# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

97 (1011 7 (1011 1 1117)	MICE INEL CITY					
The C/OH Instruction	Guide explains how to com		1 Filer ID(Et	hics Commiss	ion filers)	2 Total pages filed
3 CANDIDATE/	MS/MRS/MR	FIRST	MI		OFFIC	E USE ONLY
OFFICEHOLDER		Douglas		Da	ate Received	
NAME	NICKNAME	LAST	SUFFIX		10/3/2015	
		Peterson				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP C	CODE		
OFFICEHOLDER	2118 Cherrytree Ridge I	Ln				
MAILING				Dat	te Hand-delivered	or Date Postmarked
ADDRESS	Houston TX 77062					
Change of address	1054 0005	DUONE NUMBER	EVERNOLON			
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(281) 782-2721					
PHONE	NO WIDO WID	FIRST				1.
6 CAMPAIGN	MS/MRS/MR	FIRST	MI	Re	eceipt #	Amount
TREASURER		Randa		Da	ate Processed	
NAME	NICKNAME	LAST	SUFFIX	Da	ate Imaged	
		McCartney				
7 CAMPAIGN	STREET ADDRESS (No PO Box Pleas	se);	APT/SUITE #;	CITY	Y; STATE;	ZIP CODE
TREASURER	2118 Cherrytree Ridge I	Ln				
ADDRESS						
(Residence)	Houston TX 77062					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(281) 782-9869					
	January 15 X 30th day bef	fore election Fir	nal repport (Attach C/OH	I - FR)	eeded \$500 limit	
9 REPORT TYPE	July 15 8th day befo	re election Ru	unoff	15th	ı day after campaign tre	asurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month Da	y Year
COVERED	7/1/2015		THROUGH		9/24/2	2015
11 ELECTION	ELECTION DATE	ELECTIO	ON TYPE			
	Month Day Year			,,		По
	11/3/2015	Primary	L Ru	inoff	χ General	Special
12 OFFICE	OFFICE HELD (if any)		13 0	FFICE SOUGHT (i	f known)	
			С	ity Council	- At Large Pos	sition 3

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 FILER NAME Dougl	as Peterson		15 Filer ID (Ethics Com	mission Filers)
	expenditures may have	f political contributions accepted or political expenditures made without the candidate's or officeholder's knowle receive notice of such expenditures.	ade by political committees to support the edge or consent. Candidates and office	e candidate / officeholder. These nolders are required to report this
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME		
POLITICAL	GENERAL	COMMITTEE ADDRESS		
COMMITTEE(S)				
(-)	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION	1 TOTAL POLITIC	AL CONTRIBUTIONS OF \$50 OR LESS (OT	THER THAN	
TOTALS	PLEDGES, LOAI	NS, OR GUARANTEES OF LOANS), UNLES	22 ILEMIZED	\$20.00
	2 TOTAL POLITIC	CAL CONTRIBUTIONS		\$10,225.00
	(OTHER THAN F	PLEDGES, LOANS, OR GUARANTEES OF I		\$10,225.00
EXPENDITURE		AL EXPENDITURES OF \$100 OR LESS, UN	·	
TOTALS	3			\$244.15
	4 TOTAL POLITIC	CAL EXPENDITURES		
	4			\$9,886.27
CONTRIBUTION	5 TOTAL POLITIC	AL CONTRIBUTIONS MAINTAINED AS OF	THE LAST DAY	
BALANCE	OF REPORTING			\$2,271.17
OUTSTANDING LOAN	6 TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOAI	NS AS OF THE	
TOTALS	0	HE REPORTING PERIOD		\$0.00
18 AFFIDAVIT				
			m, under penalty of perjury, the	
			nd correct and includes all info under Title 15, Election Code.	
			Douglas Peterso	n
			Signature of Candidate or C	Officeholder
AFFIX NOT STAMP / SE	AL ABOVE			
Sworn to and subscribed	before me, by the said	d	, this the	day
of	, 20	, to certify which, witness my har	nd and seal of office.	
Signature of officer admir	nistering oath	Print name of officer administering oa	th Title of officer	administering oath

#### **SUBTOTALS - COH** FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Douglas Peterson 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 10085 1 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 120 2 SCHEDULE B: PLEDGED CONTRIBUTIONS \$0 3 SCHEDULE E: LOANS \$0 4 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 9886 5 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6 \$0 SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS \$0 8 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 909 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 9 \$0 SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 10 \$ 18 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 66

# CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

FORM C/OH ADDENDUM

C/OH NAME Douglas Peterson

ACCOUNT # (Ethics Commission filers)

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

M	ONETAR'	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Douglas Peterson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor	out of state P	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Israel Galvan	out of state P	PAC(ID# )	7 Amount of contributions (\$)
	8/14/2015	6 Contributor address;	City; League City	State; Zip Code TX 77573	\$1,000.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Kay Mudd	out of state P	I AC(ID# )	7 Amount of contributions (\$)
	8/12/2015	6 Contributor address;	City; lowa Colony	State; Zip Code TX 77583	\$25.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Spyros Varsos	out of state P	L PAC(ID# )	7 Amount of contributions (\$)
	8/14/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	\$30.00
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state P	PAC(ID# )	

MONET	ARY POLITICAL CONT	TRIBUTION	IS	SCHEDULE A1
The Instruc	ction Guide explains how to compl	1 Total Pages Schedule A1:		
2 FILER N	AME Douglas Peterson			3 Filer ID (Ethics Commission filers)
	Albert Lapidus			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/12/20	15	Houston	TX 77062	25.00
8 Princip	pal occupation / Job title (See Instructions)	)	9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Eva Hern	Ш		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/18/20 <sup>-</sup>	15	Kemah	TX 77565	200.00
8 Princip	pal occupation / Job title (See Instructions)	)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Ralph Parr	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/18/20 <sup>-</sup>	15	Houston	TX 77062	250.00
8 Princip	pal occupation / Job title (See Instructions)	)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Kenneth Olive	Ш		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/22/20	15	Houston	TX 77081	200.00
8 Princip	pal occupation / Job title (See Instructions)	)	9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Peter Bowman			7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTR	BUTION	S	SCHEDULE A1
The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	E Douglas Peterson			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
7/29/2015		Houston	TX 77058	100.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Richard Morrison	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/19/2015		Sugar Land	TX 77479	200.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Gerry Birnberg	Ц		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/24/2015		Houston	TX 77063	250.00
8 Principal od	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Nancy Johnson			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/30/2015		Houston	TX 77062	500.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Jane Williams	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/25/2015	6 Contributor address;	City; Seabrook	State; Zip Code TX 77586	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Diane Rhorer	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	250.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Aaron Rublein	out of state	I PAC(ID# )	7 Amount of contributions (\$)
	9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	50.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Sandra Anderson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	Instruction (	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Douglas Peterson			3 Filer ID (Ethics Commission filers)
		James Blain			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Seabrook	TX 77586	50.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	T
		Dewey Smith			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77062	50.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Thomas Gederberg	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77025	500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Helen Lane			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/9/2015		Houston	TX 77062	250.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Jody Eichblatt			7 Amount of contributions (\$)

MC	ONETAF	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FI	LER NAME	E Douglas Peterson			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77062	50.00
8	Principal od	ccupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Sally Jordan	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/7/2015		Houston	TX 77062	200.00
8	Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Ralph Parr	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77062	250.00
8	Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Darryl Smith	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77059	100.00
8	Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME [	Douglas Peterson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Lela A. Hammond	out of state	PAC(ID# )	7 Amount of contributions (\$)
	0/9/2015	6 Contributor address;	City;	State; Zip Code	400.00
	9/8/2015		Houston	TX 77062	100.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Jose Parra	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/1/2015	6 Contributor address;	City; Pearland	State; Zip Code TX 77584	100.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Merle Bunde	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	50.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Brandt Mannchen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	100.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
		Robert Tomlinson	-		7 Amount of contributions (\$)
	8/31/2015	6 Contributor address;	City; Friendswood	State; Zip Code TX 77546	15.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Cheryl Willis			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77058	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Mohammed Nasrullah			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/5/2015		Houston	TX 77059	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
		_			
4	Date	5 Full name of contributor  Linda King	out of state F	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77058	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Melissa Courteau			7 Amount of contributions (\$)

M	ONETAR	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME	Douglas Peterson	3 Filer ID (Ethics Commission filers)		
	9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	40.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  John Cobarruvias	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/8/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	30.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Kay Pfister	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/10/2015	6 Contributor address;	City; Seabrook	State; Zip Code TX 77586	100.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Frances Valenzuela	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/3/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	25.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	8	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Douglas Peterson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  James Williams	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	9/10/2015	6 Contributor address;	City; Houston	State; Zip Code	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Harold Brown	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	8/29/2015	6 Contributor address;	City; League City	State; Zip Code TX 77573	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Kenneth Aitken	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	9/8/2015	6 Contributor address;	City; Friendswood	State; Zip Code TX 77546	20.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Jerry Gunn	out of state F	L PAC(ID# )	7 Amount of contributions (\$)
	9/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	300.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

MONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The Instruction (	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
	Frank Perez			7 Amount of contributions (\$)
9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	50.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor  Randa McCartney	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	500.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor Gary Seloff	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	50.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor  R. David King	out of state	PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	1,000.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor  John Branch	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	RY POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
	9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	250.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor  Robert Bertrand	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	8/23/2015	6 Contributor address;	City; Friendswood	State; Zip Code TX 77546	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Evelyn Merz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	8/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77061	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Dennis Lawler	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	8/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	25.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME [	Douglas Peterson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Ken Council	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	8/13/2015	6 Contributor address;	City;	State; Zip Code	25.00
	0, 10, 2010		riodotori	17. 11010	25.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Timothy Riley	out of state F	L PAC(ID# )	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	200.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Ellys Abrams	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Washington	State; Zip Code DC 20001	25.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Segun Thomas	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	200.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
		Marion Hulen			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/8/2015		Houston	TX 77062	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		James Rine	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/11/2015		Houston	TX 77008	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Tom Gederberg	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	7/22/2015		Houston	TX \$77,025.00	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
			<del> </del>		1
4	Date	5 Full name of contributor Cheryl Willis	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	7/19/2015		Houston	TX 77058	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Art Stretton			7 Amount of contributions (\$)

M	ONETAR	RY POLITICAL CONT	RIBUTION	S	SCHEDULE A
Th	e Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Douglas Peterson			3 Filer ID (Ethics Commission filers)
	7/7/2015	6 Contributor address;	City; Webster	State; Zip Code TX 77598	25.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4	Date	5 Full name of contributor  Art Stretton	out of state	PAC(ID# )	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Webster	State; Zip Code TX 77598	25.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4	Date	5 Full name of contributor Sandra Anderson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	8/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	600.00
8	Principal oc	ecupation / Job title (See Instructions)		9 Employer (See Instru	Letions)
		ATTACH ADDITIO	ONAL COPIES	OF THIS SCHEDUL	E AS NEEDED
		If contributor is out-of-state PA	AC, please see ins	struction guide for addition	onal reporting requirements

	NON-MONE CONTRIBU	ETARY (IN-KIND) P ITIONS	OLITICAL		SCHEDULE A2
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS  5 Date 6 Full name of contributor out of state PAC(ID# )  8 Amount of contribution description	The Instruction C	Guide explains how to compl	ete this form.		1 Total Pages Schedule A2:
5 Date 6 Full name of contributor out of state PAC(ID# )  8 Amount of contribution description	2 FILER NAME I	 Douglas Peterson			3 Filer ID (Ethics Commission filers)
8 Amount of 9 In-Kind contribution contributions (\$) description	4 TOTAL OF UN	IITEMIZED IN-KIND POLITI	CAL CONTRIBL	ITIONS	\$120.00
7 Contributor address; City; State; Zip Code	5 Date	6 Full name of contributor	out of state	PAC(ID# )	
Check if travel outside of Texas, complete Schedule T		7 Contributor address;	City;	State; Zip Code	
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	10 Principal occ	upation / Job title (See Instructions)		11 Employer (See Instru	uctions)
5 Date 6 Full name of contributor out of state PAC(ID# )  Michael Matula 8 Amount of contributions (\$) 9 In-Kind contribution description	5 Date		out of state	PAC(ID# )	
7 Contributor address; City; State; Zip Code	0///0045	7 Contributor address;	•	,	
9/1/2015 Houston TX 77059 120.00 Printing Services  Check if travel outside of Texas, complete Schedule T	9/1/2015		Houston	1X 77059	Check if travel outside of Texas, complete
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	10 Principal occ	upation / Job title (See Instructions)		11 Employer (See Instru	uctions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		ATTACH ADDIT	IONAL COPIES	OF THIS SCHEDUL	E AS NEEDED

