

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**  
COVER SHEET PG 1

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00037628	<b>2</b> Total pages filed:  29
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Sandra J.	MI
	NICKNAME	LAST Peake	SUFFIX
<b>OFFICE USE ONLY</b>			
			Date Received <b>ELECTRONICALLY FILED</b> 07/05/2018
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 9660 Hillcroft St., Ste. 435  Houston, TX 77096		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
			Date Imaged
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST David G.	MI
	NICKNAME	LAST Peake	SUFFIX
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9660 Hillcroft, Ste. 435  Houston, TX 77096		
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(713) 723-5082			
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
<b>9</b> PERIOD COVERED	Month    Day    Year 01/01/2018	THROUGH	Month    Day    Year 06/30/2018
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 11/06/2018		ELECTION TYPE
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
<b>11</b> OFFICE	OFFICE HELD (if any)	<b>12</b> OFFICE SOUGHT (if known) District Judge District 257	

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 29

**13** C / OH NAME Peake, Sandra J. (Mrs.) **14** Filer ID (Ethics Commission Filers)  
00037628

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

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,125.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 80.21
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 10,584.95
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,327.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17** AFFIDAVIT

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

Mrs. Sandra J. Peake  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - JC/OH****FORM JC/OH  
COVER SHEET PG 3**

