JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commis 00037628	sion Filers)	2 Total pages	filed: 53
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
OFFICEHOLDER	Mrs.	Sandra J.			OFFICE	
NAME		Califara C.			Date Received	
					ELECTRONIC	CALLY FILED
	NICKNAME	LAST		SUFFIX	07/15/2019	
	NICKIAWE	Peake		30111X		
		Peake				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	⁻ Y;	ZIP CODE	Date Hand-delivered	l or Date Postmarked
OFFICEHOLDER	201 Caroline					
MAILING ADDRESS					Receipt #	Amount
ADDRE33	16th Floor					
Change of Address	Houston, TX 77002-0000)			Date Processed	
					Data Imaged	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mr.	David G.				
	NICKNAME	LAST			SUFFIX	
	NICKNAME				SUFFIX	
		Peake				
6 CAMPAIGN	STREET ADDRESS (NO PO	D BOX PLEASE);	APT	/ SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER	9660 Hillcroft, Ste. 430					
ADDRESS						
(Residence or Business)						
	Houston, TX 77096					
7 CAMPAIGN TREASURER	AREA CODE PHO	NE NUMBER	EXTENSION			
PHONE	(713) 723-5082					
8 REPORT						
TYPE	January 15	30th day before	e election	Runoff		ampaign treasurer
						fficeholder only)
	X July 15	8th day before	election	Exceeded \$500 limit	Final Report (A	ttach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2019	Tł	HROUGH	06/30/201	9	
10 ELECTION	ELECTION DATE	i				
IU ELECTION				ELECTION TYPE		
	,		Primary	Runoff	Other	
	11/07/2018		General	Special		
					(if // a + // -)	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	Family District Court Jud	ye District 257 H	iarris	Family District Co	ourt Juage Dist	110(257
	1			1		
		GO 1	FO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.us	;	V	ersion V1.1.0ef01a4a

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 53

I

13 C / OH NAME	Peake, Sandra J. (Mr	s.)	14 Filer ID 00037628	(Ethics Commission Filers)	
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	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER	NAME		
		COMMITTEE CAMPAIGN TREASURER	ADDRESS		
16 CONTIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (ARANTEES OF LOANS), UNLESS ITEMIZ		\$ 0.00	
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES O		\$ 40,822.97	
EXPENDITURE TOTALS		AL EXPENDITURES OF \$100 OR LESS, U		\$ 0.00	
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 17,719.01	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS O RIOD	F THE LAST DAY OF THE	\$ 26,925.67	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LO TING PERIOD	ANS AS OF THE LAST DAY	\$ 0.00	
17 AFFADAVIT			er penalty of perjury, that the a cludes all information required n Code.		
			Mrs. Sandra J. Peake		
		Sigi	nature of Candidate or Officeh	older	
	TARY STAMP / SEAL AB	DVE			
	TAILT STAWF / SEAL AB	JvL			
		aid		day	
of	, 20, to ce	rtify which, witness my hand and seal of o	ffice.		
Signature of offic	cer administering oath	Printed name of officer administering	oath Title of offic	er administering oath	
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V1.1.0ef01a4a	

FORM JC/OH SUBTOTALS - JC/OH **COVER SHEET PG 3** 3 of 53 19 Filer ID 18 FILER NAME (Ethics Commission Filers) 00037628 Peake, Sandra J. (Mrs.) **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) 1. \$ 35,944.49 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 4,878.48 \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ З. 4. X SCHEDULE E(J): LOANS (JUDICIAL) \$ 0.00 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 17,220.27 \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ Х SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ 498.74 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

The Instrue	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/25 Rpt: 4/53	
2 FILER NAME Peake, Sand	Ira J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628	
4 Date 02/01/2019	 5 Full name of contributor out-of-state PAC (ID#: Alsandor, Cheryl (Ms.) 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$200.00	
	Houston, TX 77098			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney at Law		
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)	
The Alsando		n/a		
12 If contributor is n/a	s a child, law firm of parent(s) (if any)	n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/06/2019	Arteaga, Laura		\$500.00	
	Contributor address; City; State; Zip Code Houston, TX 77036-0000			
	Principal Occupation	Contributor's Job Title		
Attorney		Attorney at Law		
Contributor's e self	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date 01/29/2019	Full name of contributor out-of-state PAC (ID#: Bates, Nicole Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$250.00	
	Houston, TX 77007-0000			
Contributor's F	Principal Occupation	Contributor's Job Title	1	
attorney		attorney		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
self		n/a		
If contributor is a child, law firm of parent(s) (if any)				
n/a		n/a		
	hy Texas Ethics Commission www.ethic	s state ty us	Version V/1 1 0ef01a/a	

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 2/25 Rpt: 5/53		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	łra J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/19/2019	Billings, Patricia		\$1,500.00	
	6 Contributor address; City; State; Zip Code			
	Humble, TX 77338-0000			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney at Law		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
self				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Data				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
03/06/2019	Boudreaux, Rogers (Mr.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Pearland, TX 77584-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney		Attorney at Law		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
self		n/a		
If contributor is	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/27/2019	Brentwood Baptist Church Credit Union)	\$100.00	
01/21/2010				
	Contributor address; City; State; Zip Code			
	Houston, TX 77245-0206	F		
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/25 Rpt: 6/53	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
02/22/2019	Bruce, LaShon Fleming (Ms.)		\$200.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77070-4677			
	Principal Occupation	9 Contributor's Job Title		
Attorney at L		attorney		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
self		n/a		
	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
01/29/2019	Burgower, Wendy (Ms.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77098-0000			
	Principal Occupation	Contributor's Job Title		
Attorney		Attorney at Law		
	employer/law firm	Law firm of contributor's sp	bouse (if any)	
self				
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Canales, Claudia		\$500.00	
	Contributor address; City; State; Zip Code			
	Decilord TV 77501 0000			
	Pearland, TX 77581-0000			
	Principal Occupation	Contributor's Job Title		
Attorney	and a south as the firm	Attorney at Law		
Self	employer/law firm	Law firm of contributor's sp	Jouse (ii any)	
If contributor is a child, law firm of parent(s) (if any)				
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2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Peake, Sand	Ira J. (Mrs.)		00037628		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)		
01/29/2019	Cardenas, Robert		\$500.00		
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77074-0000				
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title			
Attorney		Attorney at Law			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)		
Law Office o	f Robert Cardenas				
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
01/29/2019	Cardenas, Rose		\$250.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77074-6425				
	Principal Occupation	Contributor's Job Title			
Attorney at L		Attrorney			
	employer/law firm	Law firm of contributor's sp	bouse (if any)		
self		n/a			
If contributor is	s a child, law firm of parent(s) (if any)	n/a			
11/a					
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
01/22/2019	Carlin, Amy		\$250.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77002-0000				
Contributor's F	Principal Occupation	Contributor's Job Title			
Attorney		Attorney			
	employer/law firm	Law firm of contributor's sp	pouse (if any)		
Carlin Law F					
If contributor is	If contributor is a child, law firm of parent(s) (if any)				
	hy Texas Ethics Commission www.ethic	es state ty us	Version V1 1 0ef01a4a		

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2 FILER NAME Peake, Sand	dra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 01/29/2019	5 Full name of contributor out-of-state PAC (ID#: Childs, Eraka		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77054-0000		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney at L	aw	Attorney	
10 Contributor's e self	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/28/2019	Clay, Michael (Mr.)	,	\$250.00
	Contributor address; City; State; Zip Code		•
	Houston, TX 77004-0000		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Attorney at L	aw	Attorney at Law	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
self		n/a	
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2019	Clevenger, George	/	\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77069-0000		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
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2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
Peake, Sanc	ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/29/2019	Coleman, Kristen			\$50.00
	6 Contributor address; City; State; Zip Code			
	Katy, TX 77493-0000			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney at Law		
10 Contributor's e		11 Law firm of contributor's sp	pouse (if any)	
Woodfill Law				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/14/2019	Coole, Cary			\$250.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77063-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
consultant		Real Estate Consultant		
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)	
n/a		n/a		
If contributor is	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/22/2019	Davis, Edward (Mr.)		\$	\$100.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77079-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
attorney		Attorney at Law		
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)		
self employe	:d	n/a		
	s a child, law firm of parent(s) (if any)			
n/a		n/a		

