (See Categories listed at the top o Transportation Equipment And R		lule)	b) Description Check if travel	outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE		Expense					officeholder living expense		
						Campaign tra	ave	I		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Off	fice soug	ht		Office held		
	Date		Payee name							
	05/31/2024		BCom Solutions							
	Amount (\$) Payee address; City; State; Zip Code									
	\$2,800.00 747 O St Suite 150									
			Lincoln, NE 68521							
	PURPOSE OF	(a)	Category (See Categories listed at the top o		lule)	b) Description				
	EXPENDITURE		Solicitation/Fundraising Expense	•				de of Texas. Complete Schedule T. , officeholder living expense		
						Digital fundra				
						g		.9		
	Complete ONLY if direct		Candidate/Officeholder name	Off	fice soug	ht		Office held		
	expenditure to benefit C/OF			-						
	Data	1	Device nome							
	Date 05/21/2024		Payee name Berlin Rosen							
				<u></u>	7. 0					
	Amount (\$)		Payee address; City;	State;	Zip Coo	e				
	\$58,087.76		15 Maiden Lane Suite 1600							
			New York, NY 10038							
	PURPOSE	(a)	Category (See Categories listed at the top o	f this sched	lule)	b) Description				
	OF EXPENDITURE		Advertising Expense					de of Texas. Complete Schedule T.		
						paid media	, TX,	officeholder living expense		
						paiu meula				
					<u> </u>	1- 4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Off	fice soug	nt		Office held		
	,									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politi Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/36 Rpt:	Cook, Molly C. (Ms.) 00086313			
4 Date				
05/21/2024	5 Payee name Berlin Rosen			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$25,192.48	15 Maiden Lane Suite 1600			
	New York, NY 10038			
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Advertising Expense</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense paid media</li> </ul>			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H			
Date	Payee name			
05/24/2024	Berlin Rosen			
Amount (\$)	Payee address; City; State; Zip Code			
\$16,467.86	15 Maiden Lane Suite 1600 New York, NY 10038			
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Advertising Expense       (b) Description 				
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
05/28/2024	Berlin Rosen			
Amount (\$) \$1,440.00	Payee address;       City;       State;       Zip Code         15 Maiden Lane Suite 1600       100			
	New York, NY 10038			
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Polling Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Poll working runoff</li> </ul> </li> </ul>			
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
_		· · · ·						
1	Total pages Schedule F1:							
	Sch: 4/36 Rpt:	Cook, Molly C. (Ms.) 00086313						
4	Date	5 Payee name						
	06/04/2024	Berlin Rosen						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
ľ	\$21,958.00	15 Maiden Lane Suite 1600						
	ψ21,950.00	15 Maiden Lane Suite 1000						
		New York, NY 10038						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		paid media						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	1						
	Data							
	Date	Payee name						
	06/21/2024	Berlin Rosen						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$2,848.00 15 Maiden Lane Suite 1600							
		New York, NY 10038						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		paid media						
		paid media						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
	experiature to benefit C/OI							
	Date	Payee name						
	05/24/2024	Burger Bar						
-	Amount (\$)	Payee address; City; State; Zip Code						
		110 E 2nd St						
	\$36.56	IIO E 2110 St						
		Austin, TX 78701						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Food/Beverage Expense						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		food for campaign staff						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe mmittee Legal Services	Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 5/36 Rpt:		Cook, Molly C. (Ms.)					00086313	
4	Date	5	Payee name				1		
	05/23/2024		COA Parking Meters Austin						
6	Amount (\$)	7	Payee address; City;	State;	Zip Coc	e			
	\$4.75		800 Guadalupe St						
			Austin, TX 78701						
8	PURPOSE	(a)	Category (See Categories listed at the top	of this sche	(alube	b) Description			
			Transportation Equipment And		,		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Expense				n, TX	, officeholder living	expense
						parking			
_									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	0	Office soug	ht		Office he	ad
	Date		Payee name						
	05/23/2024		COA Parking Meters Austin						
	Amount (\$) Payee address; City; State; Zip Code								
	\$3.25	\$3.25 800 Guadalupe St							
			Austin, TX 78701						
	PURPOSE	(a)	Category (See Categories listed at the top	o of this sche	edule)	b) Description			
	OF EXPENDITURE		Transportation Equipment And					ide of Texas. Com	
	EXPENDITORE		Expense				n, TX,	, officeholder living	expense
						parking			
						L.4		0.000	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	Office soug	nı		Office he	210
-	Data	<u> </u>							
	Date 05/28/2024		Payee name Calltime.ai						
				01-1-1	7: 0				
	Amount (\$) \$500.00		Payee address; City;	State;	Zip Coo	e			
	φουυ.υυ		3780 KILROY AIRPORT WAY						
			Long Roach CA 00906						
	BUBB00-		Long Beach, CA 90806		<u> </u>				
	PURPOSE OF	(a)	Category (See Categories listed at the top		edule)	b) Description Check if travel	Outei	ide of Texas. Com	nlete Schedule T
	EXPENDITURE		Solicitation/Fundraising Expens	se				, officeholder living	
						fundraising s			
						2			
	Complete ONLY if direct	L(	Candidate/Officeholder name	0	Office soug	ht		Office he	eld
	expenditure to benefit C/OI	Н							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage E: Gift/Awards/Memo mittee Legal Services	pense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 6/36 Rpt:		Cook, Molly C. (Ms.)					00086313	
4	Date	5	Payee name						
	06/26/2024		Calltime.ai						
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le			
	\$500.00		3780 KILROY AIRPORT	WAY					
			Long Beach, CA 90806						
8	PURPOSE	(a)	Category (See Categories lister	d at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Solicitation/Fundraising	Expense				ide of Texas. Com	
								, officeholder living	expense
						fundraising s	οπν	vare	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	e C	)ffice souç	ht		Office he	eld
	Date		Payee name						
	05/28/2024		Christy Donuts						
	Amount (\$)		Payee address; City;	State;	Zip Co	le			
	\$16.54		1103 W Gray St						
			Houston, TX 77019						
	PURPOSE	(a)	Category (See Categories lister	d at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	e				ide of Texas. Com	
								, officeholder living	expense
						Food for carr	ipa	ign event	
	Complete ONLY if direct	L C	andidate/Officeholder name	e C	Office soug	iht		Office he	eld
	expenditure to benefit C/OI							0	
	Date		Payee name						
	05/28/2024		Christy Donuts						
	Amount (\$)		Payee address; City;	State <sup>.</sup>	Zip Co	10			
	\$60.00		1103 W Gray St	State,	210 000				
	φ00.00		1103 W Oldy St						
			Houston, TX 77019						
	PURPOSE	(a)	Category (See Categories lister	d at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Food/Beverage Expense	e				ide of Texas. Com	
								, officeholder living	expense
						Food for cam	ipa	ign event	
	Complete ONLY if direct		andidate/Officeholder name	<u> </u>	Office sou	iht		Office he	ald
	expenditure to benefit C/OI		and a concentration of the main		2000 3000			Unice he	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Eve Fee Foo Gift/ nmittee Leg	nt Expense	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimburs head/Rental Exp ense pense ages/Contract La	pense abor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 7/36 Rpt:		Cook, Molly C.	(Ms.)						00086313	
4	Date	5	Payee name								
	05/20/2024		Circle K								
6	Amount (\$)	7	Payee address;	City;	State;	; Zip Co	de				
	\$5.95		926 Westheim	er							
			Houston, TX 7	7006							
8	PURPOSE	(a)	Category (See Ca	ategories listed at the to	op of this sch	edule)	(b) Descript	tion			
	OF EXPENDITURE		Food/Beverage		- 1		Check	k if travel o		de of Texas. Comp	
										officeholder living	expense
							Ice for	a camp	oai	gn event	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	C	Office sou	jht			Office he	ld
	Date		Payee name								
	05/31/2024		Community La	oor Administrat	ive Servi	ces					
	Amount (\$)		Payee address;	City;		Zip Co	h۵				
	\$55.00		87-89 5th Ave	City,	Olaic,	- Zip - Co					
	φυυ.υυ										
			Suite 600								
			New York, NY	10003						_	
	PURPOSE	(a)	Category (See Ca	ategories listed at the t	op of this sch	edule)	(b) Descript	tion			
	OF EXPENDITURE		Fees							de of Texas. Comp	
										officeholder living	expense
							Mobiliz	e sonw	vare	е	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	-	Candidate/Officeh	older name	С	Office sou	yht			Office he	ld
	Date		Payee name								
	06/27/2024		Community La	oor Administrat	ive Servi	res					
			-								
	Amount (\$)		Payee address;	City;	State;	; Zip Co	le				
	\$55.00		87-89 5th Ave								
			Suite 600								
			New York, NY	10003							
	PURPOSE	(a)	Category (See Ca	ategories listed at the t	on of this sch	edule)	(b) Descript	tion			
	OF	``	Fees		00 01 1110 0011	ouuroy			outsic	de of Texas. Comp	plete Schedule T.
	EXPENDITURE						Check	k if Austin,	TX,	officeholder living	expense
							mobiliz	e softw	vare	е	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	C	Office sou	jht			Office he	ld
	·										