	The Instruction Guide exp	plains how to complete this form	-
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/24/2015	Matala Idi		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	910 Fair Oaks Dr.		
	Apt. 2021		
	Houston TX 77023		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Sal/Wages/Ctrct. Lbr	Ctrct Lbr for Camp	Serv
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought of	ffice held
onponantinos to zonom c/cm			
4 Date	5 Payee name		
8/26/2015	Matala Idi		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	910 Fair Oaks Dr.		
	Apt. 2021		
	Houston TX 77023		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Sal/Wages/Ctrct. Lbr	Ctrct Lbr for Camp	Serv
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	ffice held
4 Date	E Dove nome		
	5 Payee name		
9/2/2015	Matala Idi	State: Zin Code	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	910 Fair Oaks Dr.		
	Apt. 2021		
a Burdoce of Everyore:	Houston TX 77023	(L) Description	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ctrct Lbr for Camp Serv Sal/Wages/Ctrct. Lbr 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/9/2015 Matala Idi **6** Amount (\$) 7 Payee address; Zip Code City; State; 500.00 910 Fair Oaks Dr. Apt. 2021 Houston TX 77023 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ctrct Lbr for Camp Serv Sal/Wages/Ctrct. Lbr Candidate / Officehoder name 9 Complete ONLY if direct office sought office held

expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters			
4 Date	5 Payee name			
9/18/2015	Matala Idi			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	910 Fair Oaks Dr.			
	Apt. 2021			
	Houston TX 77023			
8 PURPOSE OF EXPENDITURE		(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Sal/Wages/Ctrct. Lbr	Ctrct Lbr for Camp Serv		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
experialities to benefit 6/011				
4 Date	5 Payee name			
9/23/2015	Matala Idi			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	910 Fair Oaks Dr.			
	Apt. 2021			
	Houston TX 77023			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Sal/Wages/Ctrct. Lbr	Ctrct Lbr for Camp Serv		
O Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officerioder frame	office sought office held		
4 Date	5 Payee name			
7/26/2015	FedExOffice			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
8.34	495 Bay Area Blvd.			
0.07				
	Houston TX 77058			
8 PURPOSE OF EXPENDITURE		(b) Description		

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** Copies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 8/10/2015 FedExOffice 7 Payee address; 6 Amount (\$) City; Zip Code State; 7.04 495 Bay Area Blvd. Houston TX 77058 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Copies **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/8/2015	FedExOffice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5.20	495 Bay Area Blvd.		
	Houston TX 77058		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Printing Expense	Copies	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought off	ice held
experientales to belieff 6/011			
4 Date	5 Payee name		
9/8/2015	FedExOffice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
60.61	495 Bay Area Blvd.		
	Houston TX 77058		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Printing Expense	Sign Boards	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought off	ice held
'			
4 Date	5 Payee name		
9/19/2015	FedExOffice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
17.41	495 Bay Area Blvd.		
	Houston TX 77058		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** Copies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/14/2015 FedExOffice 7 Payee address; 6 Amount (\$) Zip Code City; State; 3.85 495 Bay Area Blvd. Houston TX 77058 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Copies **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters	on	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/29/2015	Starbucks		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
16.18	515 Bay Area Blvd.		
	Houston TX 77058		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Food/Beverage Expense	mtg to discuss cam	p iss
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experientative to benefit 0/011			
4 Date	5 Payee name		
8/29/2015	Kroger		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.60	16400 El Camino Real		
	Houston TX 77062		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Food/Beverage Expense	mtg to discuss cam	p iss
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	ffice held
[			
4 Date	5 Payee name		
8/29/2015	Einstein Bros Bagels		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
16.95	923 Bay Area Blvd.		
	Houston TX 77058		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food/Beverage Expense mtg to discuss camp iss 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/8/2015 Frenchy's Villa Capri 7 Payee address; 6 Amount (\$) Zip Code City; State; 3713 NASA Rd 1 1,191.37 Seabrook TX 77586 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense fundraising event Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