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 7/25 Rpt: 10/53	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
02/22/2019	Diggs, Cheryl		\$100.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77021-0000			
	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney at Law		
10 Contributor's e		11 Law firm of contributor's sp	bouse (if any)	
Diggs Law F		n/a		
	s a child, law firm of parent(s) (if any)	n/a		
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Dougherty, Judy		\$100.00	
	Contributor address; City; State; Zip Code			
	Houston TX 77007 0000			
Constributoria	Houston, TX 77007-0000	Contributor's Job Title		
Attorney	Principal Occupation	Attorney at Law		
	employer/law firm	Law firm of contributor's sp	nouse (if any)	
self				
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/27/2019	EVERSON, DONNA		\$500.00	
	Contributor address; City; State; Zip Code		•	
	HOUSTON, TX 77089-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
ATTORNEY AT LAW ATTORNEY				
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
self employed				
If contributor is a child, law firm of parent(s) (if any)				
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V1 1 0ef01a4a	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/25 Rpt: 11/53	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Peake, Sand	lra J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
02/17/2019	Eaglin, Shandale		\$25.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77070-0000			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
Broker/owne	r	realtor		
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)	
Eaglin Realt		n/a		
	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Fitch, Bonnie		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77021-0000			
	Principal Occupation	Contributor's Job Title		
Attorney at L		Attorney		
	employer/law firm	Law firm of contributor's sp	bouse (if any)	
self				
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Franco, Laura		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Katy, TX 77450-0000			
	Principal Occupation	Contributor's Job Title		
attorney		Attorney at Law		
Contributor's employer/law firm Law firm of contributor's sp self n/a		oouse (if any)		
		11/a		
If contributor is a child, law firm of parent(s) (if any)				
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 9/25 Rpt: 12/53		
2 FILER NAME Peake, Sand	Ira J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628	
4 Date 01/29/2019	5 Full name of contributor out-of-state PAC (ID#: FullenweidernWilhite		7 Amount of Contribution (\$) \$500.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77027-0000			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)	I		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/18/2019	Fuller, Lanease		\$250.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77027-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney		Attorney at Law		
Contributor's e self employe	employer/law firm	Law firm of contributor's sp n/a	oouse (if any)	
	s a child, law firm of parent(s) (if any)	11/a		
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	GREGORY, MYRNA Contributor address; City; State; Zip Code		\$400.00	
	HOUSTON, TX 77041-0000	1		
Contributor's F ATTORNEY	Principal Occupation AT LAW	Contributor's Job Title ATTORNEY		
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
Gregory Law PLLC				
If contributor is a child, law firm of parent(s) (if any)				
	by Toyog Ethiog Commission		Vorsion V/1 1 Oof01o4o	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 10/25 Rpt: 13/53	
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/25/2019	Gill & Revack		\$500.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77401-3604			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Gjenbo, Anne		\$350.00	
	Contributor address; City; State; Zip Code			
	Houston TX 77074 0000			
Contributoria	Houston, TX 77074-0000 Principal Occupation	Contributor's Job Title		
Attorney		Attorney at Law		
	employer/law firm	Law firm of contributor's sp		
self				
	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/13/2019	Golda Jacobs and Assoc. P.C.)	\$500.00	
	Contributor address; City; State; Zip Code			
	Hoiuston, TX 77002-0000			
Contributor's F	I Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)	
If contributor is a child, law firm of parent(s) (if any)				

The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 11/25 Rpt: 14/53
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Peake, Sandra J. (Mrs.)		00037628
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
01/29/2019 Gray, Daniel		\$300.00
6 Contributor address; City; State; Zip Code		
Bellaire, TX 77401-5316		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
Attorney/Mediator	Attorney at Law	
10 Contributor's employer/law firm	11 Law firm of contributor's sp	oouse (if any)
self		
12 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2019 Gray, Reed & McGraw, LLP)	\$1,000.00
Contributor address; City; State; Zip Code		
Houston, TX 77056-0000		
Contributor's Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2019 Guidry, Myrna (Ms.)		\$150.00
Contributor address; City; State; Zip Code		
Houston, TX 77098		
Contributor's Principal Occupation	Contributor's Job Title	
Attorney	Attorney at Law	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)
self none		
If contributor is a child, law firm of parent(s) (if any)		
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	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 12/25 Rpt: 15/53	
2	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Peake, Sand	Ira J. (Mrs.)		00037628	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)	
	01/19/2019	Guillerman, Mark		\$50.00	
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77077-0000			
8	Contributor's F	Principal Occupation	9 Contributor's Job Title		
	home inspec	tor	home inspector		
10	Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)	
	n/a		n/a		
12	If contributor is	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor 🔲 out-of-state PAC	C (ID#:)	Amount of Contribution (\$)	
	02/22/2019	Hemby, William		\$250.00	
		Contributor address; City; State; Zip Code			
		Stafford, TX 77477-0000			
		Principal Occupation	Contributor's Job Title		
	Attorney		Attorney at Law		
		employer/law firm	Law firm of contributor's s	pouse (if any)	
		f William Hemby, Jr.	n/a		
		s a child, law firm of parent(s) (if any)	nlo		
	n/a		n/a		
	Date	Full name of contributor out-of-state PAC	: (ID#:)	Amount of Contribution (\$)	
	01/29/2019	Holmes, Diggs Eames & Sadler		\$1,000.00	
		Contributor address; City; State; Zip Code			
	0	Houston, TX 77007-0000			
	Contributor's I	Principal Occupation	Contributor's Job Title		
	Canatailautaulau				
Contributor's employer/law firm Law firm of contributor's		pouse (il any)			
┝	If contributor is a child low firm of neront(a) (if an)				
	If contributor is a child, law firm of parent(s) (if any)				
⊢					

