

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00037628	2 Total pages filed: 18	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Sandra J.	MI	OFFICE USE ONLY
	NICKNAME	LAST Peake	SUFFIX	
Date Received ELECTRONICALLY FILED 10/29/2018				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 9660 Hillcroft St., Ste. 435 Houston, TX 77096			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST David G.	MI	
	NICKNAME	LAST Peake	SUFFIX	
6 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			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
(713) 723-5082				
8 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 type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 10/10/2018	THROUGH	Month Day Year 10/27/2018	
10 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	
11 OFFICE	OFFICE HELD (if any)		12 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 18

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

15 NOTICE FROM POLITICAL COMMITTEE(S)
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.

Additional Pages

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

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,827.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,625.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 601.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

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

18 FILER NAME Peake, Sandra J. (Mrs.)		19 Filer ID 00037628	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	2,680.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	7,147.50
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	\$	3,900.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	725.06
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	\$	78.26
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/11/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Derek (Mr.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77053-0000		
8 Contributor's Principal Occupation Attorney at Law		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin, Juanita	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Cypress, TX 77433-0000		
Contributor's Principal Occupation retired		Contributor's Job Title n/a
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 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostic, Denise (Ms.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Stafford, TX 77477		
Contributor's Principal Occupation Office 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		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkley, Linda	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77071	
8 Contributor's Principal Occupation educator		9 Contributor's Job Title
10 Contributor's employer/law firm n/a		11 Law firm of contributor's spouse (if any) none
12 If contributor is a child, law firm of parent(s) (if any) none none		
Date 10/19/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carolyn Evans d/b/a/ Dr. C Evans-Shabazz Campaign	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77286-8482	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Johnetta	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77054-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
Contributor's employer/law firm Cooper & Cushingberry, LLP		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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/22/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cromell, Marie (Ms.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Spring, TX 77388-5019	
8 Contributor's Principal Occupation Educator		9 Contributor's Job Title Associate Dean
10 Contributor's employer/law firm Houston Community College		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 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Edward	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77024-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any) none none		
Date 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Edward	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77024-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
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		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/12/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Carolyn (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Cypress, TX 77433-0000	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title none
10 Contributor's employer/law firm none		11 Law firm of contributor's spouse (if any) none
12 If contributor is a child, law firm of parent(s) (if any) none none		
Date 10/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Renay (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Cypress, TX 77433-0000	
Contributor's Principal Occupation retired		Contributor's Job Title none
Contributor's employer/law firm none		Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any) none none		
Date 10/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Whitney	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77004-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
Contributor's employer/law firm Beyond Review		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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/13/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Thelma (Ms.)	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77584-3410	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title n/a
10 Contributor's employer/law firm n/a		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/12/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Lillie (Ms.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77004	
Contributor's Principal Occupation retired		Contributor's Job Title n/a
Contributor's employer/law firm none		Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any) none		
Date 10/13/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Leasajeane (Ms.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77047-0000	
Contributor's Principal Occupation Licensed psychologist		Contributor's Job Title Psychologist
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/12/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Koretta (Ms.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Houston, TX 77048-0000	
8 Contributor's Principal Occupation Outreach Coordinator		9 Contributor's Job Title Outreach
10 Contributor's employer/law firm Central Care Integrated Health		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 10/16/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawal, Bade (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77056-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
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 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manns, Qiana (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77245-0000	
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/14/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McConnico, Kate (Ms.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77019-0000		
8 Contributor's Principal Occupation Attorney at Law		9 Contributor's Job Title Attorney at Law
10 Contributor's employer/law firm The McConnico Law Firm		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 10/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nellis, Lex (Mr.)	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Tomball, TX 77377-0000		
Contributor's Principal Occupation self		Contributor's Job Title n/a
Contributor's employer/law firm none		Law firm of contributor's spouse (if any) none
If contributor is a child, law firm of parent(s) (if any) none none		
Date 10/14/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Demetrius (Dr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Fresno, TX 77545-0000		
Contributor's Principal Occupation Professor		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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/22/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Jackie (Ms.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Houston, TX 77004-0000		
8 Contributor's Principal Occupation Executive Assistant		9 Contributor's Job Title Executive Assistant
10 Contributor's employer/law firm City of Houston		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 10/25/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Nina (Ms.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77045		
Contributor's Principal Occupation Attorney at Law		Contributor's Job Title Attorney
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 10/22/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Chandra (Ms.)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77098		
Contributor's Principal Occupation Attorney - self employed		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)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/9 Rpt: 12/18
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/12/2018	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Teresa (Ms.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77004-1017		
8 Contributor's Principal Occupation Attorney at Law		9 Contributor's Job Title Attorney
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 10/17/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Felicia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Highlands, TX 77562-0000		
Contributor's Principal Occupation Field Organizer		Contributor's Job Title field organizer
Contributor's employer/law firm Beto For Texas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/18	
2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/10/2018	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cothrun, Sherry (Ms.)	8 Amount of contribution (\$) \$297.50	9 In-kind contribution description pro-rata allocation of total cost of hosing Bayou Blue Democratic Fundraiser 10-10-18
	7 Contributor address; City; State; Zip Code Houston, TX 77002-0000	<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) Attorney at Law		13 Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
14 Contributor's employer/law firm (FOR JUDICIAL) Cothrun & Lucido		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 10/10/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JYB VIDEOGRAPHY	Amount of contribution (\$) \$5,500.00	In-kind contribution description Project: Faces of Justice video ad
	Contributor address; City; State; Zip Code Pettus, TX 78146-0000	<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)			
Date 10/20/2018	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Victoria (Ms.)	Amount of contribution (\$) \$1,350.00	In-kind contribution description advertising robo calls
	Contributor address; City; State; Zip Code Pearland, TX 77584-0000	<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) Pharmacist		Contributor's job title (FOR JUDICIAL) (See instructions) Pharmacist	
Contributor's employer/law firm (FOR JUDICIAL) Vets First Choice		Law firm of contributor's spouse (if any) (FOR JUDICIAL) n/a	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) n/a		n/a	