		plains how to complete this form.	
Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
7/14/2015	Monarch Printing Co Inc		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
319.33	6605 McGrew		
	Houston TX 77087		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Printing Expense	candidate cards	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
8/10/2015	Monarch Printing Co Inc		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
895.10	6605 McGrew		
	Houston TX 77087		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Printing Expense	push cards	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/14/2015	Monarch Printing Co Inc		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,463.54	6605 McGrew		
	Houston TX 77087		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense doorhangers&push cards **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/11/2015 Kroger 7 Payee address; 6 Amount (\$) Zip Code City; State; 1950 El Dorado 2.48 Houston TX 77062 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead campaign office supplies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Douglas Peters		)		
4 Date	5 Payee name				
7/11/2015	Kroger				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
19.60	1950 El Dorado				
	Houston TX 77062				
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  campaign office supplies			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held			
4 Date	5 Payee name				
8/27/2015	Kroger				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
196.00	1950 El Dorado				
	Houston TX 77062				
8 PURPOSE OF EXPENDITURE		(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense			
	Office Overhead	stamps			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
7/28/2015	Office Depot				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
38.93	961 E. NASA Pkwy.				
	Houston TX 77058				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead campaign office supplies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 8/25/2015 Office Depot 7 Payee address; 6 Amount (\$) City; Zip Code State; 81.16 961 E. NASA Pkwy. Houston TX 77058 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead campaign office supplies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Douglas Peterson 3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name		
7/27/2015	USPS		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
98.00	14917 El Camino Real		
	Houston TX 77062		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Office Overhead	stamps	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
8/24/2015	Fry's Electronics		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
6.48	21300 Gulf Fwy		
	Webster TX 77598		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Office Overhead	campaign office sup	pplies
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
8/31/2015	Fry's Electronics		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
54.10	21300 Gulf Fwy		
	Webster TX 77598		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead campaign office supplies 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/14/2015 Sprint 2 Print 7 Payee address; 6 Amount (\$) City; Zip Code State; 1,385.60 8748 Clay Rd, Ste 300 Houston TX 77080 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense yard signs Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Douglas Peterson 3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name		,	
7/20/2015	Douglas Peterson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
49.97	2118 Cherrytree Ridge Ln			
	Houston TX 77062			
8 PURPOSE OF EXPENDITURE	(a) Category  Reimbursement	(b) Description  Check if travel outside of Te  Check if Austin, TX, officehor  campaign expense	older living expense	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
8/6/2015	Douglas Peterson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
78.51	2118 Cherrytree Ridge Ln			
	Houston TX 77062			
8 PURPOSE OF EXPENDITURE	(a) Category  Reimbursement	(b) Description  Check if travel outside of Te  Check if Austin, TX, officehor  campaign epenses	older living expense	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
9/15/2015	Douglas Peterson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
830.83	2118 Cherrytree Ridge Ln			
A DUDDOCE OF EVERYDIESE	Houston TX 77062	(L) Description		
8 PURPOSE OF EXPENDITURE	r(a) Calegory	(b) Description		

#### POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Douglas Peterson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Reimbursement camp exp July - Sept 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/24/2015 **Democracy Engine** 6 Amount (\$) 7 Payee address; City; State; Zip Code 37.09 2125 14th St., NW Washington DC 20009 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense on-line contribution fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 The Instruction Guide explains how to complete this form. Total pages Schedule F4: 3 Filer ID (Ethics Commission filers) FILER NAME Douglas Peterson TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$\$244.15 5 Date Payee name 7/6/2015 Staples **7** Amount (\$) Payee address; City: State: Zip Code 56.27 19335 Gulf Fwy

Webster TX 77598

Political

TYPE OF EXPENDITURE

9

Non-Political

		The Instruction Guide explains h	how t	o complete this form.	
1	Total pages Schedule F4:	2 FILER NAME Douglas Peterso		3 Filer ID (Ethics Commission filers)	
4		NDITURES CHARGED TO A CREDIT CARD		\$\$244.15	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this		escription	
		Office Overhead/Rental Expense		Check if travel outside of Texas, complete So Check if Austin, TX, officeholder living expens Printer Ink	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name		office sought	office held
5	Date	6 Payee name			
	8/27/2015	Staples			
7	Amount (\$)	8 Payee address; City;	Stat	te; Zip Code	
	34.63	19335 Gulf Fwy			
		Webster TX 77598			
9	TYPE OF EXPENDITURE	X Political	Щ	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense		escription  Check if travel outside of Texas, complete Sc  Check if Austin, TX, officeholder living expense  Printer Ink	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name		office sought	office held
5	Date	6 Payee name			
	9/10/2015	Staples			
7	Amount (\$)	8 Payee address; City;	Stat	te; Zip Code	
	43.29	19335 Gulf Fwy Webster TX 77598			
9	TYPE OF EXPENDITURE	X Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		escription  Check if travel outside of Texas, complete Sc  Check if Austin, TX, officeholder living expense	

