JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to com	plete this form.	1 Filer ID (Ethics Commi 00037628	· ·	2 Total page	s filed: 61
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER NAME	The Honorable	Sandra J.		ivii	OFFIC	E USE ONLY
						ICALLY FILED
	NICKNAME	LAST		SUFFIX	01/18/2022	
		Peake				
4 CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivere	ed or Date Postmarked
OFFICEHOLDER MAILING	201 Caroline					
ADDRESS	16th Floor				Receipt #	Amount
Change of Address	Houston, TX 77002-0000)				
					Date Processed	
					Data lana and	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER	Mr.	David G.				
NAME						
	NICKNAME	LAST			SUFFIX	
		Peake				
6 CAMPAIGN	STREET ADDRESS (NO PO		Δ	r / SUITE #; CITY;		STATE; ZIP CODE
TREASURER	9660 Hillcroft, Ste. 430	o box i lease),				
ADDRESS	9000 Tilliciolit, Ste. 450					
(Residence or Business)						
	Houston, TX 77096					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER	(713) 894-5111					
PHONE	(. =0) 00 . 0===					
8 REPORT						
TYPE	X January 15	30th day before	e election	Runoff		campaign treasurer officeholder only)
	July 15	8th day before		Exceeded modified	-	Attach C/OH-FR)
				reporting limit		
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2021	ті	HROUGH	12/31/202		
	01/01/2021			12,01,202	-	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary		Other	
			Seneral	Special		
				1		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
	District Judge District 25	7 Harris		Family District C	ourt Judge Dis	strict 257
	-			•		
		GO ⁻	TO PAGE 2			
Forms provided by Te	exas Ethics Commission		thics.state.tx.u	9		Version V1.1.ab979f02
		*****.CI		<u> </u>		· 5.51011 * ±.±.40575102

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 61

I

13 C / OH NAME	Peake, Sandra J. (Th	e Honorable)	14 Filer ID 00037628	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendition These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	ceholder's knowledge or
Additional Pages		COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 2,176.55
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$ 39,613.10
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·	IZED POLITICAL EXPENDITURES	,	\$ 25,556.31
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 51,112.62
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 12,763.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hono	orable Sandra J. Pea	ake
		Signature o	f Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL AB	OVE		
		aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V1.1.ab979f02

FORM JC/OH COVER SHEET PG 3

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18 FILI	ER NAM	1E	19 Filer ID	(Eth	ics Commission Filers)
		ndra J. (The Honorable)	00037628	·	
		E SUBTOTALS			SUBTOTAL AMOUNT
NAI	MEOFS	SCHEDULE			
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	35,260.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,353.10
3.	Х	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	0.00
4.	Х	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	50,532.62
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
7.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	0.00
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	580.00
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

SUBTOTALS - JC/OH

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/26 Rpt: 4/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/28/2021	Allen, Amy (Ms.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77056-0000		
8 Contributor's R	Principal Occupation	9 Contributor's Job Title	
Attorney at L	aw	Attorney at Law	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Gray Reed,	LLM	n/a	
12 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 (\$)
09/22/2021	Alsandor, Cheryl (Ms.)		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77085-0000		
Contributor's 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		n/a	
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	
Data	Full name of contributor out-of-state PAC (ID#:		
Date)	Amount of Contribution (\$)
09/24/2021	Amaro, James		\$500.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77008-0000		
Contributor's 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)
Amaro Law	Firm	n/a	
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/26 Rpt: 5/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor 🔲 out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
09/29/2021	Andrews, Gloria (Ms.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Portsmouth, VA 23701-0000		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
retired		educator	
10 Contributor's e	employer/law firm	11 Law firm of contributor's s	pouse (if any)
n/a		n/a	
12 If contributor in	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 (\$)
09/06/2021	Badat, Fahmida (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	Houston, TX 77066-0000		
	Principal Occupation	Contributor's Job Title	
retired		n/a	
Contributor's e	employer/law firm	Law firm of contributor's s	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 (Amount of Contribution (\$)
	Full name of contributor out-of-state PAC (Banks, Willie (Mr.)	ID#:)	Amount of Contribution (\$)
08/13/2021			\$100.00
	Contributor address; City; State; Zip Code		
	Hineston, LA 71438-0000		
Contributor's I	Principal Occupation	Contributor's Job Title	•
retired n/a			
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
n/a n/a			
If contributor is a child, law firm of parent(s) (if any)			
n/a			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/26 Rpt: 6/61	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/21/2021	Bates, Nicole (Ms.)		\$250.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77018-0000		
8 Contributor's 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	oouse (if any)
	f Nicole R. Bates	n/a	
	s a child, law firm of parent(s) (if any)	- In a	
n/a	s a child, law little of parent(s) (if any)	n/a	
11/4			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/11/2021	Baughman, Bruce (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Baytown, TX 77521-2365		
Contributor's I	Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
Contributor's 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	
		1i/a	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/23/2021	Boler, Nancy		\$250.00
	Contributor address; City; State; Zip Code		
	Bellaire, TX 77401-0000		
Contributor's I	I Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
_	employer/law firm	Law firm of contributor's sp	nouse (if any)
Contributor's employer/law firmLaw firm of contributor's spn/an/a			
	c a child low firm of percent(c) (if any)	1,74	
If contributor is a child, law firm of parent(s) (if any) n/a n/a			
n/a		11/a	

			1 Total pages Schedule A(J)1:
	The Instruction Guide explains how to complete this form.		Sch: 4/26 Rpt: 7/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/18/2021	Bonner, Alice (Judge)		\$100.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77021-0000		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
retired		n/a	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
n/a		n/a	
12 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 (\$)
10/28/2021	Bostic, Denise (Ms.)		\$50.00
	Contributor address; City; State; Zip Code		1
	Stafford, TX 77477		
	Principal Occupation	Contributor's Job Title	
Office Manag	-	Office Manager	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
n/a		n/a	
n/a	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 (\$)
10/18/2021	Boudloche, Mike (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	Corpus Christi, TX 78413		
Contributor's F	Principal Occupation	Contributor's Job Title	
	ikruptcy Trustee	Attorney at Law	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
none n/a			
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	

The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 5/26 Rpt: 8/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Peake, Sand	dra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
09/22/2021	Brock, Julie (Ms.)		\$500.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77047-0000		
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 s	pouse (if any)
n/a		n/a	
12 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 (\$)
10/27/2021	Brown, Russell (Mr.)		\$150.00
	Contributor address; City; State; Zip Code		
	Mesa, AZ 85203-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (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 (\$)
09/22/2021	Bruce, LaShon Fleming (Ms.)		\$150.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77070-4677		
Contributor's F	I Principal Occupation	Contributor's Job Title	I
Attorney at L		Attorney	
-	employer/law firm	Law firm of contributor's s	pouse (if any)
self n/a			
If contributor is	s a child, law firm of parent(s) (if any)		
n/a		n/a	

The Instruction Guide explains how to comple	The Instruction Guide explains how to complete this form.	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Peake, Sandra J. (The Honorable)		00037628
4 Date 5 Full name of contributor out-of-stat	te PAC (ID#:)	7 Amount of Contribution (\$)
09/22/2021 Burgower, Wendy (Ms.)		\$500.00
6 Contributor address; City; State; Zip Code	9	
Houston, TX 77024-0000		
8 Contributor's Principal Occupation	9 Contributor's Job Title	•
Attorney	Attorney	
10 Contributor's employer/law firm	11 Law firm of contributor's s	pouse (if any)
self	n/a	
12 If contributor is a child, law firm of parent(s) (if any)		
n/a	n/a	
Date Full name of contributor out-of-stat	te PAC (ID#:)	Amount of Contribution (\$)
09/28/2021 Carlin, Amy		\$500.00
Contributor address; City; State; Zip Code	9	
Houston, TX 77002-0000		
Contributor's Principal Occupation	Contributor's Job Title	
Attorney	Attorney at Law	
Contributor's employer/law firm	Law firm of contributor's s	pouse (if any)
Carlin Law Firm	n/a	
If contributor is a child, law firm of parent(s) (if any)	I	
n/a	n/a	
Date Full name of contributor Out-of-stat		Amount of Contribution (\$)
	te PAC (ID#:)	
		\$500.00
Contributor address; City; State; Zip Code	2	
Houston, TX 77069-0000		
Contributor's Principal Occupation	Contributor's Job Title Attorney at Law	
Attorney		
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)
self		
If contributor is a child, law firm of parent(s) (if any)	·	
n/a n/a		