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Exp Fees Food/Beve Gift/Award nmittee Legal Serv	ense rage Expense s/Memorials Expense	Loan Repay Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 8/36 Rpt:		Cook, Molly C. (Ms	.)				00086313	
4	Date	5	Payee name						
	05/30/2024		Cotter, John						
6	Amount (\$)	7	Payee address; 0	City; State;	Zip Coo	le			
	\$967.18		4223 Terrace pines	;					
			Kingwood, TX 7734	15					
8	PURPOSE	(a)	Category (See Categori	es listed at the top of this sche	edule)	<b>b)</b> Description			
	OF EXPENDITURE		Contributions/Dona			Check if travel	outs	ide of Texas. Com	plete Schedule T.
	LAFENDITORE		Candidate/Officeho	Ider/Political Comm	ittee			, officeholder living	
						Reimbursem	ent	for diaster r	elief
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder	name C	Office soug	ht		Office he	eld
	Date		Payee name						
	06/03/2024		Crockett, Sarah						
	Amount (\$)		Payee address; 0	City; State;	Zip Coo	le			
	\$120.00		5800 W Mount Hou			-			
	φ120.00								
			Houston, TX 77088						
	PURPOSE	(a)	Category (See Categori	es listed at the top of this sche	edule)	<b>b)</b> Description			
	OF EXPENDITURE		Salaries/Wages/Co	ntract Labor				ide of Texas. Com	•
							I, TX	, officeholder living	expense
						contractor			
			andidate (Office helder			<b>b</b> 4		Office he	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder	name C	Office soug	nı		Office he	ala
		-							
	Date		Payee name						
	05/28/2024		El Taco Rico						
	Amount (\$)		-	City; State;	Zip Coo	le			
	\$66.75		1818 Hamilton St						
			Houston, TX 77003	1					
	PURPOSE	(a)	Category (See Categori	es listed at the top of this sche	edule)	<b>b)</b> Description			
	OF EXPENDITURE		Food/Beverage Ex			Check if travel	outs	ide of Texas. Com	plete Schedule T.
	EXPENDITORE					Check if Austin	і, TX	, officeholder living	expense
						Campaign ev	/en	t	
	Complete ONLY if direct		Candidate/Officeholder	name C	Office soug	ht		Office he	eld
	expenditure to benefit C/OI	1							