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 13/25 Rpt: 16/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Peake, Sand	dra J. (Mrs.)		00037628
4 Date 01/29/2019	5 Full name of contributor out-of-state PAC (ID#: Hurst, Elizabeth)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77055-0000		
8 Contributor's I attorney	Principal Occupation	9 Contributor's Job Title attorney	
10 Contributor's e	omployor/low firm	11 Law firm of contributor's sp	oouso (if any)
Chaffin & Hu			Jouse (II ally)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/11/2019	IBEW PAC VOLUNTARY FUND		\$750.00
	Contributor address; City; State; Zip Code		
	Washington, DC 20001-0000		
Contributor's I	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/29/2019	James, Anna (Ms.)		\$50.00
	Contributor address; City; State; Zip Code		
	Spring, TX 77391-0000		
Contributor's I	Principal Occupation	Contributor's Job Title	
retired		n/a	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
n/a			
If contributor is	s a child, law firm of parent(s) (if any)		
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	The Instru	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A(J)1: Sch: 14/25 Rpt: 17/53	
5	FILER NAME				3	Filer ID (Ethics Commission) Filers)
ľ	Peake, Sand	lra J. (Mrs.)			ľ	00037628	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	01/29/2019	Kamin, Lynn					\$300.00
		6 Contributor address; City; State; Zip Code			1		
		Houston, TX 77046-0000					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	Attorney at L	aw		Attorney at Law			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
	Jenkins & Ka	amin, LLP		n/a			
12		s a child, law firm of parent(s) (if any)					
	n/a			n/a			
F	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	01/29/2019	Kritzer, Elena Halachian					\$200.00
		Contributor address; City; State; Zip Code			1		
		Houston, TX 77015-0000					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney at Law			
F	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)	
	self			n/a			
⊢	If contributor is	s a child, law firm of parent(s) (if any)					
	n/a			n/a			
⊨					<u> </u>		
	Date	Full name of contributor out-of-state P/	AC (ID#:)		Amount of Contribution (\$)	#050.00
	01/29/2019						\$250.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77036-2131					
	Contributor's I	Principal Occupation		Contributor's Job Title			
Contributor's employer/law firm Law firm of contributor's s		oous	se (if any)				
	If contributor is a child, law firm of parent(s) (if any)						
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The Instruc	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/25 Rpt: 18/53
2 FILER NAME Peake, Sand	2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
	5 Full name of contributor out-of-state PAC (ID#: LAW OFFICE OF NANCY BOLER)	7 Amount of Contribution (\$) \$250.00
	Bellaire, TX 77401-0000		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)	I	
Date 03/06/2019	Full name of contributorout-of-state PAC (ID#: Lee, Chung (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.00
Contributor's E	Katy, TX 77494-0000 Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
	mployer/law firm gal Group PLLC	Law firm of contributor's sp n/a	ouse (if any)
If contributor is n/a	a child, law firm of parent(s) (if any)	n/a	
Date 01/29/2019	Full name of contributor interpreter out-of-state PAC (ID#:_ Linder, Gerald Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$100.00
	Bellaire, TX 77401-0000		
Contributor's Principal OccupationContributor's Job TitleAttorneyAttorney at Law			
Contributor's employer/law firm Law firm of contributor's sp		ouse (if any)	
self			
If contributor is	a child, law firm of parent(s) (if any)		
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 16/25 Rpt: 19/53	
2 FILER NAME Peake, Sand	ira J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 02/20/2019	 5 Full name of contributor out-of-state PAC (ID#: McInvale, Robert 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$500.00
	Houston, TX 77084-0000		
	Principal Occupation	9 Contributor's Job Title	
	litigation trial lawyer	Attorney at Law	
10 Contributor's e		11 Law firm of contributor's sp	oouse (if any)
Self - Reid M		n/a	
12 If contributor is n/a	s a child, law firm of parent(s) (if any)	n/a	
Date 01/29/2019	Full name of contributor out-of-state PAC (ID#: Mcnamara Law Office PLLC)	Amount of Contribution (\$)
01/29/2019			\$500.00
	Contributor address; City; State; Zip Code		
	Kingwood, TX 77339-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor 3 P			
Contributor's e	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2019	Merchant, Shelley		\$1,000.00
	Contributor address; City; State; Zip Code		
	Deer Park, TX 77536-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	l
Attorney		Attorney at Law	
-	employer/law firm	Law firm of contributor's sp	ouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/25 Rpt: 20/53		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
02/27/2019	Moon, Tammy (Mrs.)		\$1,919.49	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77004-0000			
	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney at Law		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
self				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date)	Amount of Contribution (\$)	
02/15/2019	Moore, Vlahakos,Sydow		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77046-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Morris, Adam		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77096-1402			
	Principal Occupation	Contributor's Job Title		
Attorney Attorney at Law				
Contributor's employer/law firm Law firm of contributor's sp			bouse (if any)	
Carter Morris, LLP				
If contributor is	s a child, law firm of parent(s) (if any)			
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V1.1.0ef01a4a	

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/25 Rpt: 21/53		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
01/27/2019	Oromia Limo Company		\$50.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77071-2424			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/22/2019	Parker, Leniece (Ms.)		\$250.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77074-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
attorney		Attorney at Law		
	employer/law firm	Law firm of contributor's sp	bouse (if any)	
Parker Law		n/a		
	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
01/29/2019	Perry, Ashleigh		\$50.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77067-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
Attorney Attorney at Law				
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)		
self n/a				
If contributor is a child, law firm of parent(s) (if any)				
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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 19/25 Rpt: 22/53	
2 FILER NAME	2 EILER NAME		3 Filer ID (Ethics Commission Filers)	
Peake, Sand	dra J. (Mrs.)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
01/29/2019	Phea, Angela		\$250.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77021-1107			
8 Contributor's I	Principal Occupation	9 Contributor's Job Title		
attorney		Attorrney at Law		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
self				
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/08/2019	Pipefitters Local 211		\$2,000.00	
	Contributor address; City; State; Zip Code			
	Deer Park, TX 77536-0000			
Contributor's I	I Principal Occupation	Contributor's Job Title	I	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor i	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
01/29/2019	Placzek, Michelle	,	\$1,000.00	
	Contributor address; City; State; Zip Code			
	· · · · · · · · · · · · · · · · · · ·			
	Houston, TX 77007-5221			
Contributor's I	I Principal Occupation	Contributor's Job Title	I	
Attorney		Attorney at Law		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
Morais Kim Law				
If contributor is a child, law firm of parent(s) (if any)				
	by Toyoo Ethico Commission		$V_{\text{orbian}} \setminus (1, 1, 0, 0)$	

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 20/25 Rpt: 23/53
2 FILER NAME Peake, Sand	2 FILER NAME Peake, Sandra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 01/29/2019	 Full name of contributor out-of-state PAC (ID#: out-of-state PAC (ID#:) Ricketts, Ivy (Mrs.) Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$250.00
	Houston, TX 77054		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
Attorney self	employed	Attorney at Law	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Ivy Ricketts	Law		
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
02/04/2019	Runge, Barbara		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77005-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	•
Attorney		self	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
01/29/2019	Schalnger, Silver, Barg & Paine, LLP		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77024-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributo		Law firm of contributor's sp	bouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)	I	
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The Instrue	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 21/25 Rpt: 24/53	
2 FILER NAME Peake, Sand	Ira J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 01/29/2019	5 Full name of contributor out-of-state PAC (ID#: Slate, Dennis		7 Amount of Contribution (\$)\$3,000.00
	6 Contributor address; City; State; Zip Code		
	Deer Park, TX 77536-4110		
8 Contributor's F Attorney	Principal Occupation	9 Contributor's Job Title Attorney at Law	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Self	a child low firm of poront/o) (if any)		
	s a child, law firm of parent(s) (if any)		
Date 01/27/2019	Full name of contributor out-of-state PAC (ID#:_ Smith, Meghann Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$200.00
	Houston, TX 77006-0000 Principal Occupation	Contributor's Job Title	
Attorney	employer/law firm	Attorney Law firm of contributor's sp	pouse (if any)
self			
If contributor is	s a child, law firm of parent(s) (if any)	1	
Date 01/29/2019	Full name of contributor out-of-state PAC (ID#:_ Sterling, Jon Karen Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
	Rosenberg, TX 77471-6715		
Contributor's F retired	Principal Occupation	Contributor's Job Title n/a	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
none	a a abild low firm of parant(a) (if any)	none	
	s a child, law firm of parent(s) (if any)		
	by Texas Ethics Commission www.ethic	s state ty us	Version V/1 1 0ef01a/a

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 22/25 Rpt: 25/53
2 FILER NAME Peake, Sand	ra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 01/29/2019	Sumers, Jean P	PAC (ID#:)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77494-0000		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
attorney		Attorney at Law	
10 Contributor's e	emplover/law firm	11 Law firm of contributor's s	nouse (if any)
The Springer			
	s a child, law firm of parent(s) (if any)		
Data	Full name of contributor		Amount of Contribution (\$)
Date 01/28/2019	TRAN, THOA T	PAC (ID#:)	Amount of Contribution (\$) \$500.00
01/20/2019			
	Contributor address, City, State, Zip Code		
	HOUSTON TY 77022 2024		
Cantributaria	HOUSTON, TX 77023-3024		
ATTORNEY	Principal Occupation	Contributor's Job Title ATTORNEY AT LAW	
	malayor/lay firm		
self	mployer/law firm	Law firm of contributor's s	spouse (ii any)
	s a child, law firm of parent(s) (if any)		
	s a crinic, law infinition parent(s) (in any)		
Date		PAC (ID#:)	Amount of Contribution (\$)
03/01/2019			\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77045		
Contributor's Principal Occupation Contributor's Job Title			
Attorney at Law Attorney at Law			
Contributor's employer/law firm Law firm of contributor's sp		spouse (if any)	
The Law Office of Nina J Taylor, PLLC			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission w	ww.ethics.state.tx.us	Version V1.1.0ef01a4a

The Instruc	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 23/25 Rpt: 26/53			
2 FILER NAME Peake, Sand	Ira J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628		
4 Date 01/29/2019	 5 Full name of contributor out-of-state PAC (ID#: The Cusic Law Firm 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$250.00		
	Houston, TX 77060-5915				
8 Contributor's F	Principal Occupation				
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
12 If contributor is	s a child, law firm of parent(s) (if any)				
Date 01/29/2019	Full name of contributor out-of-state PAC (ID#:_ The Kuehm Law Firm Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00		
Contributor's F	Houston, TX 77017-0000 Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)	I			
Date 01/27/2019	Full name of contributor out-of-state PAC (ID#:_ The Torres Law Group Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00		
Contributor's F	Houston, TX 77018-0000 Principal Occupation	Contributor's Job Title			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)				
	hy Taylog Ethiog Commission				