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/26 Rpt: 10/61	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/28/2021	Clevenger, George		\$500.00
	6 Contributor address; City; State; Zip Code		
	Spring, TX 77379-0000		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
Clevenger L	aw Firm	n/a	
12 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 (\$)
09/20/2021	Cusic, Dessiray (Ms.)		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77044-0000		
Contributor's I	Principal Occupation	Contributor's Job Title	
Attorney at L	aw	Attorney	
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 (\$)
09/29/2021	Dale, Laura		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77056-0000		
O susteile standa	l	O antributaria Jak Titla	
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
	and Associates	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 f	orm.	1 Total pages Schedule A(J)1: Sch: 8/26 Rpt: 11/61		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Peake, Sand	Ira J. (The Honorable)		00037628		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)		
11/10/2021	Davis, Edward (Mr.)		\$150.00		
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77077-0000				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
attorney		Attorney			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
self		n/a			
12 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 (\$)		
10/27/2021	Diggs & Sadler Law Firm		\$2,000.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77007-0000				
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	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
11/10/2021	FullenwiederWilhite		\$1,000.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77027-0000				
Contributor's F	Principal Occupation	Contributor's Job Title			
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)				
L Formo providad	by Taxas Ethics Commission www.athic		Version V1 1 ab070f02		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/26 Rpt: 12/61
2 FILER NAME Peake, Sand	Ira J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00037628
4 Date 12/06/2021	 5 Full name of contributor out-of-state PAC (ID#: Garcia, Alicia (Mrs.) 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$100.00
	Houston, TX 77008-0000		
8 Contributor's F retired	Principal Occupation	9 Contributor's Job Title n/a	·
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
n/a		n/a	
12 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 (\$)
09/23/2021	Gbenjo, Anne (Mrs.)		\$250.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77074-0000	1	
	Principal Occupation	Contributor's Job Title	
Attorney	and a seal as so firms	Attorney at Law	
The Gbenjo	employer/law firm	Law firm of contributor's sp n/a	Jouse (II any)
-	s a child, law firm of parent(s) (if any)	nind .	
n/a		n/a	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/23/2021	Grace, Ojay (Mr.)		\$150.00
	Contributor address; City; State; Zip Code		1
	Houston, TX 77074-0000		
	Principal Occupation	Contributor's Job Title	
retired		Attorney at Law	
NONE	employer/law firm	Law firm of contributor's sp NONE	bouse (if any)
	s a child, law firm of parent(s) (if any)	NONE	
NONE	s a child, law littl of parend(s) (if any)	NONE	
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V1.1.ab979f02

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/26 Rpt: 13/61	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Peake, Sandra J. (The Honorable)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
10/27/2021	Gray, Daniel (Mr.)		\$500.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77005-0000			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
Attorney		Attorney		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
self		Altus Infusion		
12 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 (\$)	
09/22/2021	Gray, Daniel (Mr.)		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Bellaire, TX 77401-5316			
Contributor's 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 (\$)	
09/21/2021	Gray, Reed & McGraw, LLP		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77056-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor's 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)			

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/26 Rpt: 14/61
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Peake, Sand	dra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/20/2021	Guillerman, Diane (Mrs.)		\$50.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77077-0000		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
retired		none	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
none		none	
12 If contributor i	s a child, law firm of parent(s) (if any)		
none		n/a	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/29/2021	Guillerman, Diane (Mrs.)		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77077-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
retired		Attorney at Law	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
RETIRED		n/a	
	is 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 (\$)
10/20/2021	Hall, Benjamin (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77023-0000		
	Principal Occupation	Contributor's Job Title	
Attorney Attorney			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)	
The Hall Law Group, PLLC n/a			
If contributor is a child, law firm of parent(s) (if any)			
n/a	n/a n/a		

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 12/26 Rpt: 15/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	dra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
10/28/2021	Holmes, Diggs & Sadler		\$2,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77007-0000		
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)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
10/28/2021	James, Andrew (Dr.)		\$100.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77071-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Education		retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (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 (\$)
09/22/2021	Johnson, Gaye (Ms.)	······································	\$100.00
	Contributor address; City; State; Zip Code		
	Missouri City, TX 77459-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
medical supp		technician	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Methodist Hospital None			
If contributor is a child, law firm of parent(s) (if any)			
n/a n/a			

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
	Peake, Sandra J. (The Honorable)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/22/2021	Jones, Shonda (Ms.)		\$500.00	
	6 Contributor address; City; State; Zip Code		1	
	Houston, TX 77054-0000			
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		self		
12 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 (\$)	
09/22/2021	Jones, Shonda (Ms.)		\$500.00	
			•	
	Pearland, TX 77564-0000			
Contributor's Principal Occupation Contributor's Job Title				
Attorney		Attorney at Law		
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)	
self		n/a		
If contributor is	s a child, law firm of parent(s) (if any)			
n/a		n/a		
11/4		11/4	1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/29/2021	Lee, Chung (Mr.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77002-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
attorney		attorney		
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)		
CY Legal Group, PLLC n/a				
_	s a child, law firm of parent(s) (if any)			
n/a n/a				

			1 Total pages Schedule A(J)1:	
The Instruction Guide explains how to complete this form.		Sch: 14/26 Rpt: 17/61		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	dra J. (The Honorable)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)	
10/27/2021	Lee, Tuan (Mr.)		\$50.00	
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77004-0000	-		
	Principal Occupation	9 Contributor's Job Title		
office emplo		same		
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
	_	n/a		
	s a child, law firm of parent(s) (if any)			
n/a		n/a		
Date)	Amount of Contribution (\$)	
09/20/2021	Lockings, Elton (Mr.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77036-0000			
Contributor's	Principal Occupation	Contributor's Job Title	l	
Attorney		Attorney at Law		
	employer/law firm	Law firm of contributor's s	pouse (if any)	
self		self		
If contributor i	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 (\$)	
10/18/2021	Lundin, Keith (Mr.)		\$500.00	
	Contributor address; City; State; Zip Code			
	Pittsburgh, PA 15243-0000			
Contributor's	Principal Occupation	Contributor's Job Title		
retired Judge, retired				
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)		
n/a n/a				
If contributor is a child, law firm of parent(s) (if any)				
n/a n/a				

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2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sand	Ira J. (The Honorable)		00037628	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/22/2021	McFerren, Eric (Mr.)		\$500.00	
	6 Contributor address; City; State; Zip Code			
	Richmond, TX 77407-0000			
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		n/a		
12 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 (\$)	
10/27/2021	Miller, Clarence (Mr.)		\$100.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77269-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
retired		retired		
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
none		none		
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 (\$)	
10/28/2021	Neely, Sherry (Mrs.)		\$100.00	
	Contributor address; City; State; Zip Code			
	Missouri City, TX 77459-0000			
Contributor's F	Principal Occupation	Contributor's Job Title		
retired Retired				
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
n/a n/a				
If contributor is	s a child, law firm of parent(s) (if any)			
n/a n/a				

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/26 Rpt: 19/61
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Peake, Sandra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/22/2021	Nguyen, Dan-Phi (Mr.)		\$1,000.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77072-0000		
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	ouse (if any)
self			
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 (\$)
09/22/2021	Nguyen, Dan-Phi (Mr.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston , TX 77072-0000		
Contributor's F	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)
	f Dan-Phi Nguyen, PLLC	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 (\$)
09/22/2021	Parker, Leniece (Ms.)		\$250.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77002-0000		
	Principal Occupation	Contributor's Job Title	
attorney Attorney at Law			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Law Office of Leniece Parker n/a			
If contributor is a child, law firm of parent(s) (if any)			
n/a n/a			