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)			
	Sch: 9/36 Rpt:	Cook, Molly C. (Ms.)	00086313			
4	Date	5 Payee name				
	05/23/2024	Gusto				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$600.00	525 20th St				
		San Francisco, CA 94107				
0	DUDDOCE					
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description	utside of Texas. Complete Schedule T.			
	EXPENDITURE		TX, officeholder living expense			
		Campaign stat	ff			
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	05/23/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$600.00	525 20th St				
	ψυυυ.υυ	525 20th 5t				
		San Francisco, CA 94107				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	05/23/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$530.00	525 20th St				
	+000100					
		San Francisco, CA 94107				
	PURPOSE OF	(b) Description				
	EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
		Campaign stat				
		Cumpaign stal				
	Complete ONIL V if direct	Candidate/Officebolder.nome	Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)			
	Sch: 10/36 Rpt:	Cook, Molly C. (Ms.)	00086313			
4	Date 05/23/2024	Payee name Gusto				
6	Amount (\$) \$550.00	Payee address;       City;       State;       Zip Code         525 20th St       San Francisco, CA 94107				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff			
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	05/23/2024	Gusto				
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 525 20th St				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date 05/23/2024	Payee name Gusto				
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 525 20th St				
		San Francisco, CA 94107				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX	8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/f Fees Office Overhead/R Food/Beverage Expense Polling Expense Gitl/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Co The Instruction Guide explains how to complete	ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	EII ER NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 11/36 Rpt:	Cook, Molly C. (Ms.)	00086313
4	Date	Payee name	
	05/23/2024	Gusto	
6	Amount (\$) \$280.00	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8	PURPOSE	b) Category (See Categories listed at the top of this schedule) (b) D	escription
Ū	OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/23/2024	Gusto	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$600.00	525 20th St San Francisco, CA 94107	
	DUDDOSE		
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/23/2024	Gusto	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	525 20th St	
		San Francisco, CA 94107	
	PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign staff
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPEND	ITURE CATE	GORIES FO	R BC	DX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica			nmittee	Event Expense Fees Food/Beverage Gift/Awards/Me Legal Services	Expense morials Expense	Office Ov Polling E> Printing E	erhead kpense xpens			Travel in District Travel Out of Dis	quipment & Related E	
	Credit Card Payment			The Instruct	ion Guide expla	ins how to co	omple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 12/36 Rpt:		Cook, Molly	′ C. (Ms.)						00086313		
4	Date	5	Payee name						•			
	05/23/2024		Gusto									
6	Amount (\$)	7	Payee addre	ss; City;	St	ate; Zip Co	ode					
	\$600.00		525 20th St									
			San Francis	sco. CA 94	107							
8	PURPOSE	<u> </u>					(h)	Description				
0	OF	(a)	Salaries/Wa		ted at the top of this	s schedule)	(0)	Description	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Salaries/Wa	iges/contra						officeholder living		
								Campaign sta	aff			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nai	me	Office sou	ught			Office he	eld	
	Date		Payee name									
	05/23/2024		Gusto									
	Amount (\$)		Payee addre	ss; City;	St	ate; Zip Co	ode					
	\$600.00		525 20th St	-		, p						
	+000100		010 100.00									
			San Francis	sco, CA 942	107							
	PURPOSE OF EXPENDITURE	(a)	Category (S Salaries/Wa		ited at the top of this act Labor	s schedule)	(b)			de of Texas. Com		
								Campaign sta		officeholder living	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder nai	me	Office sou	l .ght			Office he	eld	
	Date		Payee name									
	05/23/2024		Gusto									
	Amount (\$)		Payee addre	ss; City;	St	ate; Zip Co	nde					
	\$600.00		525 20th St		01	uie, 2ip ot	Juc					
	\$000.00		020 2011 01									
			San Francis	sco, CA 94	107							
	PURPOSE OF				ted at the top of this	s schedule)	(b)	Description				
	EXPENDITURE		Salaries/Wa	ages/Contra	act Labor					de of Texas. Com		
								Campaign sta		officeholder living	Гелрепзе	
								Sampaign St				
	Complete ONLY if direct	L	Candidate/Off	ceholder no	me	Office sou	l Iabt			Office he	J	
	expenditure to benefit C/OF		anuiuale/UII	centruer fial		Unice SUL	igiit			Once he		

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 13/36 Rpt:	Cook, Molly C. (Ms.)	00086313
4	Date 05/23/2024	Payee name Gusto	
6	Amount (\$) \$560.00	Payee address;       City;       State;       Zip Code         525 20th St       San Francisco, CA 94107	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/23/2024	Gusto	
	Amount (\$) \$600.00	Payee address;City;State;Zip Code525 20th St	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date 05/23/2024	Payee name Gusto	
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 525 20th St	
		San Francisco, CA 94107	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPEN	DITURE CATEGO	ORIES FOR	RBO	X 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			nmittee	Event Expens Fees Food/Beverag Gift/Awards/M Legal Services	e e Expense emorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/M	aymer rhead pense (pense /ages/	t/Reimbursement /Rental Expense e /Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 14/36 Rpt:		Cook, Moll	/ C. (Ms.)						00086313	
4	Date	5	Payee name	•							
	05/23/2024		Gusto								
6	Amount (\$)	7	Payee addre	ess; City	r; State	e; Zip Co	de				
	\$880.00		525 20th S	t							
			San Franci	sco, CA 94	107						
8	PURPOSE	(a)	Category (s	ee Categories I	isted at the top of this so	chedule)	(b)	Description			
	OF EXPENDITURE		Salaries/W							de of Texas. Comp	
										officeholder living	expense
								Campaign sta	111		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder na	ame	Office sou	ght			Office he	ld
	Date		Payee name								
	05/30/2024		Gusto								
	Amount (\$)		Payee addre	ess; City	r; State	e; Zip Co	de				
	\$1,250.00		525 20th S	t							
			San Franci	sco, CA 94	107						
	PURPOSE OF EXPENDITURE	(a)	Category (S Salaries/W		isted at the top of this so ract Labor	chedule)			, TX,	de of Texas. Comp officeholder living	
	Complete ONLY if direct		andidate/Of	iceholder na	ame	Office sou	aht			Office he	ld
	expenditure to benefit C/OI	Н					0				
	Date		Payee name								
	05/30/2024		Gusto								
	Amount (\$)		Payee addre	ess; City	r State	e; Zip Co	de				
	\$9,371.02		525 20th S		, 0.00	o,p oo					
	+0,01 -10-		010 100.0	•							
			San Franci	sco, CA 94	107						
	PURPOSE OF	(a)			isted at the top of this so	chedule)	(b)	Description	ou et - 1	do of Toylog Or	alata Sabadula T
	EXPENDITURE		Salaries/W	ages/Cont	ract Labor				, тх,	de of Texas. Comp officeholder living	
	Complete ONLY if direct		Candidate/Off	iceholder na	ame	Office sou	ght			Office he	ld
	expenditure to benefit C/OI	Н					-'				

