

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME Storey Cook 16 Filer ID (Ethics Commission Filers)

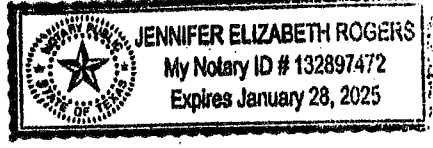
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 190
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5,268.25
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,824.75
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,221.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Storey Cook
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Storey Cook this the 4th day of April 2024, to certify which, witness my hand and seal of office.
Jennifer Elizabeth Rogers Jennifer Elizabeth Rogers Notary Public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

(2) Unsworn Declaration

My name is _____, and my date of birth is _____
 My address is _____
 (street) (city) (state) (zip code) (country)
 Executed in _____ County, State of _____, on the _____ day of _____, 20_____
 (month) (year)

 Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Storey Cook	20 Filer ID (Ethics Commission Filers)
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21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,760.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 408.25
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,824.75
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 195.85
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **6**

2 FILER NAME

Storey Cook

3 Filer ID (Ethics Commission Filers)

4 Date

1/17/24

5 Full name of contributor

Sandi Remson

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

Woodway

TX

76712

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/17/24

Full name of contributor

Whitney McHenry

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250

Contributor address;

City;

State;

Zip Code

Woodway

TX

76712

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/24

Full name of contributor

Allison Green

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

Woodway

TX

76712

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/24

Full name of contributor

Kent McKeever

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

Woodway

TX

76712

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Storey Cook		3 Filer ID (Ethics Commission Filers)
4 Date 1/17/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken Sury	7 Amount of contribution (\$) \$30
6 Contributor address; City; State; Zip Code Woodway TX 76712		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 1/18/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Swartz	Amount of contribution (\$) \$150
Contributor address; City; State; Zip Code Woodway TX 76712		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 2/22/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carla and Van Gray	Amount of contribution (\$) \$400
Contributor address; City; State; Zip Code Woodway TX 76712		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 3/1/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaitlyn and David Mercer	Amount of contribution (\$) \$2,500
Contributor address; City; State; Zip Code Woodway TX 76712		

Principal occupation / Job title (See Instructions) Builder/Contractor	Employer (See Instructions) Merck General Contracting
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Storey Cook		3 Filer ID (Ethics Commission Filers)
4 Date 3/5/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Wilson	7 Amount of contribution (\$) \$25
	6 Contributor address; City; State; Zip Code [REDACTED] Woodway TX 76712	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/7/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham Cook	Amount of contribution (\$) \$5
	Contributor address; City; State; Zip Code [REDACTED] Woodway TX 76712	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/7/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larkin Timmerman	Amount of contribution (\$) \$25
	Contributor address; City; State; Zip Code [REDACTED] Woodway TX 76712	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/9/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron and Sara Cook	Amount of contribution (\$) \$100
	Contributor address; City; State; Zip Code [REDACTED] Hewitt TX 76643	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 6

2 FILER NAME

Storey Cook

3 Filer ID (Ethics Commission Filers)

4 Date

3/10/24

5 Full name of contributor

Marci Roe

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$25

6 Contributor address;

City;

State;

Zip Code

[REDACTED]

Frisco

TX

75036

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/18/24

Full name of contributor

Kary Lalani

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$250

Contributor address;

City;

State;

Zip Code

[REDACTED]

Woodway

TX

76712

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/24

Full name of contributor

Katherine Haynes

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

[REDACTED]

Woodway

TX

76712

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/28/24

Full name of contributor

Lynsie Gomez

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$25

Contributor address;

City;

State;

Zip Code

[REDACTED]

Hewitt

TX

76643

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 6

2 FILER NAME

Storey Cook

3 Filer ID (Ethics Commission Filers)

4 Date

4/3/24

5 Full name of contributor

Kent Reynolds

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City;

State;

Zip Code

[REDACTED]

Belton

TX

76513

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/3/24

Full name of contributor

Hector Retta

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$50

Contributor address;

City;

State;

Zip Code

[REDACTED]

El Paso

TX

79902

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/3/24

Full name of contributor

Silas Ragsdale

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

[REDACTED]

Childress

TX

79201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/3/24

Full name of contributor

Alan Brown

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City;

State;

Zip Code

[REDACTED]

Tyler

TX

75701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 6

2 FILER NAME

Storey Cook

3 Filer ID (Ethics Commission Filers)

4 Date

4/3/24

5 Full name of contributor

George Cowden

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

\$100

6 Contributor address;

City; State; Zip Code

San Antonio TX 78248

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

4/3/24

Full name of contributor

Kim and Gene Wilkes

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$100

Contributor address;

City; State; Zip Code

Plano TX 75023

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/3/24

Full name of contributor

Neal Knighton

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

\$25

Contributor address;

City; State; Zip Code

Waco TX 76708

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <div style="text-align: right;">1</div>	
2 FILER NAME Storey Cook		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 1/17/24	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbara Grandy	8 Amount of Contribution \$ \$408.25	9 In-kind contribution description Event Food/Beverage
7 Contributor address; City; State; Zip Code [REDACTED] Woodway TX 76712		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2	2 FILER NAME Storey Cook	3 Filer ID (Ethics Commission Filers)
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4 Date 2/26/24	5 Payee name Hole in the Roof
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6 Amount (\$) \$110.00	7 Payee address; 1125 Washington Ave.	City; Waco	State; TX	Zip Code 76701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Campaign Buttons
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/12/24	Payee name Hole in the Roof
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Amount (\$) \$3,435.00	Payee address; 1125 Washington Ave.	City; Waco	State; TX	Zip Code 76701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Yard Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/12/24	Payee name Hole in the Roof
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Amount (\$) 1,023.30	Payee address; 1125 Washington Ave.	City; Waco	State; TX	Zip Code 76701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Large Campaign Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| 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)
2	Storey Cook	
4 Date	5 Payee name	
1/22/24	Squarespace	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
12.00	225 Varick Street	New York City New York 10014
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Website	Website Domain
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
1/22/24, 2/21/24, 3/21/24	Squarespace	
Amount (\$)	Payee address;	City; State; Zip Code
94.50	225 Varick Street	New York City New York 10014
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Website	Monthly Fee- 3 months
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
3/9/24-4/3/24	Squarespace	
Amount (\$)	Payee address;	City; State; Zip Code
149.95	225 Varick Street	New York City New York 10014
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Fees	Website Donation Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Storey Cook	3 Filer ID (Ethics Commission Filers)
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4 Date 3/29/24	5 Payee name Slow Rise Slice House
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6 Amount (\$) 195.85 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 7608 Woodway Dr.	City; Woodway	State; TX	Zip Code 76712
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Lunch/Soda for Voter Registration Drive
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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