3 of 29

<b>18 FILER NAME</b> Peake, Sandra J. (Mrs.)		<b>19 Filer ID</b> 00037628	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>	
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	10,025.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	100.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	7,579.36
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	1,295.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	1,710.59
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	200.40
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 1/14 Rpt: 4/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/13/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angela, Lancelin	<b>7</b> Amount of Contribution (\$)  \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77035-0000	
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney at Law
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 03/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Patrice (Ms.)	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Houston, TX 77063-0000	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beachem, Jermecia	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77025-0000	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/14 Rpt: 5/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/13/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostic, Denise (Ms.)	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Stafford, TX 77477	
<b>8</b> Contributor's Principal Occupation Office Manager		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Helen	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code  Houston, TX 77047-0000	
Contributor's Principal Occupation educator		Contributor's Job Title Counselor
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broussard, Olivia	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  Houston, TX 77035-2434	
Contributor's Principal Occupation Retired		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 3/14 Rpt: 6/29
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 05/25/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Sylvia (Ms.)	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Memphis, TN 38111-0000	
8 Contributor's Principal Occupation Chapter 13 Trustee		9 Contributor's Job Title
10 Contributor's employer/law firm n/a		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christy, Reginald (Mr.)	Amount of Contribution (\$)  \$60.00
	Contributor address; City; State; Zip Code  Houston, TX 77004-0000	
Contributor's Principal Occupation retired		Contributor's Job Title real estate investor
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Floretta (Mrs.)	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Spring, TX 77379	
Contributor's Principal Occupation retired educator		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/14 Rpt: 7/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/07/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dent, Sandra (Mrs.)	<b>7</b> Amount of Contribution (\$)  \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Spring, TX 77379-0000	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title retired
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a /a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortson, Alicia	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77047-0000	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatson, Joe	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Houston, TX 77035-0000	
Contributor's Principal Occupation Sr. Manager		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/14 Rpt: 8/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/13/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayder, Sandra	<b>7</b> Amount of Contribution (\$)  \$20.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009-0000	
<b>8</b> Contributor's Principal Occupation National Provider Contracting		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Arlene	Amount of Contribution (\$)  \$40.00
	Contributor address; City; State; Zip Code  Houston, TX 77064-0000	
Contributor's Principal Occupation Tax Specialist		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Courtnee	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Stafford, TX 77477-0000	
Contributor's Principal Occupation business analyst		Contributor's Job Title Analyst
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 6/14 Rpt: 9/29
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 06/13/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Myrna	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77002-0000	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney at Law
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Gail	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Houston, TX 77091-0000	
Contributor's Principal Occupation Retired		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Henri and Warner	Amount of Contribution (\$)  \$200.00
	Contributor address; City; State; Zip Code  Houston, TX 77004-0000	
Contributor's Principal Occupation Educator		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 7/14 Rpt: 10/29
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 06/01/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howerton, Hugh	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code  Houston, TX 77079-0000	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney at Law
10 Contributor's employer/law firm Hugh Howerton, Attorney at Law		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any) n/a n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Chrisalorus (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77089	
Contributor's Principal Occupation self employed independent insurance sales		Contributor's Job Title Christian Counselor
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		
Date 06/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Andrew (Dr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Houston, TX 77071-0000	
Contributor's Principal Occupation Education		Contributor's Job Title Professor
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 8/14 Rpt: 11/29
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 06/13/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Karen and Harold	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code  Humble, TX 77338-0000	
8 Contributor's Principal Occupation Accountant		9 Contributor's Job Title
10 Contributor's employer/law firm n/a		11 Law firm of contributor's spouse (if any) n/a
12 If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Gaye (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Missouri City, TX 77459-0000	
Contributor's Principal Occupation medical support		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Paul	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Houston, TX 77055-3206	
Contributor's Principal Occupation retired		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 9/14 Rpt: 12/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 04/30/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Green Campaign <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006-0000	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Contributor's Principal Occupation		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 05/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamara, Brian <hr/> Contributor address; City; State; Zip Code  Kingwood, TX 77339	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm McNamara Law Office PLLC		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 03/01/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNamara, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code  Kingwood, TX 77339-0000	Amount of Contribution (\$)  \$300.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm McNamara Law Office PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/14 Rpt: 13/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/25/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, jacqueline	<b>7</b> Amount of Contribution (\$) \$200.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77074-0000	
<b>8</b> Contributor's Principal Occupation attorney		<b>9</b> Contributor's Job Title Attorney at Law
<b>10</b> Contributor's employer/law firm Miller Law Firm		<b>11</b> Law firm of contributor's spouse (if any) Miller Law Firm
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Phyllis	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77004-0000	
Contributor's Principal Occupation Investigator		Contributor's Job Title Investigator
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Ruth (Dr.)	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code  Houston, TX 77096-0000	
Contributor's Principal Occupation Educator		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/14 Rpt: 14/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/04/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Joseph (Mr.)	<b>7</b> Amount of Contribution (\$) \$5.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77050-0000	
<b>8</b> Contributor's Principal Occupation Marketing		<b>9</b> Contributor's Job Title n/a
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepolio, Donald	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Pasadena, TX 77502-2828	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/11/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Freddie (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Houston, TX 77071-0000	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/14 Rpt: 15/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/13/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Jon Karen	<b>7</b> Amount of Contribution (\$)  \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Rosenberg, TX 77471-0000	
<b>8</b> Contributor's Principal Occupation retired		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/18/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoler, Leah	Amount of Contribution (\$)  \$150.00
	Contributor address; City; State; Zip Code  Houston, TX 77027-0000	
Contributor's Principal Occupation attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm Linebargar, Heard		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thierry, Bonita (Ms.)	Amount of Contribution (\$)  \$50.00
	Contributor address; City; State; Zip Code  Houston, TX 77002	
Contributor's Principal Occupation attorney		Contributor's Job Title
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 13/14 Rpt: 16/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/22/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Alva <hr/> <b>6</b> Contributor address; City; State; Zip Code  sugarland, TX 77479-0000	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney at Law
<b>10</b> Contributor's employer/law firm self		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Georgia <hr/> Contributor address; City; State; Zip Code  Houston, TX 77021-0000	Amount of Contribution (\$)  \$40.00
Contributor's Principal Occupation Manager		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/04/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Jeanette (Ms.) <hr/> Contributor address; City; State; Zip Code  Houston, TX 77071-0000	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Lab Technician		Contributor's Job Title Lab Tech
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 14/14 Rpt: 17/29
<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/13/2018	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Gloria	<b>7</b> Amount of Contribution (\$)  \$50.00
	<b>6</b> Contributor address; City; State; Zip Code  Missouri City, TX 77459-6243	
<b>8</b> Contributor's Principal Occupation Administrator		<b>9</b> Contributor's Job Title
<b>10</b> Contributor's employer/law firm n/a		<b>11</b> Law firm of contributor's spouse (if any) n/a
<b>12</b> If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Angela (Ms.)	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Katy, TX 77449	
Contributor's Principal Occupation Benefits Manager		Contributor's Job Title
Contributor's employer/law firm n/a		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		
Date 06/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winton, Vanessa	Amount of Contribution (\$)  \$150.00
	Contributor address; City; State; Zip Code  Houston, TX 77253-0000	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney at Law
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) n/a
If contributor is a child, law firm of parent(s) (if any) n/a		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/29	
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/08/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Run Sister Run PAC	8 Amount of contribution (\$) \$100.00	9 In-kind contribution description group photo shoot for endorsed female candidates
	7 Contributor address; City; State; Zip Code  Houston, TX 77266-0000	<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)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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.