The Instru	ction Guide explains how to complete this t	1 Total pages Schedule A(J)1: Sch: 24/25 Rpt: 27/53			
2 FILER NAME Peake, Sand	dra J. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00037628		
4 Date 01/29/2019	 Full name of contributor out-of-state PAC (ID#: Thrash, Christine Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$1,000.00		
	Pearland, TX 77584-0000				
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	•		
Attorney		Attorney at Law			
	employer/law firm	11 Law firm of contributor's sp	bouse (if any)		
self					
12 If contributor i	s a child, law firm of parent(s) (if any)				
Data		、 、			
Date 01/29/2019	Full name of contributor out-of-state PAC (ID#: Valdez, Stacy Holley)	Amount of Contribution (\$) \$500.00		
01/23/2013	Contributor address; City; State; Zip Code				
	Contributor address, City, State, Zip Code				
	Webster, TX 77598-0000				
Contributor's	Principal Occupation	Contributor's Job Title			
Attorney	- F	Attorney at Law			
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)		
Self					
If contributor i	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
03/02/2019	Wade, Tiffany (Ms.)		\$250.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77234-0000				
Contributor's I	Principal Occupation	Contributor's Job Title			
Attorney		Attorney at Law			
	employer/law firm	Law firm of contributor's sp	bouse (if any)		
The Wade C					
If contributor i	s a child, law firm of parent(s) (if any)				
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The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 25/25 Rpt: 28/53	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Peake, Sand	dra J. (Mrs.)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
01/28/2019	Waldron Schneider		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77058-1228		
8 Contributor's F	l Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	nouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
03/06/2019	Waldrop, Teresa		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002-0000		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Law Office o	f Teresa J Waldrop PC	n/a	
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
01/29/2019	Walters Gilbreath PLLC		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002-0000		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 29/53						
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Peake, Sand	dra J. (Mrs.)	00037628						
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description					
01/28/2019			\$200.001 flowers and cake for					
	7 Contributor address; City; State; Zip Code		investiture					
	Houston, TX 77027-0000		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	ipation / 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)					
Attorney		Attorney at Law						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
Diggs Law F	Firm							
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution					
02/04/2019	Indelicato, Joseph		contribution (\$) description \$494.62 Contribution towards					
	Contributor address; City; State; Zip Code							
	Houston, TX 77098-0000		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Attorney		Attorney at Law						
	employer/law firm (FOR JUDICIAL)	Law firm of contributo	utor's spouse (if any) (FOR JUDICIAL)					
Joe Indelica								
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution					
02/04/2019	Keuhm, Robert		contribution (\$) description \$494.62 contribution towards					
	Contributor address; City; State; Zip Code		LaGriglia fundraiser					
	Houston TX 77017 0000							
Principal occu	Houston, TX 77017-0000 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule TJUDICIAL) (See instructions)					
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Attorney		Attorney at Law						
	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
Kuehm Law								
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/2 Rpt: 30/53						
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	dra J. (Mrs.)	00037628						
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date 01/28/2019	7 Contributor address; City; State; Zip Code	8 Amount of 9 In-kind contribution contribution (\$) description \$2,700.00 food and catering for invesitute						
	Houston, TX 77011-0000	i 	Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / 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)					
Attorney		Attorney at Law						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)					
self		n/a						
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
n/a		n/a						
Date 02/04/2019	Full name of contributor out-of-state PAC (ID#: Smith, Jacqueline (Ms.) Contributor address; City; State; Zip Code)	Amount of contribution (\$) \$494.62 I Contribution towards LaGriglia fundraiser expense					
	Houston, TX 77007-0000		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)					
Contributor's attorney	principal occupation (FOR JUDICIAL)	Contributor's job title Attorney at Law	(FOR JUDICIAL) (See instructions)					
, ,	employer/law firm (FOR JUDICIAL)	-	tor's spouse (if any) (FOR JUDICIAL)					
	Smith & Associates							
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date 02/04/2019	Full name of contributor out-of-state PAC (ID#: Yates III, Sam "Trey" Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$494.62 I contribution towards expenses of LaGriglia fundraiser					
	Houston, TX 77027-0000		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)						
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions) Attorney at Law						
Contributor's self	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)					
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)								

LOANS (J	UDICIAL)			SCHEDULE E	(J)				
The Instructio	The Instruction Guide explains how to complete this form. 1 Total page Sch: 1/2								
2 FILER NAME Peake, Sandra J	l. (Mrs.)		3 Filer ID 000376	(Ethics Commission F 628	ilers)				
⁴ TOTAL OF UN	ITEMIZED LOANS			\$	0.00				
5 Date of loan	7 Name of lender Out-of-state PA	C (ID#:)	9 Loan Amount (\$)					
6 Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate					
				11 Maturity Date					
12 Lender's Principal	Occupation	13 Lender's Job Title							
14 Lender's Employer	/Law Firm	15 Law Firm of lender's spous	e (if any)						
16 If lender is child, la	w firm of parent(s) (if any)								
17 Description of Coll	ateral	18 Check if personal funds we	ere deposited	d into political account (See Instructions)					
19 GUARANTOR INFORMATION	20 Name of guarantor			22 Amount Guarantee	d (\$)				
not applicable	21 Guarantor address; City; State;	Zip Code							
23 Guarantor's Princi	bal Occupation	24 Guarantor's Job Title		<u>.</u>					
25 Guarantor's Emplo	yer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any)	1					
27 If guarantor is child	d, law firm of parent(s) (if any)								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE CATE	EGORIES FO	OR E	3OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 1/20 Rpt: 32/53		Peake, Sandra J. (Mrs.) 00037628							
4	Date 03/21/2019	5	Payee name Aubrey Taylor Communications							
6	Amount (\$)	7	y	State; Zip C	Code	9				
	\$2,500.00		957 Nasa Parkway							
			Suite 251							
			Houston, TX 77058							
8	PURPOSE	(a)	Category (See Categories listed at the top of th	his schedule)	(b) Description				
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.		
							η, TX,	, officeholder living expense		
						Advertising				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ough	it		Office held		
	Date		Payee name							
	01/22/2019 Bank of America									
	Amount (\$)		Payee address; City; S	State; Zip C	Code	9				
	\$16.00		P. O. Box 25118	· •						
			Tampa, FL 33622-5118							
	PURPOSE OF EXPENDITURE	(a)	(a) Category (See Categories listed at the top of this schedule) (b) Accounting/Banking			(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense monthly fee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H				it		Office held		
	Date		Payee name							
	01/02/2019		Bank of America							
	Amount (\$)		Payee address; City; S	State; Zip C	Code	9				
	\$350.00		P. O. Box 25118	·····, [· ·						
			Tampa, FL 33622-5118							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Accounting/Banking	his schedule)	(b			ide of Texas. Complete Schedule T. , officeholder living expense		
						Charge back				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	bugh	t		Office held		