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Peake, Sandra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state P.	PAC (ID#:)	7 Amount of Contribution (\$)
10/20/2021	Peake, Sandra		\$10.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77002-0000		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
District Cour	rt Judge	Judge	
10 Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
n/a		n/a	
	is a child, law firm of parent(s) (if any)		
n/a		n/a	
Date	Full name of contributor	PAC (ID#:)	Amount of Contribution (\$)
09/23/2021	Ramos, Rick (Mr.)		\$1,000.00
	Contributor address, City, State, Zip Code		
	Houston, TX 77019-0000		
Contributor's Principal Occupation Contributor's Job Title			
Attorney at I	_aw	Attorney at Law	
Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
self		n/a	
If contributor	s a child, law firm of parent(s) (if any)		
n/a		n/a	
Date	Full name of contributor	NAC (ID#)	Amount of Contribution (\$)
09/22/2021		AC (ID#)	
03/22/2021			\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77019-0000		
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		pouse (if any)	
self n/a			
If contributor i	is a child, law firm of parent(s) (if any)		
n/a n/a			
1//a 1//a			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 18/26 Rpt: 21/61		
2 FILER NAME Peake, Sanc	2 FILER NAME Peake, Sandra J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00037628		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)		
10/20/2021	Robinson, Ronique (Mrs.)		\$100.00		
	6 Contributor address; City; State; Zip Code				
	Stafford, TX 77477-0000				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
Lawyer		Attorney at Law			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	pouse (if any)		
Bastine Law		n/a	(<i>)</i> ,		
	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 (\$)		
10/17/2021	Rogers, Gail (Ms.)		\$100.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77057-0000				
Contributor's F	Principal Occupation	Contributor's Job Title			
Human Reso		Manager			
	employer/law firm	Law firm of contributor's sp	oouse (if any)		
Wolters Kluv					
	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
09/28/2021	Runge, Barbara		\$250.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77005-0000				
Contributor's F	Principal Occupation	Contributor's Job Title			
Attorney Attorney at Law					
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)			
self n/a					
If contributor is	s a child, law firm of parent(s) (if any)				
n/a n/a					

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/26 Rpt: 22/61
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	dra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/22/2021	Runge, Barbara (Ms.)		\$250.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77005-0000		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney at Law	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
self		n/a	
12 If contributor i	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 (\$)
10/05/2021	Simms, Danielle (Ms.)		\$1,000.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77036-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
Simms Law		n/a	
If contributor i	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 (\$)
09/11/2021	Singleton, Thomas (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
Attorney Attorney at Law			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
self n/a			
If contributor i	s a child, law firm of parent(s) (if any)		
n/a n/a			

The Instru	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/26 Rpt: 23/61		
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Peake, Sand	Ira J. (The Honorable)		00037628		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)		
11/14/2021	Skelly, Michael (Mr.)		\$200.00		
	6 Contributor address; City; State; Zip Code				
0 Constributoria	Houston, TX 77003-0000	0 Contributorio Job Title			
Engineer	Principal Occupation	9 Contributor's Job Title Energy executive			
10 Contributor's e	pmployor/low firm	11 Law firm of contributor's sp			
Grid United		n/a	Jouse (II ally)		
	s a child, law firm of parent(s) (if any)	174			
n/a		n/a			
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)		
Date 10/21/2021	Full name of contributor out-of-state PAC (ID#: Smith, Freddie (Mr.))	Amount of Contribution (\$) \$200.00		
10/21/2021	Contributor address; City; State; Zip Code				
	Contributor address, City, State, Zip Code				
	Houston, TX 77071				
Contributor's Principal Occupation Contributor's Job Title					
retired		retired			
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
none		none			
If contributor is	s a child, law firm of parent(s) (if any)				
none		none			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
09/23/2021	Sterling, Jon Karen		\$200.00		
	Contributor address; City; State; Zip Code		1		
	Rosenberg, TX 77471-6715				
	Principal Occupation	Contributor's Job Title			
retired retired					
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)			
n/a n/a					
If contributor is a child, law firm of parent(s) (if any)					
11/a	n/a n/a				

The Instrue	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/26 Rpt: 24/61		
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Peake, Sand	Ira J. (The Honorable)		00037628		
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)		
10/27/2021	Stout, Angela (Ms.)		\$500.00		
	6 Contributor address; City; State; Zip Code				
	Houston, TX 77008-4017				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
Attorney		Attorney			
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
The Stout La	w Firm, PLLC	n/a			
12 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 (\$)		
09/22/2021	The Torres Law Group		\$1,500.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77018-0000				
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	s a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
09/22/2021	Thierry, Bonita (Ms.)		\$250.00		
	Contributor address; City; State; Zip Code				
	Houston, TX 77002				
	Contributor's Principal Occupation Contributor's Job Title				
attorney Attorney at Law					
Contributor's 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					

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 22/26 Rpt: 25/61	
2 FILER NAME Peake, Sandra J. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00037628		
4 Date 12/20/2021			7 Amount of Contribution (\$) \$100.00	
	Houston, TX 77082-0000			
	Principal Occupation	9 Contributor's Job Title		
Attorney	ne na cu a ulla cu finna	Attorney at Law		
10 Contributor's e self	employernaw irm	11 Law firm of contributor's sp n/a	Jouse (il any)	
	s a child, law firm of parent(s) (if any)	1.174		
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/22/2021	Voung, David (Mr.)		\$100.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77082-0000			
Contributor's Principal OccupationContributor's Job TitleAttorneyAttorney				
	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 (\$)	
09/22/2021	Waddell Law Firm		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77046-0000			
Contributor's I	Principal Occupation	Contributor's Job Title		
Contributor's 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)			
Forme provided	hy Texas Ethics Commission www.ethic	s state ty us	Version V1 1 ab979f02	

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2 FILER NAME	LER NAME		3 Filer ID (Ethics Commission Filers)
Peake, San	dra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of Contribution (\$)
09/22/2021	Williams, Amarah		\$50.00
	6 Contributor address; City; State; Zip Code		
	Katy, TX 77449-0000		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	•
unemployed	1	n/a	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
n/a		n/a	
12 If contributor	is 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 (\$)
09/22/2021	Williams, Amarah (Ms.)		\$50.00
	Contributor address; City; State; Zip Code		
	Katy, TX 77449-0000		
Contributor's Principal Occupation Contributor's Job Title			
n/a		n/a	
Contributor's	employer/law firm	Law firm of contributor's sp	bouse (if any)
n/a		n/a	
If contributor i	is 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 (\$)
10/28/2021	Williams, Angela (Ms.)		\$100.00
	Contributor address; City; State; Zip Code		
	Katy, TX 77449-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
Benefits ma		Manager	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
ALS NONE			
	is a child, law firm of parent(s) (if any)	-	
NONE			
		-	

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 24/26 Rpt: 27/61
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Peake, Sandra J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/12/2021	Williams, Angela (Ms.)		\$250.00
	6 Contributor address; City; State; Zip Code		
	Katy, TX 77449-0000		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
Benefits Mar	nager	Benefits Manager	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
ALS Group L	JSA	n/a	
12 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 (\$)
07/25/2021	Williams, Angela (Ms.)		\$250.00
	Contributor address; City; State; Zip Code		
	Katy, TX 77449-0000		
Contributor's Principal Occupation Contributor's Job Title			
Benefits Mar	nager	Manager	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
ALS Internat	ional	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 (\$)
10/28/2021	Williams, Hyacinth and Nina	,	\$100.00
	Contributor address; City; State; Zip Code		
	Missouri City, TX 77489-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Operations N		Manager	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
n/a n/a			
	s a child, law firm of parent(s) (if any)		
n/a n/a			