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.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 14/18	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/15/2018	5 Payee name Aubrey Taylor Communications	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 957 Nasa Parkway Suite 251 Houston, TX 77058	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense publication advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2018	Payee name Hightower, Robert	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 5239 Honeyvine Houston, TX 77048-0000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense install signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/25/2018	Payee name Palmer, Gloria	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 7413 Parker Road Houston, TX 77016-0000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense contract labor - polling sites
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	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 - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	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: 2/2 Rpt: 15/18	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
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4 Date 10/22/2018	5 Payee name SPRINT 2 PRINT
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6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 8748 Clay Road Suite 300 Houston, TX 77080-0000
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit for 4 x 4 signs
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2018	Payee name Tru Insight
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Amount (\$) \$200.00	Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website maintenance
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Complete <u>ONLY</u> 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.

1 Total pages Schedule G: Sch: 1/1 Rpt: 16/18	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
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4 Date 10/23/2018	5 Payee name Hightower, Robert
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6 Amount (\$) \$100.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 5239 Honeyvine Houston, TX 77048-0000
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sign installation
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/22/2018	Payee name SPRINT 2 PRINT
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Amount (\$) \$625.06 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8748 Clay Road Suite 300 Houston, TX 77080-0000
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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 balance due on 4 x 4 signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/22/2018	5 Payee name Raise the Money, Inc.	
6 Amount (\$) 10.05	7 Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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 10/17/2018	Payee name Raise the Money, Inc.	
Amount (\$) 30.64	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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 10/16/2018	Payee name Raise the Money, Inc.	
Amount (\$) 12.50	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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 10/13/2018	Payee name Raise the Money, Inc.	
Amount (\$) 10.05	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
4 Date 10/12/2018	5 Payee name Raise the Money, Inc.	
6 Amount (\$) 4.47	7 Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) processing fee
Date 10/11/2018	Payee name Raise the Money, Inc.	
Amount (\$) 2.70	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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 10/25/2018	Payee name Raise the Money, Inc.	
Amount (\$) 2.70	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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 10/26/2018	Payee name Raise the Money, Inc.	
Amount (\$) 5.15	Payee Address; City; State; Zip P. O. Box 26466 Little Rock, AR 72221-0000	
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