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

			EXPENDITURE C	CATEGORIES F	OR BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Office Polling ense Printin Salarie	Dverhead Expense Expense (Expense) S/Wages	e /Contract Labor		Travel in District Travel Out of Dis	quipment & Relate	
1	Total pages Schedule F1:	2 FILER NA	ME				3	Filer ID	(Ethics Comm	nission Filers)
-	Sch: 15/36 Rpt:		olly C. (Ms.)					00086313	(20000000000	
4	Date 05/30/2024	5 Payee na Gusto	me							
6	Amount (\$)	7 Payee ad	dress; City;	State; Zip	ode					
Ū	\$2,653.01	525 20th		State, Zip	Joue					
•	DUDDOCE				(b)	<b>D</b>				
8	PURPOSE OF EXPENDITURE		(See Categories listed at the to Wages/Contract Labo		(0)		, TX, c	e of Texas. Com officeholder living	plete Schedule T. expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office s	ought			Office he	eld	
	Date	Payee na	me							
	05/31/2024	Gusto								
	Amount (\$)	Payee ad	dress; City;	State; Zip	Code					
	\$740.00	525 20th	-							
	PURPOSE OF EXPENDITURE		(See Categories listed at the to Wages/Contract Labo		(b)			e of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name	Office s	ought			Office he	eld	
	Date	Payee na	me							
	05/31/2024	Gusto								
	Amount (\$) \$740.00	Payee ad 525 20th		State; Zip	Code					
		San Fra	ncisco, CA 94107							
	PURPOSE OF EXPENDITURE		(See Categories listed at the to Wages/Contract Labo		(b)			e of Texas. Com officeholder living	plete Schedule T. I expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Officeholder name	Office s	ought			Office he	eld	

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By 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: 16/36 Rpt:	Cook, Molly C. (Ms.) 00086313
4	Date 05/31/2024	5 Payee name Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	525 20th St
		San Francisco, CA 94107
_		
8	PURPOSE OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description</li> <li>Check if travel outside of Texas. Complete Schedule T.</li> </ul>
	EXPENDITURE	
		contractor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/31/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	525 20th St
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	-	Check if Austin, TX, officeholder living expense contractor
		Contractor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4
	Date	Payee name
	05/31/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$740.00	525 20th St
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	ſ	Check if Austin, TX, officeholder living expense contractor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPENDIT	URE CATEGO	RIES FOR	вс	DX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comr Credit Card Payment			nmittee	Fees         Office Overhead/Rental Expense         Transportati           Food/Beverage Expense         Polling Expense         Travel in Dis           Gift/Awards/Memorials Expense         Printing Expense         Travel Out of						Travel in District Travel Out of Dist	uipment & Related Expens	se
1	Total pages Schedule F1:	2	FILER NAME	:			-		3	Filer ID	(Ethics Commission F	ilers)
-	Sch: 17/36 Rpt:	-	Cook, Molly							00086313	(	
4	Date 05/31/2024	5	Payee name Gusto									
6	Amount (\$) \$740.00		Payee addres 525 20th St San Francis			; Zip Coo	de					
•	DUDDOCE					<u> </u>	(1-)					
8	PURPOSE OF EXPENDITURE	(a)		ee Categories listed ages/Contrac	at the top of this sch t Labor	nedule)	(D)			de of Texas. Comp officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offi	ceholder name	e (	Office soug	ght			Office he	ld	
	Date		Payee name									
	05/31/2024		Gusto									
	Amount (\$)		Payee addres	ss; City;	State	; Zip Coo	de					
	\$540.00		525 20th St	-								
	PURPOSE OF EXPENDITURE	(a)		e Categories listed	at the top of this sch t Labor	nedule)	(b)			de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offi	ceholder name	e (	Office soug	ght			Office he	ld	
	Date		Payee name									
	05/31/2024		Gusto									
	Amount (\$) \$680.00		Payee addres 525 20th St		State	; Zip Coc	de					
			San Francis	co, CA 9410	7							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed ages/Contrac	at the top of this sch t Labor	nedule)	(b)			de of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offi	ceholder name	e (	Office soug	ght			Office he	ld	

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By 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: Sch: 18/36 Rpt:	2       FILER NAME       3       Filer ID       (Ethics Commission Filers)         Cook, Molly C. (Ms.)       00086313
4	Date	5 Payee name
	05/31/2024	Gusto
6	Amount (\$) \$440.00	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
0	OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense contractor</li> </ul> </li> </ul>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/31/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$740.00	525 20th St San Francisco, CA 94107
	PURPOSE	
	OF	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense contractor</li> </ul> </li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/31/2024	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$660.00	525 20th St
		San Francisco, CA 94107
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense contractor</li> </ul> </li> </ul>
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Transportation Equipment & Related Expense Travel in District Travel Out of District			
	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 Filer	s)			
	Sch: 19/36 Rpt:	Cook, Molly C. (Ms.) 00086313				
4	Date 05/31/2024	5 Payee name Gusto				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$740.00	525 20th St				
		San Francisco, CA 94107				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor				
		contractor				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	05/31/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	525 20th St				
		San Francisco, CA 94107				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
		Check if Austin, TX, officeholder living expense contractor				
		Contractor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	05/31/2024	Gusto				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$740.00	525 20th St				
		San Francisco, CA 94107				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		contractor				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held H				
-						