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 25/26 Rpt: 28/61
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Peake, Sand	Ira J. (The Honorable)		00037628
4 Date	5 Full name of contributor out-of-state PAC (ID#)	7 Amount of Contribution (\$)
09/22/2021	Willie, Christine		\$600.00
	6 Contributor address; City; State; Zip Code		
	Houston, TX 77096-0000		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	1
Attorney		Attorney at Law	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
self		n/a	
12 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 (\$)
09/22/2021	Willie, Joe (Mr.)	//	\$600.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77085-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney at Law	
	employer/law firm	Law firm of contributor's sp	pouse (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 (\$)
10/20/2021	Wilson, Tasha (Ms.)	/	\$250.00
	Contributor address; City; State; Zip Code		
	Missouri City, TX 77459-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's employer/law firm Law firm of contributor's sp		pouse (if any)	
Jacqueline Smith & Assoc. n/a			
	s a child, law firm of parent(s) (if any)		
n/a n/a			

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 26/26 Rpt: 29/61	
2 FILER NAME	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Peake, Sandra J. (The Honora	Peake, Sandra J. (The Honorable)		00037628
4 Date 5 Full name of cor	ntributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/11/2021 Wilson, Tasha			\$250.00
6 Contributor add	ress; City; State; Zip Code		1
	TX 77459-0000		
8 Contributor's Principal Occupation		9 Contributor's Job Title	
Attorney		Attorney at Law	
10 Contributor's employer/law firm		11 Law firm of contributor's sp	bouse (if any)
Jacqueline Smith & Assoc.		none	
12 If contributor is a child, law firm of n/a	pareni(S) (II any)	n/a	
	anihan an an		
Date Full name of cor 12/15/2021 Zimmerman, N)	Amount of Contribution (\$) \$500.00
			\$300.00
	ess; City; State; Zip Code		
Houston, TX 7	7059-5025		
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	bouse (if any)
Zimmerman Lutterbie LLC		n/a	
If contributor is a child, law firm of	parent(s) (if any)		
n/a		n/a	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A	2
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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: Sch: 1/2 Rpt: 30/61	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Peake, Sandra J. (The Honorable)			00037628	
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$ 2,176.55	
5 Date 09/22/2021			8 Amount of 9 In-kind contribution contribution (\$) description \$125.00 cake for fundraiser	
	Houston, TX 77584-0000	r	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		Asst. Professor		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)	
Texas South	nern University	n/a		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
n/a		n/a		
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description	
09/22/2021	Moon, Tammy (Mrs.)		\$151.55 I flowers	
	Contributor address; City; State; Zip Code			
	Houston, TX 77004-0000		I I I 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	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)	
Attorney at I	Law	Attorney		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)	
self		n/a		
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
n/a		n/a		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution	
09/08/2021	Moon, Tammy (Mrs.) Contributor address; City; State; Zip Code		contribution (\$) \$400.00 Bartender - Black Tie, 12808 W. Airport # 270C, Sugarland, TX 77478	
	Houston, TX 77004-0000		Check if travel outside of Texas. Complete Schedule T.	
Principal occu	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON			
Contributor's principal occupation (FOR JUDICIAL) Contributor's job title		(FOR JUDICIAL) (See instructions)		
Attorney	· · · · ·	Attorney at Law		
			or's spouse (if any) (FOR JUDICIAL)	
self	· · · · · · · · · · · · · · · · · · ·	n/a		
	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
n/a		n/a		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 31/61	
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Peake, Sandra J. (The Honorable)		00037628	
⁴ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBU	\$ 2,176.55		
Date 6 Full name of contributor out-of-state PAC (ID#:) 09/22/2021 Ricketts, Ivy (Mrs.) 7 Contributor address; City; State; Zip Code		8 Amount of 9 In-kind contribution contribution (\$) description \$1,500.00 FDL catering: fundraiser: food, misc.	
Houston, TX 77054		I Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)		
Attorney self employed	Attorney		
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
n/a n/a			
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
n/a	n/a		

PLEDGED CONTRIBUTIONS (JUDICIAL)

				1 Total pages Sch	edule B(J):	
The Instruction Guide explains how to complete this form.		Sch: 1/1 Rpt: 32/61				
2 FILER NAME					thics Commissi	on Filers)
Peake, Sandra	J. (The Honorable)			00037628		
⁴ TOTAL OF UN	NITEMIZED PLEDGES				\$	0.00
5 Date	6 Full name of pledgor out-of-s	tate PAC (ID#:)	8 Amount of pledge (\$)	9 In-kind (If at	description oplicable)
	7 Pledgor Address; City;	State; Zip Code			1	
				Check if travel ou	Itside of Texas.	Complete Schedule T.
10 Pledgor's principa	I occupation	11 Pled	gor's job title			
12 Pledgor's employe	er/law firm	13 Law	firm of pledgor's	spouse (if any)		
14 If pledgor is a chil	d, law firm of parent(s) (if any)					