<b>1</b>	Total pages Schedule F1: Sch: 1/3 Rpt: 19/29	<b>2</b>	FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00037628	
<b>4</b>	Date 06/14/2018	<b>5</b>	Payee name CVS Pharmacy			
<b>6</b>	Amount (\$) \$98.94	<b>7</b>	Payee address; City; State; Zip Code 9125 Hillcroft  Houston, TX 77096-0000			
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you notes			
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 06/14/2018		Payee name HARRIS COUNTY DEMOCRATIC PARTY 2018 CAMPAIGN			
	Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 1445 N. Loop West, Suite 110  Houston, TX 77008			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coordinated campaign contribution			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 05/14/2018		Payee name HARRIS COUNTY PARTY 2018 CAMPAIGN			
	Amount (\$) \$2,500.00		Payee address; City; State; Zip Code 1445 N. Loop West, Suite 110  Houston, TX 77008			
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contribution to coordinated campaign			
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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.

<b>1</b> Total pages Schedule F1: Sch: 2/3 Rpt: 20/29	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 05/22/2018	<b>5</b> Payee name Print N Sign	
<b>6</b> Amount (\$) \$950.00	<b>7</b> Payee address; City; State; Zip Code 7350 Harwin Dr. Suite 316 A Houston, TX 77036-0000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Promotional items
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/06/2018	Payee name Print N Sign	
Amount (\$) \$530.42	Payee address; City; State; Zip Code 7350 Harwin Dr. Suite 316 A Houston, TX 77036-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense additional pushcards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/16/2018	Payee name RPC Printing	
Amount (\$) \$950.00	Payee address; City; State; Zip Code 4300 Noble  Houston, TX 77020-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense stationary, envelopes and contribution cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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.

<b>1</b> Total pages Schedule F1: Sch: 3/3 Rpt: 21/29	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 03/06/2018	<b>5</b> Payee name SD 17 PAC	
<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 5839 Wigton  Houston, TX 77096-0000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad for SD 17 convention booklet
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/13/2018	Payee name Texas Coalition of Black Democrats Harris County	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 9111 Lakes of 610 #1621 Houston, TX 77054-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV efforts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/14/2018	Payee name Tru Insight	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 6122 Grey Oaks  Houston, TX 77050-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/2 Rpt: 22/29	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 05/31/2018	<b>6</b> Payee name Print N Sign
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<b>7</b> Amount (\$) \$350.00	<b>8</b> Payee address; City; State; Zip Code 7350 Harwin Dr. Suite 316 A Houston, TX 77036-0000
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balance due on table cover & TShirts
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/06/2018	Payee name Print N Sign
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Amount (\$) \$470.00	Payee address; City; State; Zip Code 7350 Harwin Dr. Suite 316 A Houston, TX 77036-0000
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense additional pushcards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/2 Rpt: 23/29	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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<b>5</b> Date 06/04/2018	<b>6</b> Payee name RPC GLOBAL PRINTING
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<b>7</b> Amount (\$) \$175.00	<b>8</b> Payee address; City; State; Zip Code 4800 w. 34TH #C-10 Houston, TX 77092-0000
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	--