			EXPENDITURE CATEGO	RIES FOF	R BC	DX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 2/20 Rpt: 33/53		Peake, Sandra J. (Mrs.)					00037628	
4	Date	5	Payee name						
	01/02/2019	-	Bank of America						
6	Amount (\$)	7		; Zip Co	nde				
ľ	\$12.00	ľ	P. O. Box 25118	, 20 00	ac				
	¢12.00		1.0.00020110						
			Tampa EL 22622 E119						
_			Tampa, FL 33633-5118						
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description	outoi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Accounting/Banking					, officeholder living expense	
						INSF for retui			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name (Office sou	ight			Office held	
	Date		Payee name						
02/28/2019 Baptist Mission District General Assoc.									
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$50.00		C/O 4300 Noble						
			Houston, TX 77020-0000						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description	outei	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Event Expense					, officeholder living expense	
						Scholarship l	unc	cheon	
	Complete ONLY if direct	(Candidate/Officeholder name	Office sou	ght			Office held	
	expenditure to benefit C/OF	H							
-	Date		Payee name						
	03/18/2019		Bloome, Sara (Ms.)						
-	Amount (\$)			; Zip Co	nde				
	\$100.00		3730 Kirby	, בוף כס					
	\$100.00		Suite 1200						
			Houston, TX 77098-0000						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description			
	EXPENDITURE		contribution returned to donor					ide of Texas. Complete Schedule T. , officeholder living expense	
								eadline of 3/6/2019	
								-	
	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	aht			Office held	
	expenditure to benefit C/Oł								
-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement So Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr						Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2						2	Filer ID	(Ethics Commission Filers)
1								ľ		
	Sch: 3/20 Rpt: 34/53		Peake, San	dra J. (Mrs.)					00037628	
4	Date	5	Payee name							
	03/04/2019		Bullard, Jos	hua (Mr.)						
6	Amount (\$)	7	Payee addre	ss; City;	State	Zip Co	de			
ľ				-	State,	, zip co				
	\$175.00		P. O. Box 6	07481						
			Houston, T	x 77266-000	0					
8	PURPOSE	(a)	Cotogony				(b) Description			
ľ	OF				d at the top of this sch	edule)		nutsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Advertising	Expense					, officeholder living	
							advertising	, .,,		j okponeo
							duvertising			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Offi	ceholder nam	e C	Office sou	ght		Office he	eld
		· ·								
	Date		Payee name							
	04/20/2019		Burchett, Ly	/nda						
	\$300.00	00 11826 Moorcreek								
			Houston, T	x 77070-000	0					
	PURPOSE	(a)	Category va				(b) Description			
	OF				d at the top of this sch	edule)		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Event Expe	nse					, officeholder living	
										nson Rayburn dinner
							2 101013 @10			nson raybarn anner
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offi	ceholder nam	e C	Office sou	ght		Office he	eld
	experialitate to benefit C/OI									
	Date		Payee name							
	02/14/2019		Evans, Jim							
	Amount (¢)				Stata	; Zip Co	do			
	Amount (\$)		Payee addre			, zip Co	ue			
	\$250.00		201 Carolin	e - 15th f'loo	r					
			Houston, T	x 77002-000	0					
-	PURPOSE	(a)		0-4	d at the top of this sch	a dula)	(b) Description			
	OF				d at the top of this sch	edule)		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		Event Expe	lise					, officeholder living	
							HRC Gala 1			
_			an aliata in 10 m			D#6			0	- 1 -1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andıdate/Offi	ceholder nam	e C	Office sou	gnt		Office he	ela

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 Loan Fees Office Food/Beverage Expense Pollin, Gift/Awards/Memorials Expense Printir			Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	Repayment/Reimbursement e Overhead/Rental Expense ng Expense ing Expense ries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	(Ethics Commission Filers)
	Sch: 4/20 Rpt: 35/53		Peake, Sar	ndra J. (I	Mrs.)						00037628	}	
4	Date	5	Payee name										
	01/16/2019		HALL, TERRANCE										
6	Amount (\$)	7	7 Payee address; City; State; Zip Code										
	\$100.00		4305 Engleford										
			Houston, TX 77026-0000										
8	PURPOSE	(a)	Category (S	ee Categori	ies listed at the tor	o of this sche	edule)	(b)	Description				
						Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITORE										officeholder livi		
									Ticket for ML	ΚF	-rontier's B	rea	kfast
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder	rname	C	Office sou	ght			Office I	held	
	Date		Payee name										
	01/17/2019		HALL, TER	RANCE	<u>.</u>								
	Amount (\$)		Payee addre	ess; (City;	State;	Zip Co	de					
	\$50.00												
			Houston, T	X 77026	6-0000								
	PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description												
OF EXPENDITURE			Event Expense Check if travel outside of Texas. Complete Schedule T.										
									MLK misc.	, TX,	officeholder livi	ng ex	pense
									MLK IIISC.				
	Complete ONLY if direct	Ľ	Candidate/Off	iooboldo			Office sour	abt			Office I	hold	
	expenditure to benefit C/Oł		Januluale/Oli	ICEIIDIUEI	name	L.	Mice Sou	yn			Office I	neiu	
_		1											
	Date 03/29/2019		Payee name HBAD	•									
	Amount (\$)		Payee addre		City;	State;	Zip Co	de					
	\$100.00		P. O. Box 2	2352									
			Houston, T	X 77253	3-0000								
	PURPOSE	(a)			ies listed at the top	p of this sche	edule)	(b)	Description				
							avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense						
									Houston Blac				
												GIII	00.410
-	Complete ONLY if direct	Ľ	Candidate/Off	iceholde	name		Office sou	nht			Office I	held	
	expenditure to benefit C/OI			ise ioluel		C	2000 3000	gin			Childen	neiu	
-													

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Expense Committee Expense Committee Expense Committee Expense Expense Committee Committee Expense Expense Committee Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
1										
	Sch: 5/20 Rpt: 36/53	Peake, Sandra J. (Mrs.)	00037628							
4	Date	Payee name								
	02/14/2019	Houston Chronicle								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$136.95	4747 Southwest Freeway								
	+=00.00									
		Houston, TX 77027-0000								
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		outside of Texas. Complete Schedule T.							
	EXPENDITORE		n, TX, officeholder living expense							
		subscription								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/OI									
_	Date									
	03/01/2019	Payee name								
		Interiorscapes of Houston, INC								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$308.51	P. O. Box 218023								
		Houston, TX 77218-0000								
	PURPOSE									
	OF	a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.							
	EXPENDITURE		n, TX, officeholder living expense							
			/ment for plant maintenance							
		(courtrooms,								
	Complete ONL V if direct	Candidate/Officeholder name Office sought	Office held							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office field							
	•									
	Date	Payee name								
	01/31/2019	Interiorscapes of Houston, INC								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$620.00 P.O. Box 218023									
		Houston, TX 77218-0000								
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		outside of Texas. Complete Schedule T.							
	EXIENDITORE		n, TX, officeholder living expense							
		deposit on p	lants/containers							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
expenditure to benefit C/OH										

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)					
	Sch: 6/20 Rpt: 37/53		Peake, Sandra J. (Mrs.)					00037628					
4			Payee name										
	02/07/2019		Interiorscapes of Houston, INC										
6	Amount (\$)			e; Zip Co	ode								
	\$153.99	\$153.99 P. O. Box 218023											
			Houston, TX 77218-0000										
8	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(b)	Description							
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense					
								plants and containers					
								F					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ight			Office held					
	Date		Payee name										
	06/18/2019		Interiorscapes of Houston, INC										
	Amount (\$)		Payee address; City; State	e; Zip Co	ode								
	\$308.31		P. O. Box 218023										
			Houston, TX 77218-0000										
	PURPOSE OF		Category (See Categories listed at the top of this so	chedule)	(b)	Description							
	EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
						quarterly plar							
						4							
	Complete ONLY if direct	<u>с</u>	andidate/Officeholder name	Office sou	ight			Office held					
	expenditure to benefit C/OF	Н			-								
_	Date		Payee name										
	02/06/2019		Kingdom Builders Center										
	Amount (\$)		Payee address; City; State	e; Zip Co	de								
	\$125.00		4305 Engleford	-, 1									
			5										
			Houston, TX 77026-0000										
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description							
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.					
							, TX,	, officeholder living expense					
						ad							
		Ĺ	andidate (Official - Islam	0#:				Office held					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		andidate/Officeholder name	Office sou	ignt			Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)						
	Sch: 7/20 Rpt: 38/53		Peake, Sandra J. (Mrs.)				00037628						
4	Date	5	Payee name										
	04/16/2019		Kingdom Builders Center										
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le								
	\$50.00		4305 Engleford										
			Houston, TX 77026-0000										
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dulo)	b) Description								
-	OF		Gift/Awards/Memorials Expense	uule)		outsi	ide of Texas. Complete Schedule T.						
	EXPENDITURE				Check if Austir	, TX	, officeholder living expense						
					church contri	but	tion						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Of	ffice sou	ht		Office held						
	Date		Payee name										
	05/29/2019		Kingdom Builders Center										
	Amount (\$)		Payee address; City; State;	Zip Co	le								
	\$50.00		4305 Engleford										
	400.00												
			Houston, TX 77026-0000										
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	b) Description								
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.						
					awards lunch		, officeholder living expense						
					awarus iurici	ieu	n/au						
	Complete ONLY if direct		Candidate/Officeholder name Of	fice sou	ht		Office held						
	expenditure to benefit C/OF			1100 3000									
	Date		Payee name										
	01/25/2019		Mahdi, Saadia										
	Amount (\$)		Payee address; City; State;	Zip Co	le								
	\$500.00		63 Twin Valley Drive										
			Sugarland, TX 77479-0000										
	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	b) Description								
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.						
							, officeholder living expense						
					Photographe	1 10							
		L		Hing -	b 4								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	ffice sou	nt		Office held						
	r												