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

		EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitt/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)							
	Sch: 20/36 Rpt:	Cook, Molly C. (Ms.) 00086313								
4	Date 05/31/2024	Payee name Gusto								
6	Amount (\$)	' Payee address; City; State; Zip Code								
	\$720.00	525 20th St San Francisco, CA 94107								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense contractor										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/03/2024	Gusto								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$440.00	525 20th St San Francisco, CA 94107								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	06/05/2024	Gusto								
	Amount (\$) \$443.46	Payee address; City; State; Zip Code 525 20th St								
		San Francisco, CA 94107								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense rroll							
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburs Fees Office Overhead/Rental Exp Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract L The Instruction Guide explains how to complete this for	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
	Tatal yang Oshadula Et.	· · ·		Filer ID (Ethics Commission Filers)					
1	Total pages Schedule F1: Sch: 21/36 Rpt:	2     FILER NAME     3     Filer ID (Ethics Commonweak Control (Ethics (Ethics Control (Ethics (Ethics (Ethics (Ethics (Ethics (							
4	Date	Payee name	•						
	06/13/2024	Gusto							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	525 20th St							
		San Francisco, CA 94107							
8	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE			de of Texas. Complete Schedule T.					
			tor payro	officeholder living expense					
		Contract	loi puyio						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office held					
	Date	Payee name							
	06/14/2024	Gusto							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,022.29	525 20th St							
		San Francisco, CA 94107							
	PURPOSE OF	(b) Descrip		de ef Teuros, Consellado Colocado la T					
	EXPENDITURE			de of Texas. Complete Schedule T. officeholder living expense					
			tor payro						
			- 12 -						
	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office held					
	expenditure to benefit C/OI								
	Date	Device reme							
	06/14/2024	Payee name Gusto							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,983.44	525 20th St							
		San Francisco, CA 94107							
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description	on						
	OF EXPENDITURE			de of Texas. Complete Schedule T.					
	EXPENDITORE			officeholder living expense					
		staff pa	yroll						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought		Office held					
	enponditure to benefit 0/01								

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPE	NDITURE CAT	TEGORI	ES FOR	во	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense Printing Expense							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2									(Ethics Commission Filers)	
	Sch: 22/36 Rpt:		Cook, Molly		)						00086313	
4	Date	5	Payee name									
	06/17/2024		Gusto									
6	Amount (\$)	7	Payee addre	ss; Ci	ity;	State;	Zip Coo	le				
	\$140.00		525 20th S	t								
			San Franci	sco, CA 🤉	94107							
8	PURPOSE	(a)	Category (S	ee Categorie	s listed at the top of	of this sched	lule)	(b)	Description			
	OF EXPENDITURE		Salaries/W	ages/Cor	ntract Labor							plete Schedule T.
									contractor pa		officeholder living	j expense
										. <b>.</b>		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Off	iceholder	name	Off	fice soug	jht			Office h	eld
	Date		Payee name									
	06/18/2024		Gusto									
	Amount (\$)		Payee addre	ss; Ci	ity;	State;	Zip Coo	le				
	\$7,500.00		525 20th S	t								
			San Franci	sco, CA 9	94107							
	PURPOSE OF EXPENDITURE				s listed at the top of ntract Labor	f this sched	lule)				de of Texas. Com officeholder living	nplete Schedule T. g expense
	Complete ONIL V if direct		andidata/Off	iaabaldar		0#	fine cours	(ht			Office b	ald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Off	Icenoider	name	OII	fice soug	jrit			Office h	eiu
	Data											
	Date 06/27/2024		Payee name Gusto									
	Amount (\$)		Payee addre		ity;	Stato:	Zip Coo	10				
	\$682.33		525 20th S		ity,	Slale,	Zip Cut	Je				
	\$00Z.33		525 2011 5	L								
			San Franci	sco, CA 🤅	94107							
	PURPOSE OF				s listed at the top of	of this sched	lule)	(b)	Description		do of Tours	valata Cabadul- T
	EXPENDITURE		Salaries/W	ages/Cor	ntract Labor						officeholder living	nplete Schedule T.
									Contractor pa			<u> </u>
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Off	iceholder	name	Off	fice soug	jht			Office h	eld