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense additional stationary
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/14/2018	Payee name Tru Insight
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000
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<b>TYPE OF EXPENDITURE</b>	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign website assistance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 24/29		<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00037628	
<b>4</b> Date 04/23/2018		<b>5</b> Payee name Aubrey R. Taylor Communications			
<b>6</b> Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; City; State; Zip Code 957 Nasa Parkway Suite 251 Houston, TX 77058-0000			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad in newspaper	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/16/2018		Payee name JFStudioz			
Amount (\$) \$75.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 7322 Southwest Freeway Suite 140 Houston, TX 77072-0000			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Head shot for campaign advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/13/2018		Payee name Prima Pasta			
Amount (\$) \$430.38 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 6811 Kirby Drive Houston, TX 77030-0000			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser 6/13/2018	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**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.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 25/29	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 05/31/2018	<b>5</b> Payee name Print N Sign	
<b>6</b> Amount (\$) \$350.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 7350 Harwin Dr. Suite 316 A Houston, TX 77036-0000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Balance due: Table cover & T-Shirts
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/04/2018	Payee name RPC GLOBAL PRINTING	
Amount (\$) \$175.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4800 w. 34TH #C-10 Houston, TX 77092-0000	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense additional stationary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/19/2018	Payee name Texas Coalition of Black Democrats Harris County	
Amount (\$) \$100.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9111 Lakes of 610 #1621 Houston, TX 77054-0000	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GOTV efforts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/4 Rpt:	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
4 Date 03/31/2018	5 Payee name Bank of America	
6 Amount (\$)  16.00	7 Payee Address; City; State; Zip P. O. Box 15284  Wilmington, DE 19859-0000	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Service fee
Date 02/28/2018	Payee name Bank of America	
Amount (\$)  16.00	Payee Address; City; State; Zip P. O. Box 15284  Wilmington, DE 77709-6386	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) service fee
Date 04/30/2018	Payee name Bank of America	
Amount (\$)  16.00	Payee Address; City; State; Zip P. O. Box 25118  Tampa, FL 19859-0000	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) monthly maintenance fee
Date 06/01/2018	Payee name Bank of America	
Amount (\$)  16.00	Payee Address; City; State; Zip P. O. Box 25118  Tampa, FL 33622-5118	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) monthly maintenance fee

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 2/4 Rpt:	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 06/18/2018	<b>5</b> Payee name Bank of America	
<b>6</b> Amount (\$) 69.00	<b>7</b> Payee Address; City; State; Zip 9660 Hillcroft  Houston, TX 77096-0000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) check order
Date 06/03/2018	Payee name Paypal	
Amount (\$) 6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) processing fee - J. Ware
Date 06/01/2018	Payee name Paypal	
Amount (\$) 6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Processing - E. Davis
Date 06/01/2018	Payee name Paypal	
Amount (\$) 6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) processing - H. Howerton

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 3/4 Rpt:	<b>2</b> FILER NAME Peake, Sandra J. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00037628
<b>4</b> Date 05/25/2018	<b>5</b> Payee name Paypal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) processing - S. Brown
Date 05/14/2018	Payee name Paypal	
Amount (\$) 6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) processing - B. McNamara
Date 06/07/2018	Payee name Paypal	
Amount (\$) 3.20	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Bank fee
Date 06/11/2018	Payee name Paypal	
Amount (\$) 6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Accounting/Banking	<b>(b)</b> Description (See instructions regarding type of information required.) processing fee

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/4 Rpt:	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
4 Date 06/13/2018	5 Payee name Paypal	
6 Amount (\$)  18.30	7 Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Processing fees
Date 06/22/2018	Payee name Paypal	
Amount (\$)  6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) processing fee
Date 06/25/2018	Payee name Paypal	
Amount (\$)  6.10	Payee Address; City; State; Zip 2211 N. First Street  San Jose, CA 95131-0000	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Processing fee