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria Imittee Legal Services The Instruction (ls Expense	Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor	d/Rental Expense Transportation Equipment & Related Expense Travel in District e Travel of District /Contract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)				
	Sch: 8/20 Rpt: 39/53		Peake, Sandra J. (Mrs.)00037628										
4	Date 03/15/2019	5	Payee name Peake, Sandra										
_		<u> </u>	Payee address; City; State; Zip Code										
6	Amount (\$) \$5,000.00	12038 E Circle Houston, TX 77071-0000											
8	PURPOSE	(a)	Catagony			(b) Description							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 10/05/2018 loan matured 12/31/2018.									expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office souç	ht		Office hel	d				
	Date		Payee name										
	02/28/2019		Peake, Sandra										
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le							
	\$238.74		12038 E Circle Houston, TX 77071-0000										
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed a Loan Repayment/Reimbur		nedule)	Check if Austin	ı, TX,	de of Texas. Comp officeholder living 3.74, addition					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office soug	ht		Office hel	d				
	Date		Payee name										
	02/18/2019		Peake, Sandra										
	Amount (\$) \$260.00		Payee address; City; 9660 Hillcroft, Ste. 430	State;	; Zip Coo	le							
			Houston, TX 77096-0000										
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed a Salaries/Wages/Contract		iedule)	Check if Austin	, тх, Г <mark>ruc</mark>						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	C	Office sou	ht		Office hel	d				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment											
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)										
-	Sch: 9/20 Rpt: 40/53	Peake, Sandra J. (Mrs.) 00037628										
_												
4	Date 03/29/2019	5 Payee name										
		Peake, Sandra										
6	Amount (\$)	7 Payee address; City; State; Zip Code										
	\$680.77	201 Caroline - Judge Peake										
		16th floor										
		Houston, TX 77002										
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	OF EXPENDITURE	Reimbursement - office picture framing/gifts										
	EXPENDITORE	Check if Austin, TX, officeholder living expense										
		Hobby Lobby will not accept checks drawn on										
		campaign account										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held										
	Date	Payee name										
	06/13/2019	Peake, Sandra										
_	Amount (\$) Payee address; City; State; Zip Code											
	\$451.45 201 Caroline - Judge Peake											
	+	16th floor										
		Houston, TX 77002										
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description										
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense										
		Commission framing, thank you cards										
	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/OF											
	Date	Payee name										
	06/13/2019	Peake, Sandra										
	Amount (\$)	Payee address; City; State; Zip Code										
	\$235.36	201 Caroline										
		16th floor										
		Houston, TX 77002-0000										
_	PURPOSE											
	OF											
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense										
		Court staff meeting and gratuity -Weights and										
		Measures										
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held										
	expenditure to benefit C/OF											
_												

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nittee Legal Service	ge Expense F Memorials Expense F	e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		• • • •			3 Filer ID	(Ethics Commission Filers)					
-	Sch: 10/20 Rpt: 41/53	Peake, Sandra J. (M	rs.)			00037628	(
4	Date 01/22/2019	Payee name Pink, Vicky (Ms.)										
6	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 88416 Houston, TX 77286-0000										
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Photographer - fundraiser												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder r	ame Off	fice sought		Office he	eld					
	Date	ayee name										
	01/22/2019	Print N Sign										
	Amount (\$) \$211.08	Payee address; Cii 7350 Harwin Dr. Suite 316 A Houston, TX 77036-(Zip Code								
	PURPOSE OF EXPENDITURE	Category _{(See Categories} Event Expense	listed at the top of this schedu	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Investiture								
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder r	ame Off	fice sought		Office he	eld					
	Date 01/22/2019	Payee name Raise the Money, Inc	2.									
	Amount (\$) \$12.50	Payee address; Cit P.O. Box 26466	y; State;	Zip Code								
		ittle Rock, AR 7220.										
	PURPOSE OF EXPENDITURE	Category (See Categories Accounting/Banking	listed at the top of this schedu	_{ule)} (b)		outside of Texas. Com , TX, officeholder living 2 C						
	Complete ONLY if direct expenditure to benefit C/OF	andidate/Officeholder r	ame Off	fice sought		Office he	eld					

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Event Expense Fees Food/Beverage Exp Gift/Awards/Memoria Legal Services The Instruction	ense als Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/M	ayment/ erhead/F pense xpense Vages/C	Reimbursement Rental Expense		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)		
	Sch: 11/20 Rpt: 42/53		Peake, Sar	ndra J. (Mrs.)						00037628			
4	Date	5	Payee name										
	01/29/2019		Raise the M										
6	Amount (\$)	7	Payee addre		State	; Zip Co	de						
•	\$163.20	ľ	P.O. Box 2		otato	,p 00							
		Little Rock, AR 72205-0000											
8	DUDDOCE						(h) -						
ð	PURPOSE OF	(a)	Accounting	ee Categories listed a	at the top of this sch	nedule)	(D) [Description	outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE		Accounting	/banking			Ē			officeholder living	•		
							4 1	processing fe	e				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	ght			Office he	eld		
_	Date		Payee name										
	02/01/2019		Raise the M										
	Amount (\$)	-	Payee addre		State	; Zip Co	nde						
	\$10.05		P. O. Box 2	-	Oluie,	, 20 00	uc						
	Q10.05		1.0.00/2	0400									
			Little Rock,	AR 72205-000	00								
	PURPOSE OF	(a)		ee Categories listed a	at the top of this sch	nedule)	(b) [Description	outoi	de of Toylog, Com	nlata Cabadula T		
	EXPENDITURE		Accounting	/Banking						de of Texas. Com officeholder living			
					processing fee								
								-					
	Complete ONLY if direct	Candidate/Officeholder name Office sou							eld				
	expenditure to benefit C/OI	Н											
	Date		Payee name										
	02/13/2019		Raise the M										
-	Amount (\$)	⊢	Payee addre	•	State	; Zip Co	de						
	\$12.50		P.O. Box 2			, 1							
			Little Rock,	AR 72205-00	00								
	PURPOSE OF	(a)		ee Categories listed a	at the top of this sch	iedule)	(b) [Description					
	EXPENDITURE		Accounting	/Banking						de of Texas. Com officeholder living	•		
							L	Drocessing fe		unicerioider inving	expense		
									-				
-	Complete ONLY if direct	Ľ	Candidate/Off	iceholder name	(Office sou	aht			Office he	bld		
	expenditure to benefit C/OI				(2	a						
-													

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	nmittee	Event Expense Fees Food/Beverage Expe Gift/Awards/Memorial Legal Services The Instruction C	nse Is Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)			
	Sch: 12/20 Rpt: 43/53		Peake, Sar	ndra J. (Mrs.)					00037628				
4	Date	5	Payee name										
-	02/18/2019		Raise the M										
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	le						
-	\$12.50	ľ	P.O. Box 2		Claro	, <u></u> p ee							
			Little Rock	AR 72205-000	0								
8	PURPOSE						(h) Description						
°	OF	(a)	Accounting	See Categories listed at	the top of this sch	edule)	(b) Description	outs	ide of Texas. Com	plete Schedule T.			
	EXPENDITURE		Accounting	/ Danking					officeholder living				
							processing fe	e					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	C	Office sou	Jht		Office he	eld			
	Date		Payee name	9									
	02/22/2019		Raise the M	Money, Inc.									
Amount (\$) Payee address; City; State; Zip Code													
	\$55.40	\$55.40 Raise the Money, Inc.											
			P. O. Box 2	26466									
			Little Rock	AR 22205-000	0								
	PURPOSE	(a)					(b) Description						
	OF	(,	Accounting	See Categories listed at	the top of this sch	iedule)	·	outs	ide of Texas. Com	plete Schedule T.			
	EXPENDITURE		, looounting	, Daiming					Check if Austin, TX, officeholder living expense				
							Processing fee						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so					jht	eld					
	experiature to benefit C/O												
	Date		Payee name)									
	03/07/2019		Raise the M	Money, Inc.									
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	le						
	\$5.15		P.O. Box 2	6466									
			Little Rock,	AR 72205-000	0								
	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	edule)	(b) Description						
	OF EXPENDITURE		Accounting						ide of Texas. Com				
									, officeholder living	expense			
	processing fee												
_									0.45	. I al			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Januidate/Off	ficeholder name	C	Office sou	JIIL		Office he	eiu.			