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

			I	EXPENDITURE C	ATEGOR	RIES FOR	BC	DX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Credit Card Payment			Fees Food Gift/ mmittee Lega	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Co	mmission Filers)
	Sch: 23/36 Rpt:		Cook, Molly C.	(Ms.)						00086313		
4	Date 06/27/2024	5	Payee name Gusto									
6	Amount (\$) \$2,982.94	7	Payee address; 525 20th St San Francisco,	City; CA 94107	State;	; Zip Coo	de					
8	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See Ca</sub> Salaries/Wages	tegories listed at the to s/Contract Labo		edule)	(b)			de of Texas. Com officeholder living		e T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	C	Office soug	ght			Office he	eld	
	Date		Payee name									
	05/28/2024		HEB									
	Amount (\$) \$9.54		Payee address; 1701 W Alabar Houston, TX 77		State;	; Zip Coo	de					
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See Ca</sub> Food/Beverage		p of this sch	edule)	(b)		, TX,	de of Texas. Comp officeholder living AIGN EVEN	expense	e T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	C	Office soug	ght			Office he	eld	
	Date		Payee name						_			
	06/03/2024		Heights & Co									
	Amount (\$) \$298.65		Payee address; 1343 Yale ST	City;	State;	; Zip Coo	de					
			Houston, TX 77	2008								
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(See Ca</sub> Food/Beverage		p of this sch	edule)			, TX,	de of Texas. Com officeholder living campaign e	expense	e T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeh	older name	C	Office soug	ght			Office he	eld	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 24/36 Rpt:		Cook, Molly C. (Ms.)					00086313	、		
4	Date	5	Payee name								
	06/21/2024		Houston GLBT Political Caucus PAC	2							
6	Amount (\$) \$40.00 7 Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266										
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee       (b) Description         Image: Contribution of the schedule of the											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office he	eld		
	Date		Payee name								
	05/24/2024		Johnson, Natasha								
⊢	Amount (\$)		Payee address; City; Sta	ate; Zip	Code						
	\$1,100.00		2503 Park St Houston, TX 77006								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this Food/Beverage Expense	schedule)	(b)		, TX	ide of Texas. Com , officeholder living atering			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office he	eld		
	Date		Payee name								
	05/20/2024		LYFT.Com								
	Amount (\$) \$18.00	I	Payee address; City; Sta 185 Berry St	ate; Zip	Code						
			San Francisco, CA 94107								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Transportation Equipment And Rela Expense					ide of Texas. Com , officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office s	ought			Office he	eld		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/F Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	e Expense	Loan Repa Office Over Polling Exp Printing Ex Salaries/W	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis		
1 Total pages Schedule	F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)	
Sch: 25/36 Rpt:		Cook, Mol	Cook, Molly C. (Ms.) 00086313							
4 Date	1	Payee nam	е							
05/20/2024		LYFT.Com	ı							
6 Amount (\$)		7 Payee addr	ess; City;	State;	Zip Co	le				
\$9.	00	185 Berry	St							
		San Franc	isco, CA 94107							
8 PURPOSE		(a) Category	See Categories listed at the	e top of this sch	(aluba	<b>b)</b> Description				
OF			ation Equipment A		,		outs	ide of Texas. Com	plete Schedule T.	
EXPENDITURE		Expense				Check if Austir	ı, TX	, officeholder living	) expense	
						ride share				
9 Complete <u>ONLY</u> if dire expenditure to benefit		Candidate/Of	ficeholder name	С	Office soug	ht		Office he	eld	
Date		Payee nam	e							
05/22/2024		LYFT.Com	ı							
Amount (\$)		Payee addr	ess; City;	State;	Zip Co	le				
\$9.	00	185 Berry	St							
		,								
		San Franc	isco, CA 94107							
PURPOSE		( <b>a)</b> Category (	See Categories listed at the	e top of this sche	edule)	<b>b)</b> Description				
OF EXPENDITURE			ation Equipment A	nd Related	I			ide of Texas. Com		
		Expense				ride share	1, TX	, officeholder living	j expense	
						nue snare				
Complete ONLY if dire		Candidato/Ot	ficeholder name		Office soug	ht		Office he	ald	
expenditure to benefit		Candidate/O	ncenoidel name		Since Sout	in the second seco		Onice ne	eiu	
Date		Dougo nor								
Date 05/23/2024		Payee name								
Amount (\$)		Payee addr		State;	Zip Co	le				
\$9.	00	185 Berry	St							
		San Franc	isco, CA 94107							
PURPOSE	T	( <b>a)</b> Category (	See Categories listed at the	e top of this sche	edule)	<b>b)</b> Description				
OF EXPENDITURE			ation Equipment A	nd Related	I			ide of Texas. Com		
		Expense				Ride Share	1, I X	, officeholder living	j expense	
						Rive Shale				
Complete ONU V if alive		Candidata/O	ficoboldor nome		)ffico cour	ht		Office	ald	
Complete <u>ONLY</u> if dire expenditure to benefit		Canuluate/Of	ficeholder name	C	Office soug	in in		Office he	eiu	
-										

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       y -     Gift/Awards/Memorials Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	(Ethics Commission Filers)
	Sch: 26/36 Rpt:		Cook, Moll	y C. (Ms	.)						00086313	
4	Date	5	Payee name	•								
	05/24/2024		LYFT.Com									
6	Amount (\$)	7	Payee addre	ess; C	City;	State;	Zip Co	de				
	\$17.00		185 Berry S	St								
			San Franci	sco, CA	94107							
8	PURPOSE	(a)	Category (S	See Categori	ies listed at the top	o of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Transporta		ipment And							nplete Schedule T.
			Expense						Ride share	, TX,	officeholder livin	g expense
									Rive Share			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ïceholder	name	0	office sou	ght			Office h	eld
	Date		Payee name	)								
	05/28/2024		LYFT.Com									
	Amount (\$)		Payee addre	ess; (	City;	State;	Zip Co	de				
	\$26.00		185 Berry S	St								
			San Franci	sco, CA	94107							
	PURPOSE OF EXPENDITURE	(a)			ies listed at the top lipment And		'				de of Texas. Con , officeholder livin	nplete Schedule T. g expense
	Complete ONLY if direct		Candidate/Off	iceholder	name	0	office sou	ght			Office h	eld
	expenditure to benefit C/OI	Н										
	Date		Payee name	;								
	05/28/2024		LYFT.Com									
	Amount (\$)		Payee addre	ess; C	City;	State;	Zip Co	de				
	\$13.00		185 Berry S	St								
			San Franci	sco, CA	94107							
	PURPOSE OF	(a)	Category (S	See Categori	ies listed at the top	o of this sche	edule)	(b)	Description			
	EXPENDITURE		Transporta Expense	tion Equ	ipment And	Related			Check if Austin		de of Texas. Con officeholder livin	nplete Schedule T. g expense
									ride share			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder	name	0	office sou	ght			Office h	eld
	coperionare to benefit C/Of											