	LOANS (JUDICIAL)			SCHEDULE E	(J)	
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule E(J): Sch: 1/1 Rpt: 33/61		
2	FILER NAME Peake, Sandra J. (The Honorable)		3 Filer ID 000376	(Ethics Commission F 628	ilers)	
4	TOTAL OF UNITEMIZED LOANS			\$	0.00	
5	Date of loan 7 Name of lender Out-of-state PA	C (ID#:)	9 Loan Amount (\$)		
6	Is lender a 8 Lender address; City; State; financial institution?	Zip Code		10 Interest Rate		
				11 Maturity Date		
12	2 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, law firm of parent(s) (if any)					
17	Description of Collateral None	18 Check if personal funds we	onal funds were deposited into political account (See Instructions)			
19	O GUARANTOR 20 Name of guarantor INFORMATION INFORMATION			22 Amount Guarantee	d (\$)	
	not applicable 21 Guarantor address; City; State;	Zip Code				
23	B Guarantor's Principal Occupation	24 Guarantor's Job Title				
25	Guarantor's Employer/Law Firm	26 Law Firm of guarantor's sp	ouse (if any))		
27	7 If guarantor is child, law firm of parent(s) (if any)					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/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)	
	Total pages Schedule F1:		Filer ID (Ethics Commission Filers)	
	Sch: 1/25 Rpt: 34/61	Peake, Sandra J. (The Honorable)	00037628	
4	Date 12/10/2021	5 Payee name Archie, Thomas		
6	Amount (\$) \$175.00	7 Payee address; City; State; Zip Code 2710 Kingsbrook Missouri City, TX 77459-0000		
8	PURPOSE OF EXPENDITURE		sside of Texas. Complete Schedule T. X, officeholder living expense ertainment	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	11/22/2021	Archie, Thomas		
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 2710 Kingsbrook		
	PURPOSE	Missouri City, TX 77459-0000 (a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense	side of Texas. Complete Schedule T. X, officeholder living expense fundraiser	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	07/22/2021	Area 5 Democrats		
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 3800 Spencer		
		Pasadena, TX 77504-0000		
	PURPOSE OF EXPENDITURE		side of Texas. Complete Schedule T. X, officeholder living expense ion potluck	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			-	C P S	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	-		The Instruction Guide explai	ins ho	ow to com	plete this form.			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 2/25 Rpt: 35/61		Peake, Sandra J. (The Honorable)					00037628	
4	Date	5	Payee name				-		
	12/03/2021		Bank of America						
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$15.00		P. O. Box 15284						
			Wilmington, DE 19850-0000						
_	SUBBOOF	<u> </u>	-			• • • •			
8	PURPOSE OF		Category (See Categories listed at the top of this	schedu	ule)	b) Description Check if travel	outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		Accounting/Banking					, officeholder living expense	
						Cashier's che			
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	ice soug	ht		Office held	
	Date	Γ	Payee name						
	07/10/2021		Burta Raborn Inns of Court						
_	Amount (\$)	<u> </u>		ate:	Zip Cod	۵			
	\$669.00		c/o Ronique Robinson	<i>a</i> c, .	Zip 000	e			
	ψ003.00								
			4800 Sugar Grove #400						
			Stafford, TX 77477-0000						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedu	ule) (b) Description			
EXPENDITURE			Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
			Membership/food expense						
-	Complete ONLY if direct		Candidate/Officeholder name	Offi	ice soug	ht		Office held	
expenditure to benefit C/OH									
_	Date	—	Pavee name						
	07/10/2021		Burta Raborn Inns of Court						
					7. 0.1				
	Amount (\$)			ate; 4	Zip Cod	e			
	\$669.00		c/o Ronique Robinson						
			4800 Sugar Grove #400						
			Stafford, TX 77477-0000						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedu	ule) (b) Description			
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.	
								, officeholder living expense	
						Meeting expe	ens	erdues	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	ice soug	ht		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense		yment/Reimbursement thead/Rental Expense ense pense ages/Contract Labor nplete 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	· · ·		•	2	Filer ID (Ethics Commission Filers)			
1	Sch: 3/25 Rpt: 36/61	2	Plake, Sandra J. (The Honorable)			3	00037628			
4	Date	5	Payee name							
	12/15/2021		Church at Bethels Family							
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$223.80		12660 Sandpiper							
			Houston, TX 77035-0000							
8	PURPOSE	<u> </u>								
°	OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Gift/Awards/Memorials Expense				, officeholder living expense			
							\$50.00 gift cards for teens			
					Christmas do					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł									
_	Date		Payee name							
	10/28/2021		Davis Street							
	Amount (\$)			Zip Co	de					
	\$2,219.43		5925 Almeda							
			Suite A							
			Houston, TX 77004-0000							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description					
OF Strengt Expense					ide of Texas. Complete Schedule T.					
	EXPENDITURE				Check if Austin	, TX	, officeholder living expense			
					Food/wine fo	r fu	ndraiser			
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name C	Office sou	Jht	Office held				
⊨	Date		Payee name							
	12/02/2021 Davis, Shelley (Ms.)									
Amount (\$) Payee address; City; State; Zip Code \$40.00 3100 Richmond										
	\$40.00									
Suite 480										
	Houston, TX 77098-0000									
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Event Expense				ide of Texas. Complete Schedule T.			
	EXPENDITORE						, officeholder living expense			
					The Family L	.aw	Group holiday party			
L										
Complete <u>ONLY</u> if direct expenditure to benefit C/O			Candidate/Officeholder name C	Office sou	Jht		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 G Food/Beverage Expense G ift/Awards/Memorials Expense G	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor w 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:		-	3 Filer ID (Ethics Commission Filers)	
1	Sch: 4/25 Rpt: 37/61	Peake, Sandra J. (The Honorable)		00037628	
4	Date 09/08/2021	ayee name il Tiempo			
6	Amount (\$)	ayee address; City; State;	Zip Code		
-	\$111.44	814 Navigation Blvd.			
	+				
		louiston TV 77002 0000			
		louston, TX 77003-0000	i		
8	PURPOSE OF	ategory (See Categories listed at the top of this sched			
	EXPENDITURE	Office Overhead/Rental Expense		outside of Texas. Complete Schedule T. TX, officeholder living expense	
			Staff meeting		
			Stan meeting,		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name Off	ice sought	Office held	
	Date	ayee name			
	11/01/2021	iventbrite			
			Zin Codo		
	Amount (\$)		Zip Code		
	\$130.56	55 5th Street			
		an Francisco, CA 94103-0000			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched	Check if travel of Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense Gala and processing fee - 2 tickers	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name Off	ice sought	Office held	
	Date	ayee name			
	09/16/2021	leur de Licious Catering			
	Amount (\$)	ayee address; City; State;	Zip Code		
	\$657.42	536 Kenforest Drive			
	φ007.4Z	350 Keniorest Drive			
		lissouri City, TX 77489-0000			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this sched		outside of Texas. Complete Schedule T.	
			Ender Fundraiser	TX, officeholder living expense	
	Complete ONLY if direct	ndidate/Officeholder name Off	ice sought	Office held	
	expenditure to benefit C/OI		-		
-					

	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 mmittee Legal Services The Instruction Guide expla	Office O Polling E Printing Salaries	verhea Expens Expens /Wages	se s/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	s)
	Sch: 5/25 Rpt: 38/61		Peake, Sandra J. (The Honorable)					00037628	,
4	Date	5	Payee name						
	12/03/2021		Harris County Democratic Party						
6	Amount (\$)	7	Payee address; City; S	tate; Zip C	ode				
	\$2,500.00		4619 Lyons						
			Houston, TX 77020-0000						
_									
8	PURPOSE OF	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description			
	EXPENDITURE		Fees					ide of Texas. Complete Schedule T. , officeholder living expense	
								ice on primary ballot	
						Thing lee lot	più	tee on printary ballot	
9	Complete ONIL V if direct		Candidate/Officeholder name	Office co	ught			Office hold	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Landidate/Onicenoider name	Office so	ugni			Office held	
	Date		Payee name						
	07/16/2021		Harris County Democratic Party						
	Amount (\$)		Payee address; City; S	tate; Zip C	ode				
	\$2,500.00		4619 Lyons	·····, [· ·					
	\$2,000,000		1010 290110						
			Houston, TX 77020-0000						
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description			
	OF EXPENDITURE		Contributions/Donations Made By					ide of Texas. Complete Schedule T.	
			Candidate/Officeholder/Political Co	mmittee				, officeholder living expense	
						Co-ordinated	са	impaign expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office so	ught			Office held	
	expenditure to benefit C/OI	1							
	Date		Payee name						
	07/21/2021		Harris County Democratic Party						
	Amount (\$)		Payee address; City; S	tate; Zip C	ode				
	\$2,500.00		4619 Lyons						
			,						
			Houston, TX 77020-0000						
	PURPOSE	(a)	Category (See Categories listed at the top of thi	s schedule)	(b)	Description	_]
	OF EXPENDITURE		Contributions/Donations Made By					ide of Texas. Complete Schedule T.	
			Candidate/Officeholder/Political Co	mmittee				, officeholder living expense	
						Coordinated	can	mpaign contribution	
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held	
	expenditure to benefit C/OI	-							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Loar Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Print	an Repayi ice Overh lling Expe nting Exp laries/Wag	nent/Reimbursement ead/Rental Expense nse ense ges/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: 6/25 Rpt: 39/61		Peake, Sandra J. (The Honorable)				00037628
4	Date 09/23/2021	5	Payee name Hobby Lobby				
6	Amount (\$) \$25.90	7	Payee address; City; State; Zip 8715 W. Loop South Houston, TX 77096-0000	p Code	9		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Event Expense	₂₎ (I		, TX,	de of Texas. Complete Schedule T. officeholder living expense IS
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sougl	nt		Office held
	Date		Payee name				
	09/15/2021		Houston Bar Association				
	Amount (\$)		Payee address; City; State; Zip	p Cod	9		
	\$76.87		1111 Bagby				
			FLB 200 Houston, TX 77002-0000				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	») (1			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office	e sougl	nt		Office held
	Date		Payee name				
	09/29/2021		Houston Bar Association				
	Amount (\$) \$76.87		Payee address; City; State; Zip 1111 Bagby FLB 200 Houston, TX 77002-0000	p Code	2		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Advertising Expense	.) (, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Office	e sougl	nt		Office held

	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:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)				
	Sch: 7/25 Rpt: 40/61	Peake, Sandra J. (The Honorable)	00037628				
4	Date 07/27/2021	5 Payee name IAspire					
6	Amount (\$) \$100.00	 7 Payee address; City; State; Zip Code 4305 Engleford Houston, TX 77026-0000 					
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	12/10/2021	Interiorscapes of Houston, INC					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$308.51	P. O. Box 218023 Houston, TX 77218-0000					
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ance (quarterly)				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/25/2021	Interiorscapes of Houston, INC					
	Amount (\$) \$308.51	Payee address; City; State; Zip Code P. O. Box 218023					
		Houston, TX 77218-0000					
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense INCE				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				