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Coi	mmittee	Event Expe Fees Food/Beve Gift/Awards Legal Servi	ense rage Expense s/Memorials Expens ices	L C P se P S	oan Repay Office Over Polling Exp Printing Exp Salaries/Wa	/ment/Reimbursement head/Rental Expense ense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)		
	Sch: 13/20 Rpt: 44/53		Peake, Sar	ndra J. (N	Ars.)					00037628			
4	Date	5	Payee name										
	02/28/2019		Raise the Money, Inc.										
6	Amount (\$)	7	Payee addre	ess; C	city;	State; 2	Zip Coo	le					
	\$12.50		P.O. Box 2	6466									
			Little Rock, AR 72205-0000										
8	PURPOSE	(a)	Category (s	ee Categorie	es listed at the top o	of this schedu	ule)	b) Description					
	OF EXPENDITURE		Accounting				,			ide of Texas. Com			
										, officeholder living	j expense		
								processing fe	e				
0	Complete ONLY if direct		Candidate/Off	icoboldor	namo	Offi	ice soug	ht		Office h	ald		
9	expenditure to benefit C/OF		Januiuale/On	Icentituei	name	OIII	ice soug	nt.		Onice In			
	Date		Payee name	•									
	01/30/2019		Raise the M	/loney, Ir	IC.								
	Amount (\$) Payee address; City; State; Zip Code												
	\$12.50	0 P.O. Box 26466											
			Little Rock, AR 72205-0000										
	PURPOSE OF EXPENDITURE	(a)	Category (s Accounting		es listed at the top o	of this schedu	<pre>chedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee</pre>						
			Canadialata (Off	i o o lo o lo lo o u		0#		b 4		Office h			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	Icenoider	name	OIII	ice soug	ght Office held					
_	Data	_											
	Date 03/06/2019		Payee name Raise the M										
				-		01-1-1	7	-					
	Amount (\$)		Payee addre P.O. Box 2		City;	State; Z	ZIP COC	le					
	\$74.50		P.U. DUX 2	0400									
			Little Rock,	AR 722	05-0000								
	PURPOSE	(a)	Category (S	ee Categorie	es listed at the top o	of this schedu	ule)	b) Description					
	OF EXPENDITURE	Accounting/Banking											
-	Complete ONLY if direct	Ľ	Candidate/Off	iceholder	name	Offi	ice soug	ht		Office h	əld		
	expenditure to benefit C/Oł					UII				Chiec II			

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	nmittee	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					quipment & Related Expense			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	
	Sch: 14/20 Rpt: 45/53		Peake, San	dra J. (Mr	s.)					00037628		
4	Date	5	Payee name									
	01/30/2019		Raise the M	loney, Inc								
6	Amount (\$)	7	Payee addre	ss; City	; State	e; Zip Co	ode					
	\$12.50		P.O. Box 26	6466								
		Little Rock, AR 72205-0000										
8	PURPOSE	(a)	Category (S	e Categories	listed at the top of this so	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting/			incuaic)			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE		-	-						officeholder living	expense	
								processing fe	e			
_	-						<u> </u>					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder n	ame	Office sou	ught			Office he	ald	
	Date		Payee name									
	01/28/2019		Raise the M	loney, Inc								
	Amount (\$)		Payee addre	ss; City	y; State	e; Zip Co	ode					
	\$24.75	\$24.75 P.O. Box 26466										
			Little Rock,	AR 72205	5-0000							
	PURPOSE	(a)	Category (Se	e Categories	listed at the top of this so	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting							de of Texas. Com		
	-						Check if Austin, TX, officeholder living expense processing fee					
								processing ie	e			
	Complete ONLY if direct		Candidate/Offi	ceholder n	ame	Office sou	Int			Office he	٩d	
	expenditure to benefit C/OI		Sandidato, Om				igin			enice ne		
_	Date		Payee name									
	01/30/2019		Raise the M	lonev. Inc								
	Amount (\$)		Payee addre	-		e; Zip Co	nde					
	\$12.50		P.O. Box 26	-	y, Oldi	c, zip oc	Juc					
	\$12.00		1.0.00.20	100								
			Little Rock,	AR 72205	5-0000							
	PURPOSE OF	(a)			listed at the top of this so	chedule)	(b)	Description				
	EXPENDITURE		Accounting/	Banking						de of Texas. Com officeholder living	•	
								processing fe		oncentituer invirig	Texpense	
-	Complete ONLY if direct	L(Candidate/Offi	ceholder n	ame	Office sou	l Jght			Office he	eld	
	expenditure to benefit C/OI						5					
-												

Sch: 15/20 Rpt: 46/53 Peake, Sandra J. (Mrs.) 00037628 4 Date 01/20/2019 5 Payee name Raise the Money, Inc. 7 Payee address; City; State; Zip Code P.O. Box 26466 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder liking expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name 02/17/2019 Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. State; Zip Code P.O. Box 26466 State; Zip Code Amount (\$) \$1.48 Payee address; City; State; Zip Code State; Zip Code
Sch: 15/20 Rpt: 46/53 Peake, Sandra J. (Mrs.) 00037628 4 Date 01/20/2019 5 Payee name Raise the Money, Inc. 6 Amount (\$) 6 Amount (\$) 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72205-0000 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Correction C
Sch: 15/20 Rpt: 46/53 Peake, Sandra J. (Mrs.) 00037628 4 Date 01/20/2019 5 Payee name Raise the Money, Inc. 6 Amount (\$) 7 Payee address; City; State; Zip Code P.O. Box 26466 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Raise the Money, Inc. Date 02/17/2019 Payee name Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72205-0000
4 Date 01/20/2019 5 Payee name Raise the Money, Inc. 6 Amount (\$) \$24.75 7 Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72205-0000 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name 02/17/2019 Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code P.O. Box 26466 State; Zip Code Amount (\$) \$1.48 Payee address; City; State; Zip Code Little Rock, AR 72205-0000 State; Zip Code
01/20/2019 Raise the Money, Inc. 6 Amount (\$) 7 Payee address; City; State; Zip Code \$ 24.75 P.O. Box 26466 Little Rock, AR 72205-0000 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Justin, TX, officeholder IVing expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code State; Zip Code Amount (\$) Payee address; City; State; Zip Code Little Rock, AR 72205-0000 Little Rock, AR 72205-0000
6 Amount (\$) 7 Payee address; City; State; Zip Code \$24.75 7 Payee address; City; State; Zip Code 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code Payee address; City; State; Zip Code Amount (\$) \$1.48 Payee address; City; State; Zip Code Little Rock, AR 72205-0000
\$24.75 P.O. Box 26466 Little Rock, AR 72205-0000 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 02/17/2019 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72205-0000
Little Rock, AR 72205-0000 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OF Candidate/Officeholder name Office sought Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code P.O. Box 26466 State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000 Inter Rock
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code P.O. Box 26466 Payee address; City; State; Zip Code \$1.48 Payee address; City; Other Code State; Zip Code Pote
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code P.O. Box 26466 Payee address; City; State; Zip Code \$1.48 Payee address; City; Other Code State; Zip Code Pote
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Raise the Money, Inc. Payee address; City; State; Zip Code P.O. Box 26466 Payee address; City; State; Zip Code \$1.48 Payee address; City; Other Code State; Zip Code Pote
OF EXPENDITURE Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date 02/17/2019 Payee name Office sought Office held Amount (\$) Payee address; City; State; Zip Code State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
EXPENDITURE Accounting/Banking Image: Create in date dusing of reads. Complete schedule if. 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date Payee name O2/17/2019 Raise the Money, Inc. Image: Create in the output of the
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date Payee name Payee name Office sought Office held 02/17/2019 Raise the Money, Inc. Payee address; City; State; Zip Code State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000 Little Rock
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Date Payee name Raise the Money, Inc. Payee address; City; State; Zip Code Amount (\$) Payee address; City; State; Zip Code Little Rock, AR 72205-0000
expenditure to benefit C/OH Payee name Date Payee name 02/17/2019 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
expenditure to benefit C/OH Payee name Date Payee name 02/17/2019 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
02/17/2019 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
02/17/2019 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
Amount (\$) Payee address; City; State; Zip Code \$1.48 P.O. Box 26466 Little Rock, AR 72205-0000 Little Rock
\$1.48 P.O. Box 26466 Little Rock, AR 72205-0000
Little Rock, AR 72205-0000
DUPPOSE (2) Catagory (b) Departmention
FURFUSE II. ALCONV (See Categories listed at the ten of this selectule) II. Description
OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE
processing fee
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH
Data Davia nama
Date Payee name
03/01/2019 Raise the Money, Inc.
Amount (\$) Payee address; City; State; Zip Code
\$47.30 P.O. Box 26466
Little Rock, AR 72205-0000
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description
OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE Check if Austin, TX, officeholder living expense
processing fee
Complete ONLY if direct Candidate/Officeholder name Office sought Office held
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held