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDIT	JRE CATEGOR	RIES FOF	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense         Loan Repayment/Reimbursement         Solicitation/F           Fees         Office Overhead/Rental Expense         Transportati           Food/Beverage Expense         Polling Expense         Travel out o bis           Gift/Awards/Memorials Expense         Printing Expense         Travel Out o					Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 27/36 Rpt:		Cook, Molly	C. (Ms.)						00086313	
4	Date	5	Payee name								
	05/30/2024		LYFT.Com								
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de				
	\$30.00		185 Berry S	it							
			San Francis	sco, CA 94107	7						
8	PURPOSE	(a)	Category (s	ee Categories listed	at the top of this sch	odulo)	(b) Descri	ntion			
	OF	ľ		ion Equipmen					outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Expense						, TX,	officeholder living	expense
							ride sl	hare			
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								eld		
	Date		Payee name								
	05/31/2024		LYFT.Com								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	de				
	\$18.00		185 Berry S	it							
			San Francis	sco, CA 94107	7						
	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sch	edule)	(b) Descri	ption			
	OF EXPENDITURE			ion Equipmen		<i>'</i>	_		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE		Expense						, TX,	officeholder living	expense
							ride sl	hare			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	(	Office sou	ght			Office he	eld
		-									
	Date		Payee name	4							
	05/22/2024		Michel, Brya								
	Amount (\$)		Payee addres			Zip Co	de				
	\$2,880.00			n Houston Pa	irkway						
			Suite #289								
			Houston, T	K 77004							
	PURPOSE OF	(a)		ee Categories listed		edule)	(b) Descri	•			
	EXPENDITURE		Salaries/Wa	ages/Contract	Labor					de of Texas. Com	
									, IX,	officeholder living	expense
							Contra				
	Complete ONLY if direct	L	Candidate/Offi	ceholder name		Office sou	nht			Office he	ald
	expenditure to benefit C/OF				(	-mec 300	9'''				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPENDIT	URE CATEGO	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tra           Food/Beverage Expense         Polling Expense         Tra           y -         Gift/Awards/Memorials Expense         Printing Expense         Tra					Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 28/36 Rpt:		Cook, Moll	y C. (Ms.)					00086313	
4	Date	5	Payee name	9				I		
	06/03/2024		NGP VAN							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de			
	\$373.10		655 15th S	t NW						
			Washingto	n, DC 20005						
8	PURPOSE	(a)	Category (s	See Categories listed	at the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Fees			,	Check if travel		de of Texas. Com	
									officeholder living	expense
							Fundraising s	δΟΠ	ware	
0	Complete ONIL V if direct		Condidate/Of	ficeholder nome			. ht		Office he	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Januluale/OI	ficeholder name		Office sou	jiit.		Onice he	910
	Date		Payee name	9						
	05/22/2024		Office Max							
	Amount (\$)		Payee addr	ess; City;	State;	; Zip Co	de			
	\$17.93		1576 W Gi	ау						
			Houston, T	X 77019						
	PURPOSE OF EXPENDITURE			See Categories listed rhead/Rental		edule)		, TX,	de of Texas. Com officeholder living	
	Complete ONLY if direct		Candidate/Of	ficeholder name	. (	Dffice sou	iht		Office he	eld
	expenditure to benefit C/OI				-		,			
	Date	Γ	Payee name	2						
	05/22/2024		Office Max							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le			
	\$136.40		1576 W Gi			,p				
				)						
			Houston, T	X 77019						
	PURPOSE OF			See Categories listed		edule)	(b) Description			
	EXPENDITURE		Office Ove	rhead/Rental	Expense			, тх,	de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholder name	· (	Office sou	ŋht		Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2				İ	2	Filer ID	(Ethics Commission Filers)
1		<b> </b> <sup>2</sup>					3		
	Sch: 29/36 Rpt:		Cook, Molly C. (Ms.)					00086313	
4	Date	5	Payee name						
	05/30/2024		Patterson Park Houston						
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode				
-	\$255.03		2205 Patterson St	, ,					
	\$200,000								
			Houston, TX 77007						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	OF EXPENDITURE		Food/Beverage Expense			Check if travel of	outsi	de of Texas. Com	plete Schedule T.
	LAFENDITORE							officeholder living	
						refreshemnts	for	r campaign e	event
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sou	ight			Office he	eld
	Date	Γ	Payee name						
	06/03/2024		Rice-parking Houston						
		┢		a Zin Ca	- do				
	Amount (\$)			e; Zip Co	Jue				
	\$12.00		6100 Main St						
			Houston, TX 77005						
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	bodulo)	(b)	Description			
	OF	Ľ	Transportation Equipment And Relate		Ľ		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Expense	a		Check if Austin,	TX,	officeholder living	expense
						parking			
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l Jaht			Office he	eld
	expenditure to benefit C/Oł				.9				
_		-							
	Date		Payee name						
	06/05/2024		Scale to Win						
	Amount (\$)		Payee address; City; State	e; Zip Co	ode				
	\$813.04		13742 Harper St						
			Santa Ana, CA 92703						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Fees					de of Texas. Com	
								officeholder living	expense
						Campaign tex	\ull	y service	
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ight			Office he	eld
	expenditure to benefit C/OI	п							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1		
	Sch: 30/36 Rpt:	Cook, Molly C. (Ms.) 00086313
4	Date	5 Payee name
	06/04/2024	Scootaround
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ		
	\$258.00	El Paso Convention Center
		El Paso, TX 79901
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
-	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Accesibility sponsorship, Texas Democratic
		Convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OF	
_	Date	Payee name
	05/24/2024	Shell
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.49	11203 Northwest Fwy
		Houston, TX 77092
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		gas for campaign travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	5
	Date	Payee name
	05/31/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$444.97	2702 Love Field Drive
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		campaign travel for convention
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	Π