	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 explain	Office Ove Polling Exp Printing Exp Salaries/W	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 NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 8/25 Rpt: 41/61		Peake, Sandra J. (The Honorable)				00037628
4	Date 10/20/2021	5	Payee name Interiorscapes of Houston, INC				
6	Amount (\$) \$146.14	7 Payee address; City; State; Zip Code 4 P. O. Box 218023 Houston, TX 77218-0000					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule)			ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ıht		Office held
	Date		Payee name				
	09/06/2021		Interiorscapes of Houston, INC				
	Amount (\$) \$308.51		Payee address; City; Sta P. O. Box 218023 Houston, TX 77218-0000	ite; Zip Co	le		
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule)		і, ТХ	ide of Texas. Complete Schedule T. , officeholder living expense CCE
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	Jht		Office held
	Date		Payee name				
	08/10/2021		Interiorscapes of Houston, INC				
	Amount (\$) \$308.51		Payee address; City; Sta P. O. Box 218023	ite; Zip Co	le		
			Houston, TX 77218-0000				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule)		I, TX	ide of Texas. Complete Schedule T. , officeholder living expense CCE
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	jht		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 Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing	xpense 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:	ILER NAME	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)			
	Sch: 9/25 Rpt: 42/61	eake, Sandra J. (The Honorable)		00037628			
4	Date 11/15/2021	ayee name han, Shapnik (Mr.)					
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 20506 Autumn Shore Katy, TX 77450-0000					
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office so	ught	Office held			
	Date	ayee name					
	10/22/2021	im Son					
	Amount (\$) \$60.80	ayee address; City; State; Zip C 001 Jefferson Iouston, TX 77003-0000	ode				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) ood/Beverage Expense		outside of Texas. Complete Schedule T. h, TX, officeholder living expense consultant			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office so	ught	Office held			
	Date	ayee name					
	12/08/2021	ingdom Builders Cathedral					
	Amount (\$) \$200.00	ayee address; City; State; Zip C 305 Engleford	ode				
		ouston, TX 77026-0000	1				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule) contributions/Donations Made By candidate/Officeholder/Political Committee		outside of Texas. Complete Schedule T. n, TX, officeholder living expense t expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office so	ught	Office held			

	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/Rei Fees Office Overheal/Rent Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contr The Instruction Guide explains how to complete th	tal Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ract Labor OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)		
_	Sch: 10/25 Rpt: 43/61	Peake, Sandra J. (The Honorable)	00037628		
4	Date	Payee name			
	09/01/2021	Kingdom Builders Center			
6	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	4305 Engleford			
		Houston, TX 77026-0000			
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Des	scription		
	OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.		
			Check if Austin, TX, officeholder living expense		
		381	nor program		
0	Complete ONIL V if direct	andidate/Office helder name	Office held		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	andidate/Officeholder name Office sought	Onice neid		
	Date	Payee name			
	12/28/2021	Kroger			
	Amount (\$)	Payee address; City; State; Zip Code			
\$144.74 10306 S Post Oak					
		Houston, TX 77935-0000			
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Des			
	EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
			fee and creamer for court staff		
	Complete ONLY if direct	andidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI				
-	Date	Payee name			
	10/04/2021	Office Max			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$285.61	270 Meyerland Plaza			
	Ψ205.01				
		Houston, TX 77096-0000			
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Des			
	OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.		
	-		Check if Austin, TX, officeholder living expense		
			an 		
_	Complete ONIL V if direct	andidate/Officeholder name Office sought	Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI				
_					

	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	Office Ove Polling Ex Printing Ex Salaries/W	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
<u> </u>		-	•	how to co	omplete this form.	_	
1	Total pages Schedule F1: Sch: 11/25 Rpt: 44/61		FILER NAME Peake, Sandra J. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00037628
4	•						
4	Date 10/04/2021		Payee name Office Max				
6	Amount (\$) \$9.20						
			Houston, TX 77096-0000				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Printing Expense	nedule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense petitions
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ught		Office held
	Date		Payee name				
	10/01/2021		Peake, Sandra				
	Amount (\$)		Payee address; City; State;	; Zip Co	ode		
	\$60.00		201 Caroline - Judge Peake				
			16th floor				
			Houston, TX 77002				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Petty cash	nedule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ight		Office held
	Date		Payee name				
	09/29/2021		Peake, Sandra				
	Amount (\$) \$150.00		Payee address; City; State; 201 Caroline - Judge Peake 16th floor Houston, TX 77002	; Zip Co	ode		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Event Expense	iedule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ught		Office held

	EXPENDITURE CATEGORIES FOR BOX 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:		Filer ID (Ethics Commission Filers)		
1	Sch: 12/25 Rpt: 45/61	Peake, Sandra J. (The Honorable)	00037628		
4	Date 11/23/2021	5 Payee name Phil & Derek's			
6	Amount (\$) \$164.13	 Payee address; City; State; Zip Code 1701 Webster Houston, TX 77003-0000 			
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense ff meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	10/29/2021	Prima Pasta			
	Amount (\$) \$124.01	Payee address;City;State;ZipCode6811 Kirby Drive			
		Houston, TX 77030-0000			
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense eting		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	07/25/2021	Raise the Money, Inc.			
	Amount (\$) \$12.50	Payee address;City;State;ZipCodeP.O. Box 26466			
		Little Rock, AR 72205-0000			
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove 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	· .		•	3	Filer ID (Ethics Commission Filers)
-	Sch: 13/25 Rpt: 46/61		Peake, Sandra J. (The Honorable)				00037628
4	Date	5	Payee name				
	08/16/2021		Raise the Money, Inc.				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le		
	\$94.85		P.O. Box 26466				
			Little Rock, AR 72205-0000				
8	DUDDOSE	<u> </u>					
ð	PURPOSE OF		Category (See Categories listed at the top of this sche	dule)	(b) Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Accounting/Banking				officeholder living expense
					processing fe		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	ffice sou	ht		Office held
-	Date		Payee name				
	09/29/2021		Raise the Money, Inc.				
			_	Zin Co			
	Amount (\$)			Zip Co	ie		
	\$24.75		P.O. Box 26466				
			Little Rock, AR 72205-0000				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Accounting/Banking	dule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name O	ffice sou	ht		Office held
	Date		Payee name				
	09/23/2021		Raise the Money, Inc.				
	Amount (\$)		-	Zip Co	10		
	\$118.85		P.O. Box 26466				
	Φ110.05		F.O. B0X 20400				
			Little Rock, AR 72205-0000				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking			, тх,	de of Texas. Complete Schedule T. officeholder living expense
					i rocessing it		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	ffice sou	ht		Office held
\vdash							