	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 Exp Gift/Awards/Memori Legal Services	ense als Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 16/20 Rpt: 47/53		Peake, San	dra J. (Mrs.)					00037628	
4	Date	5	Payee name							
	03/02/2019		Raise the M	oney, Inc.						
6	Amount (\$)	7	Payee addres	s; City;	State	Zip Co	de			
	\$12.50		P.O. Box 26	-		•				
			Little Rock,	AR 72205-00	00					
8	PURPOSE	(a)			at the top of this sch		(b) Description			
-	OF	()	Accounting/		at the top of this sch	edule)		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE						Check if Austin	, TX,	officeholder living	expense
							Processing fe	ee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght		Office he	eld
	Date		Payee name							
	01/28/2019		Raise the M	oney, Inc.						
	Amount (\$)		Payee addres	s; City;	State	; Zip Co	de			
	\$24.75		P.O. Box 26	466						
			Little Rock,	AR 72205-00	00					
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Accounting/	Banking					de of Texas. Com	
	_/								officeholder living	expense
							processing fe	e		
_	Complete ONLY if direct		Candidata/Offi	ceholder name		Office sou	abt		Office he	ald
	expenditure to benefit C/Oł		candidate/onit				gin		Onice ne	
_	Data									
	Date 01/30/2019		Payee name Raise the M	onev Inc						
				-	Ctoto	- Zin Co	do			
	Amount (\$) \$12.50		Payee addres P.O. Box 26	-	State,	; Zip Co	ue			
	φ12.50		F.U. DUX 20	400						
			Little Rock,	AR 72205-00	00					
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Accounting/		·	,	Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE								officeholder living	expense
							processing fe	e		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder name	C	Office sou	ght		Office he	ld
	,									

	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 Loan Repayment/Reimbursement Fees Office Overhead/Reimbursement Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor		ntal Expense tract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 17/20 Rpt: 48/53		Peake, Sandra J. (Mrs.)					00037628	
4	Date	5	Payee name						
	05/02/2019		Run Sister Run PAC						
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de				
	\$175.00		P. O. Box 66470						
			Houston, TX 77266-0000						
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(alube	(b) De:	scription			
	OF		Contributions/Donations Made By	cuuic)			outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee				officeholder living	•
					COI	ntribution to	owa	ard sustainir	ng organization
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Iht			Office he	eld
	Date		Payee name						
	01/20/2019		T-Mobile						
	Amount (\$)	┢	Payee address; City; State;	Zip Co	le				
	\$148.28		11200 Fondren						
			Suite 200						
			Houston, TX 77096-5508						
_	PURPOSE	(0)			(b) D.				
	OF	(a)	Category (See Categories listed at the top of this sche Credit Card Payment	edule)	U) De:	scription Check if travel c	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Cledit Cald Fayment		H			officeholder living	•
					pu	rchase of n	not	oile hot spot,	additional cable
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	jht			Office he	eld
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	02/26/2019		Taylor, Barbara (Mrs.)						
	Amount (\$)		Payee address; City; State;	Zip Co	de				
	\$500.00		1238 Magnolia Dale						
			Fresno, TX 77545-0000						
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) De:	scription			
	OF EXPENDITURE		Salaries/Wages/Contract Labor	ŕ				de of Texas. Com	
	EXPENDITORE							officeholder living	
					He	ip supervis	se c	office closing	and moving
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ht			Office he	eld
		-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Ex Printing Ex Salaries/W	rhead/R pense pense ages/Co	Reimbursement lental Expense ontract Labor this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 18/20 Rpt: 49/53		Peake, Sandra J. (Mrs.)					00037628
4	Date	5	Payee name					
	02/22/2019		Texas Assoc. of District Judges					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de			
-	\$20.00		P. O. Box 1748					
			Austin, TX 78767-0000					
•	DUDDOSE	(0)			(h) p			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)	(0) D Г	escription Check if travel c	outsio	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee	F			officeholder living expense
					'n	nembership f	fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name C	office sou	ght			Office held
	Date		Payee name					
	04/16/2019		The Caucus					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$250.00		P. O. Box 66664	1				
			Houston, TX 77266-6664					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) D	escription		de ef Teures, Complete Cabadula T
	EXPENDITURE		Event Expense		F	4		de of Texas. Complete Schedule T. officeholder living expense
					S	pring Fling		
	Complete ONLY if direct	(Candidate/Officeholder name C)ffice sou	ght			Office held
	expenditure to benefit C/OI	H						
	Date		Payee name					
	01/15/2019		Tru Insight					
-	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$300.00		6122 Grey Oaks	·				
			-					
			Houston, TX 77050-0000					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) D	escription	sute:	do of Toyoo, Complete Schodule T
	EXPENDITURE		Advertising Expense		F			de of Texas. Complete Schedule T. officeholder living expense
					L V	Veb mainten		
-	Complete ONLY if direct	L(Candidate/Officeholder name C	office sou	ght			Office held
	expenditure to benefit C/OI				-			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/20 Rpt: 50/53	Peake, Sandra J. (Mrs.)	00037628
4	Date 02/07/2019	Payee name Tru Insight	
6	Amount (\$) \$600.00	Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000	
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Ince Feb and March
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/26/2019	Tru Insight	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date 04/08/2019	Payee name Tru Insight	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code 6122 Grey Oaks	
		Houston, TX 77050-0000	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ANCE
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense	ht/Reimbursement Solicitation/Fundraising Expense i/Rental Expense Transportation Equipment & Related Expense i/Rental Expense Travel in District e Travel Out of District /Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 20/20 Rpt: 51/53	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628
	-	5 Payee name Tru Insight	
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000	
8	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social media
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held
	Date 06/26/2019 Amount (\$) \$150.00	Payee name Tru Insight Payee address; City; State; Zip Code 6122 Grey Oaks Houston, TX 77050-0000	
	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Web communications
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District xpense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 1/1 Rpt: 52/53	2 FILER NAME Peake, Sandra J. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00037628			
4 Date 02/04/2019	5 Payee name Choir Robe Creations				
6 Amount (\$) \$120.00 X Reimbursement from political contributions intended	 Payee address; City; State; Zip C 3804 Poplar Houston, TX 77087-0000 	ode			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) dress maker for judicial robe	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense black robe			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 01/30/2019	Payee name High Fashion Fabric				
Amount (\$) \$118.74	from				
X political contributions intended	Houston, TX 77006-0000				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) fabric and buttons for robe	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense black robe (fabric and robe reimbursed to SPeake			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date 01/11/2019	Payee name Law Offices of David G and Sandra J Peake				
Amount (\$) \$260.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 9660 Hillcroft Suite 435 Houston, TX 77096	ode			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense moving expense - Payment made to Two Men & Truck			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

TEXT ANNOTATION

Sch: 1/1 Rpt: 53/53

FILER NAME	Filer ID (Ethics Commission Filers)
Peake, Sandra J. (Mrs.)	00037628

Schedule A2

Information entered by filer as a memo:

LaGriglia fundraiser co-sponsor