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				Transportation E Travel in District Travel Out of Dis	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
	<b>T</b> ( <b>1 1 1 1 1</b>		•	•				
1	Total pages Schedule F1:				3 Filer ID	(Ethics Commission Filers)		
	Sch: 31/36 Rpt:	Cook, Molly C. (Ms.)			00086313			
Δ	Date	Payee name			1			
	05/31/2024	Southwest Airlines						
6	Amount (\$)	Payee address; City;	State; Zip Co	ode				
	\$444.97	2702 Love Field Drive						
		Dallas, TX 75235						
8	PURPOSE	Category (See Categories listed at the to	on of this schedule)	(b) Description				
	OF	Travel Out of District	p of this schedule)		outside of Texas. Com	plete Schedule T.		
	EXPENDITURE	Haver out of District			n, TX, officeholder living			
				Campaign tra	avel for convent	tion		
_								
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sou	ight	Office he	eld		
	Date	Payee name						
		•						
	05/21/2024	Squarespace						
	Amount (\$)	Payee address; City;	State; Zip Co	ode				
	\$35.18	225 Varick Street						
		New York, NY 10014						
	PURPOSE	Category (See Categories listed at the to	op of this schedule)	(b) Description				
	OF	Fees		Check if travel	outside of Texas. Com	plete Schedule T.		
	EXPENDITURE			Check if Austir	n, TX, officeholder living	g expense		
				Domain nam	e ans website			
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	l vaht	Office he	Jd		
	expenditure to benefit C/Oł		Office Sol	igin	Onice ne	siu		
	Date	Payee name						
	06/04/2024	Squarespace						
	۸ ma a unat (ش)		Ctata: Zia C					
	Amount (\$)	Payee address; City;	State; Zip Co	de				
	\$0.51	225 Varick Street						
		New York, NY 10014						
				<b>"</b>				
	PURPOSE OF	Category (See Categories listed at the to	op of this schedule)	(b) Description				
	EXPENDITURE	Fees			outside of Texas. Com			
	Check if Austin, 1X, officeholder living expense							
	domain name and website							
	Complete ONLY if direct	Candidate/Officeholder name	Office sou	ight	Office he	eld		
	expenditure to benefit C/Oł			~				
_								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 32/36 Rpt:	Cook, Molly C. (Ms.) 00086313						
4 Date	5 Payee name						
06/06/2024	Squarespace						
6 Amount (\$) \$85.73	7 Payee address; City; State; Zip Code 225 Varick Street New York, NY 10014						
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense domain name and website</li> </ul> </li> </ul>						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
06/06/2024	Squarespace						
Amount (\$)	Payee address; City; State; Zip Code						
\$6.50	225 Varick Street New York, NY 10014						
PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Fees       (b) Description         (b) Description       Check if travel outside of Texas. Complete Schedule T.         (c) Check if Austin, TX, officeholder living expense       domain name and website							
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
06/21/2024	Squarespace						
Amount (\$)	Payee address; City; State; Zip Code						
\$35.18	225 Varick Street						
	New York, NY 10014						
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense domain name and website</li> </ul> </li> </ul>						
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 33/36 Rpt:	Cook, Molly C. (Ms.)	00086313					
4	Date	Payee name						
-	06/12/2024	Stewart-Aday, Jamie						
6	Amount (\$)	-						
U	\$750.95	7 Payee address; City; State; Zip Code 2503 Park Houston, TX 77019						
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Travel Out of District						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/21/2024	Stokes, Lucille						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$600.00	814 Eagles Glide Dr Houston, TX 77090						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	05/28/2024	Stokes, Lucille						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$880.00	814 Eagles Glide Dr						
		Houston, TX 77090						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politic Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 34/36 Rpt:	Cook, Molly C. (Ms.) 00086313						
4 Date	5 Payee name						
05/30/2024	Stokes, Lucille						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$1,160.00	814 Eagles Glide Dr						
\$1,100.00							
	Houston, TX 77090						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
EXPENDITORE	Check if Austin, TX, officeholder living expense						
	Contractor						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held H						
Data							
Date	Payee name						
05/30/2024	Stokes, Sharita						
Amount (\$)	Payee address; City; State; Zip Code						
\$240.00	6301 Ezzard Charles Ln						
	Houston, TX 77091						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Salaries/Wages/Contract Labor						
	Check if Austin, TX, officeholder living expense						
	Contractor						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/C	H						
Date	Payee name						
05/22/2024	Payee name Veritex Bank						
05/22/2024							
Amount (\$)	Payee address; City; State; Zip Code						
\$10.00	4000 Greenbriar						
	Houston, TX 77098						
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 Wire transfer fee						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/C	n						

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1 Total pages Cabadula E1;							
1 Total pages Schedule F1:							
Sch: 35/36 Rpt:	Cook, Molly C. (Ms.) 00086313						
4 Date	5 Payee name						
06/13/2024	Veritex Bank						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$10.00	4000 Greenbriar						
φ10.00	4000 Oreenblidi						
	Houston, TX 77098						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Check if Austin, TX, officeholder living expense						
	wire transfer fee						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
05/28/2024	Walgreens						
Amount (\$)	Payee address; City; State; Zip Code						
\$31.97	1919 West Gray						
	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.						
EXPENDITORE	Check if Austin, TX, officeholder living expense						
	food for campaign event						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O	4						
Data	Deuroe norma						
Date	Payee name						
05/30/2024	Washington, Carshonda						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,160.00	505 Wells Fargo Dr						
	houston, TX 77090						
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
	Constructor						
	Contractor						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O							

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Committee Legal Services Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District 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: 36/36 Rpt:		Cook, Molly C. (Ms.)				00086313	
4	Date	5	Payee name					
7	06/04/2024	ľ	Williams, Cordelia					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
	\$300.00		4315 Bayou Vista Dr					
			Houston, TX 77091					
8	DUDDOCE				(h) p : : ::			
ð	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	oute	ide of Texas. Com	nloto Schodulo T
	EXPENDITURE		Food/Beverage Expense				, officeholder living	
					catering-seni			
					eaternig een	••••		
_	Operation ONITY if all an at				.1-4		0#***	1.1
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	int		Office he	210
	Date		Payee name					
	06/05/2024		Zoom.US					
-	Amount (\$)		Payee address; City; State;	Zip Co	le			
	\$34.10		55 Almaden Boulevard	p 00				
	ψ54.10		33 Aimaden Boulevard					
			San Jose, CA 95113					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF EXPENDITURE		Fees				ide of Texas. Com	
							, officeholder living	expense
					video confere	enc	ing service	
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght		Office he	eld
	expenditure to benefit C/OI	-						
_	Date		Payee name					
	06/11/2024		tinyurl.com					
			•					
	Amount (\$)			Zip Co	de			
	\$12.99		3916 North Potsdam Avenue Suite 453	35				
			Sioux Falls, SD 57104					
-	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description			
	OF		Fees	euule)		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE Fees Concern a decide of rotation of the concern a decide of the concern a dec						expense	
					software			
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name C	Office sou	iht		Office he	bld
	expenditure to benefit C/OI				j			~~~