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fe Fo Gi nmittee Le	rent Expense res iod/Beverage Expense ft/Awards/Memorials Exper gal Services he Instruction Guide e	Office Ov Polling E nse Printing E Salaries/	Expense Wages/Contract Labor	Transportation I Travel in Distric Travel Out of Di	
1	Total pages Schedule F1:			•	•	3 Filer ID	(Ethics Commission Filers)
-	Sch: 14/25 Rpt: 47/61		a J. (The Honorab	le)		00037628	
4	Date 09/22/2021	Payee name Raise the Mo	ney, Inc.				
6	Amount (\$) \$141.65	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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense processing fee 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	holder name	Office so	ught	Office h	eld
	Date	Payee name					
	09/21/2021	Raise the Mo	ney, Inc.				
	Amount (\$) \$12.50	Payee address P.O. Box 264	66	State; Zip C	ode		
	PURPOSE OF EXPENDITURE		R 72205-0000 Categories listed at the top anking	of this schedule)		l outside of Texas. Con n, TX, officeholder livin EE	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	holder name	Office so	ught	Office h	eld
	Date	Payee name					
	09/20/2021	Raise the Mo	ney, Inc.				
	Amount (\$) \$37.25	Payee address P.O. Box 264		State; Zip C	ode		
		Little Rock, Al	R 72205-0000		1		
	PURPOSE OF EXPENDITURE	Category (See (Accounting/Ba	Categories listed at the top anking	of this schedule)		l outside of Texas. Con n, TX, officeholder livin ee	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Office	holder name	Office so	ught	Office h	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 Loan Repayment/Reimburs Fees Office Overhead/Rental Ex Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Salaries/Wages/Contract L The Instruction Guide explains how to complete this for	pense Transportation Equipment & Related Expense Travel in District Travel Out of District abor OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 15/25 Rpt: 48/61	Peake, Sandra J. (The Honorable)	00037628				
4	Date 09/14/2021	Payee name Raise the Money, Inc.					
6	Amount (\$) \$37.25	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 travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fee 					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/27/2021	Raise the Money, Inc.					
	Amount (\$) \$57.10	Payee address; City; State; Zip Code P.O. Box 26466					
	PURPOSE OF EXPENDITURE		tion if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense Sing fee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/14/2021	Raise the Money, Inc.					
	Amount (\$) \$55.14	Payee address; City; State; Zip Code P.O. Box 26466					
		Little Rock, AR 72205-0000					
	PURPOSE OF EXPENDITURE		tion x if travel outside of Texas. Complete Schedule T. x if Austin, TX, officeholder living expense sing fee				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officeholder name Office sought	Office held				

	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 nmittee Legal Services The Instruction Guide explains h	Office Ove 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 Filer						
	Sch: 16/25 Rpt: 49/61		Peake, Sandra J. (The Honorable)				00037628				
4	Date	5	Payee name		'						
	10/19/2021		Raise the Money, Inc.								
6	Amount (\$)	7	Payee address; City; State;	Zip Co	le						
	\$5.15		P.O. Box 26466								
			Little Rock, AR 72205-0000								
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T. , officeholder living expense				
					Processing fe						
					5						
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	I Office sou	ht		Office held				
	Date		Payee name								
	10/12/2021		Raise the Money, Inc.								
	Amount (\$)		Payee address; City; State;	Zip Co	le						
	\$17.65		P.O. Box 26466								
			Little Rock, AR 72205-0000								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	l Iffice sou	ht		Office held				
	Date		Payee name								
	10/11/2021		Raise the Money, Inc.								
	Amount (\$)		Payee address; City; State;	Zip Co	le						
	\$17.65		P.O. Box 26466								
			Little Rock, AR 72205-0000								
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Accounting/Banking			, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	I office sou	ht		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 O Food/Beverage Expense P Gift/Awards/Memorials Expense P	Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/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: 17/25 Rpt: 50/61		Peake, Sandra J. (The Honorable)				00037628
4	Date	5	Payee name				
	09/21/2021		Raise the Money, Inc.				
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	e		
	\$12.50		P.O. Box 26466				
			Little Rock, AR 72205-0000				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	ule) (b) Description		
	EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T.
					processing fe		, officeholder living expense
					processing it		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name Offic	ice soug	ht		Office held
_	Data	<u> </u>					
	Date		Payee name				
	09/21/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e		
	\$37.25		P.O. Box 26466				
			Little Rock, AR 72205-0000				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Accounting/Banking	ule) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Offic	ice soug	ht		Office held
	Date		Payee name				
	09/14/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e		
	\$37.25		P.O. Box 26466				
			Little Rock, AR 72205-0000				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedu Accounting/Banking	ule) (n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ice soug	ht		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 O Food/Beverage Expense P Gift/Awards/Memorials Expense P	Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/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	Filer ID (Ethics Commission Filers)			
	Sch: 18/25 Rpt: 51/61		Peake, Sandra J. (The Honorable)				00037628
4	Date	5	Payee name				
	10/27/2021		Raise the Money, Inc.				
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	e		
	\$57.10		P.O. Box 26466				
			Little Rock, AR 72205-0000				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedu	ule) (b) Description		
	OF EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T.
	-						, officeholder living expense
					Processing fe	ee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Offic	ce soug	ht		Office held
	Date		Payee name				
	10/21/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e		
	\$55.14		P.O. Box 26466	P			
	+00121						
			Little Rock, AR 72205-0000				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	ıle) (b) Description		
	EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T. , officeholder living expense
					Processing fe		
	Complete ONLY if direct		Candidate/Officeholder name Offic	ce soug	ht		Office held
	expenditure to benefit C/OI	Н		Ū			
-	Date		Payee name				
	10/19/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State; Z	Zin Cod	e		
	\$5.15		P.O. Box 26466		0		
	\$0.10		1.0. Dox 20400				
			Little Rock, AR 72205-0000	i			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedu	ıle) (b) Description		
	EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T. , officeholder living expense
					Processing fe		
					2	-	
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name Offic	ce soug	ht		Office held
	expenditure to benefit C/Oł			Se couy			0

	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 I	Office Ove Polling Exp Printing Ex Salaries/W	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 NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 19/25 Rpt: 52/61		Peake, Sandra J. (The Honorable)				00037628
4	Date	5	Payee name				
	10/13/2021		Raise the Money, Inc.				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$17.65		P.O. Box 26466				
			Little Rock, AR 72205-0000				
8	PURPOSE	(a)	Category (See Categories listed at the top of this scho	edule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking	ouuloy		outsi	ide of Texas. Complete Schedule T.
	EXPENDITORE						, officeholder living expense
					Processing fe	e	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	jht		Office held
	Date		Payee name				
	10/03/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$2.70		P.O. Box 26466				
			Little Rock, AR 72205-0000				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	to:	ide of Texas. Complete Schedule T.
	EXPENDITURE		Accounting/Banking				, officeholder living expense
					Processing fe		
					5		
	Complete ONLY if direct		Candidate/Officeholder name C	Diffice sour	aht		Office held
	expenditure to benefit C/OI	Н					
_	Date		Payee name				
	12/06/2021		Raise the Money, Inc.				
	Amount (\$)		· ·	Zip Co	10		
	\$5.15		P.O. Box 26466	zip co			
	ψ0.10		F.O. D0X 20400				
			Little Rock, AR 72205-0000				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T. , officeholder living expense
					Processing fe		, unicendider living expense
					i roccosnig it		
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name C	Office sou	ht		Office held
	expenditure to benefit C/OI			אוונב סטענ	jiit		
_							

	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	Office Ove 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: 20/25 Rpt: 53/61		Peake, Sandra J. (The Honorable)				00037628
4	Date 11/14/2021		Payee name Raise the Money, Inc.				
6	Amount (\$)		-	; Zip Co			
J	\$10.30		P.O. Box 26466	, 20 00			
			Little Rock, AR 72205-0000				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Accounting/Banking	nedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name (Office sou	ht		Office held
	Date		Payee name				
	11/10/2021		Raise the Money, Inc.				
	Amount (\$)		Payee address; City; State	; Zip Co	le		
	\$7.60		P.O. Box 26466 Little Rock, AR 72205-0000				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Accounting/Banking	nedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ht		Office held
	Date		Payee name				
	10/25/2021		Shepard Connections LLC				
	Amount (\$) \$250.00		Payee address; City; State 1022 Saulnier St	; Zip Co	le		
			Houston, TX 77019-0000				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Advertising Expense	nedule)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense cycling sponsorship
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Dffice sou	ht		Office held

			EXPENDITURE CATEGO	ORIES 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	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor	Transpo Travel ir Travel C	ion/Fundraising Expense irtation Equipment & Related Expense I District ut of District (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID) (Ethics Commission Filers)
	Sch: 21/25 Rpt: 54/61	1	Peake, Sandra J. (The Honorable)			00037	
4	Date 12/14/2021		^p ayee name Sheraton Austin Hotel and Conferenc	e Center			
6	Amount (\$) \$286.75		Payee address; City; State 1101 Woodlawn St.	e; Zip Co	le		
		<u> </u>	Georgetown, TX 78628-0000	i			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Travel Out of District	chedule)		, TX, officehold	as. Complete Schedule T. der living expense PICE EXPENSE
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ht	Of	ffice held
	Date		Payee name				
	10/12/2021		Texas Center for Judiciary				
	Amount (\$)		Payee address; City; State	e; Zip Co	le		
	\$65.00		1210 San Antonio St.	-,			
		-	Austin, TX 78701-0000		(1)		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Travel Out of District	chedule)		, TX, officehold	as. Complete Schedule T. der living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ht	Of	ffice held
	Date		Payee name				
	09/10/2021		Fexas Center for Judiciary				
	Amount (\$) \$100.00	1	Payee address; City; State L210 San Antonio St.	e; Zip Co	le		
			Austin, TX 78701-0000				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this so Contributions/Donations Made By Candidate/Officeholder/Political Com	,		, TX, officehold	as. Complete Schedule T. der living expense ation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ht	Of	ffice held

			EXPEN	DITURE CATEGO	RIES FOR	R BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment								t & Related Expense
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethic	s Commission Filers)				
	Sch: 22/25 Rpt: 55/61		Peake, Sandra J. (Th	00037628					
4	Date	5	Payee name						
	08/04/2021		Texas Family Law Fo	undation					
6	Amount (\$)	7	Payee address; City	: State:	Zip Co	de			
	\$125.00		c/o Heather King						
			500 Reserve Street #	450					
		Southlake, TX 76092-7634							
8	PURPOSE				r	(b) b			
°	OF	(a)	Category (See Categories I Event Expense	isted at the top of this sch	edule)	(b) Description	outsi	de of Texas. Complete Scl	hedule T.
	EXPENDITURE		Lvent Lxpense					officeholder living expense	
						luncheon tick	et		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder na	ame C	Office sou	ght		Office held	
	Date		Payee name						
	11/23/2021		Tru Insight						
	Amount (\$)		Payee address; City	; State;	; Zip Co	de			
	\$991.02		6122 Grey Oaks						
			-						
			Houston, TX 77050-0	000					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories I Advertising Expense	isted at the top of this sch	edule)		, тх,	de of Texas. Complete Scl officeholder living expensi	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder na	ame C	Dffice sou	ght		Office held	
	Date		Payee name						
	11/12/2021		Tru Insight						
	Amount (\$)		Payee address; City	; State;	; Zip Co	de			
	\$900.00		6122 Grey Oaks						
			-						
			Houston, TX 77050-0	000					
	PURPOSE OF	(a)	Category (See Categories I	isted at the top of this sch	edule)	(b) Description	outo:	de of Texas. Complete Scl	hodulo T
	EXPENDITURE		Advertising Expense				, TX,	officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder na	ame C	Dffice sou	ght		Office held	

			EXPENDITURE C	CATEGOR	RIES FOF	R BO	X 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 Expo nmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense 'ages/	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 Sabadula E1:	1		explaine	11000 10 00.	Inpic		2	Eiler ID (Ethics Commission Eilers)
1	Total pages Schedule F1: Sch: 23/25 Rpt: 56/61		Pler NAME Peake, Sandra J. (The Honora	ıble)				3	Filer ID (Ethics Commission Filers) 00037628
4	Date	5	Payee name						
	10/01/2021		Tru Insight						
6	Amount (\$)		Payee address; City;	State;	; Zip Co	de			
	\$1,500.00		6122 Grey Oaks						
			Houston, TX 77050-0000						
8	PURPOSE	(a)	Category (See Categories listed at the to	p of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense						ide of Texas. Complete Schedule T.
							For cards, inv		, officeholder living expense
							roi caius, inv	mai	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice sou	ght			Office held
	Date		Payee name						
	08/04/2021		Tru Insight						
	Amount (\$)		Payee address; City;	State [.]	Zip Co	do			
	\$1,717.70		6122 Grey Oaks	State,	, Zip C0	ue			
	Φ1,/1/./Ο		OIZZ GIEY Oaks						
			Houston, TX 77050-0000						
	PURPOSE	(a)	Category (See Categories listed at the to	p of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense						ide of Texas. Complete Schedule T.
							pushcards	, IX,	, officeholder living expense
							pusiicalus		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Dffice sou	ght			Office held
	Date		Payee name						
	09/01/2021		Tru Insight						
	Amount (\$)		Payee address; City;	State;	; Zip Co	de			
	\$900.00		6122 Grey Oaks						
			Houston, TX 77050-0000						
	PURPOSE OF	(a)	Category (See Categories listed at the to	p of this sch	edule)	(b)	Description		
	EXPENDITURE		Consulting Expense						ide of Texas. Complete Schedule T.
							Web manage		, officeholder living expense
							web manaye	me	511.
	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	ſ	Office sou	ght			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		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: 24/25 Rpt: 57/61	Peake, Sandra J. (The Honorable)	00037628
4	Date 08/16/2021	5 Payee name Tru Insight	
6	Amount (\$) \$410.00	 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
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/19/2021	Tru Insight	
	Amount (\$) \$150.00	Payee address;City;State;Zip Code6122 Grey Oaks	
		Houston, TX 77050-0000	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/02/2021	Tru Insight	
	Amount (\$) \$900.00	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 <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

				EXPEN	DITURE CATEGOR)X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	nmittee	Event Expense Fees Food/Beverage Gift/Awards/Me Legal Services	e Expense emorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	aymer erheac pense kpens /ages	ht/Reimbursement i/Rental Expense e /Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 25/25 Rpt: 58/61				e Honorable)					00037628	
4	Date	5	Payee name	e							
	09/13/2021		USPS								
6	Amount (\$)	7	Payee addr	ess; City	; State;	Zip Co	de				
	\$132.45		10910 S G	essner							
			Houston, 1	X 77071-9	998						
8	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			/Fundraisir		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE								ı, ТХ,	officeholder living) expense
								postage			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ficeholder na	me C	Office sou	ght			Office he	eld
	Date	Γ	Payee name	9							
	09/16/2021		USPS								
	Amount (\$)	-	Payee addr	ess; City	· Stato:	Zip Co	do				
	.,				, State,	Zip Cu	ue				
	\$39.35		10910 S G	essner							
			Houston, 7	X 77071-9	998						
	PURPOSE	(a)	Category (See Categories li	sted at the top of this sch	edule)	(b)	Description			
	OF		Advertising			,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE							Check if Austin	ı, ТХ,	officeholder living	j expense
								postage			
	Complete ONLY if direct		Candidate/Of	ficeholder na	.me C	Office sou	ght			Office he	eld
	expenditure to benefit C/OI	Н									

	POLITICAL EX	PENDITURES FROM PERSONAL	FUNDS SCHEDULE G
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		//Reimbursement Solicitation/Fundraising Expense Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 1/1 Rpt: 59/61	2 FILER NAME Peake, Sandra J. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00037628
4	Date 08/16/2021	5 Payee name Act Blue	i
6	Amount (\$) \$70.00 Reimbursement from political contributions intended	 Payee address; City; State; Zip Code 366 Summer Street Somerville, MA 02144-0000 	
8	PURPOSE OF EXPENDITURE	Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense et purchase
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name C	ffice sought Office held
F	Date 07/19/2021	Payee name Texas Democratic Women of Harris County Metro A	Area
	Amount (\$) \$220.00 Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4619 Lyons Avenue Houston, TX 77020-0000	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) I Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ets - Women Making History Luncheon and ad
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name C	ffice sought Office held

Assets Purchased with Political Contributions and On
Hand As of The Last Day of The Reporting Period

The Instruction Guide explains how to complete this form.	1 Total pages Schedule M: Sch: 1/1 Rpt: 60/61
FILER NAME	3 Filer ID (Ethics Commission Filers)
Peake, Sandra J. (The Honorable)	00037628
Description of Asset	
Ipad Pro	

TEXT ANNOTATION

Sch: 1/1 Rpt: 61/61

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

Schedule F1

Information entered by filer as a memo:

Amounts of 30.36 and 47.03 - staff meeting expense