E	XPENDITURES MA	SCHEDULE F4			
	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME Douglas Peterso	on 3 Filer ID (Ethics Commission filers	5)	
4	TOTAL OF UNITEMIZED EXPE	NDITURES CHARGED TO A CREDIT CARD	\$\$244.15		
		Office Overhead/Rental Expense	Printer Ink		
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME Douglas Peterson 4 Date 5 Payee name 8/24/2015 City of Houston parking 6 Amount (\$) 7 Payee Address; City; State: Zip Code 4.00 2020 McKinney Houston TX 77003 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Travel in District Parking **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 8/24/2015 City of Houston parking 6 Amount (\$) 7 Payee Address; City; State: Zip Code 2.00 Houston TX 77003 2020 McKinney X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Travel in District Parking **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 9/17/2015 JSCFCU VISA 6 Amount (\$) 7 Payee Address; City; State; Zip Code 123.00 PO Box 58346 Houston TX 77258 X Reimbursement from political contributions intended 8 (a) Category (b) Description

SCHEDULE G

#### POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME Douglas Peterson **PURPOSE OF** Credit Card Payment Campaign Expenses **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office held Office sought expenditure to benefit C/OH 4 Date 5 Payee name 8/12/2015 Chase Card Service VISA 6 Amount (\$) 7 Payee Address; City; Zip Code State; 107.51 PO Box 94014 **Palatine** IL 60094 X Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Credit Card Payment Campaign Expenses **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 8/21/2015 Houston Mayor's Office 6 Amount (\$) 7 Payee Address; City; State; Zip Code 500.00 77002 900 Bagby St. Houston TX Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Fees Filing fee **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date 5 Payee name 8/13/2015 Harris Co Tejano Dems

POLITICAL EXP	ENDITURES	SCHE	DULE G
MADE FROM PE	RSONAL FUNDS		
	The Instruction Guide explains h	now to complete this form.	
1 Total Pages Schedule G:	<sup>2</sup> FILER NAME Douglas Peterson	3 FilerID (Ethics Commission filers)	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code	
25.00	2314 Tannehill Dr.	Houston TX 77008	
X Reimbursement from			
political contributions			
intended			
8	(a) Category	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Membership fee	
EXPENDITORE		Check if travel outside of Texas, complete Scheo	dule T
		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
4 Date	5 Payee name		
9/10/2015	Chase Card Service VISA		
6 Amount (\$)	7 Payee Address;	City; State; Zip Code	
40.91	PO Box 94014	Palatine IL 60094	
X Reimbursement from			
political contributions			
intended			
8	(a) Category	(b) Description	
PURPOSE OF EXPENDITURE	Credit Card Payment	Campaign Expenses	
		Check if travel outside of Texas, complete Scheo	dule T
		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

POLITICAL EXP	SCHEDULE G	
MADE FROM PI	ERSONAL FUNDS	
	The Instruction Guide explains ho	ow to complete this form.
1 Total Pages Schedule G:	<sup>2</sup> FILER NAME Douglas Peterson	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	<u> </u>
9/24/2015	Chase Card Service VISA	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
106.92	PO Box 94014	Palatine IL 60094
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF	Credit Card Payment	Campaign Expenses
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH	Candidate / Cincendide Hame	Office sought Office field
4 Date	5 Payee name	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF		
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
O Complete ONLY if direct	Candidata / Office holder name	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF 1	THIS SCHEDULE AS NEEDED

#### NON-POLITICAL EXPENDITURES SCHEDULE I MADE FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule I: 3 ACCOUNT # (Ethics Commission filers) <sup>2</sup> FILER NAME Douglas Peterson 4 Date 5 Payee name 9/15/2015 **BBVA Compass 6** Amount (\$) 7 Payee address; City; Zip Code State: 12.00 1212 Bay Area Blvd. Houston TX 77058 8 PURPOSE OF (a) Category (b) Description (See instructions regarding type of information required) **EXPENDITURE** Fees Bank fees 4 Date 5 Payee name 9/15/2015 **BBVA Compass** 6 Amount (\$) 7 Payee address; City; State; Zip Code 6.00 1212 Bay Area Blvd. Houston TΧ 77058 **PURPOSE OF** (a) Category (b) Description (See instructions regarding type of information required) **EXPENDITURE** Bank fees Fees ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K CONTRIBUTIONS RETURNED TO FILERS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule K: Filer ID (Ethics Commission filers) 2 FILER NAME Douglas Peterson Date 5 Name of person whom amount is received 4 Fry's Electronics 8 Amount 6 Address of person from whom amount is received; City; State; Zip Code (\$) 9/17/2015 Webster TX 77598 No 7 Purpose for which amount is received Check if political contribution refund merch retrnd returned to filer Date 5 Name of person whom amount is received **BBVA Compass** 8 **Amount** 6 Address of person from whom amount is received; City; State; Zip Code (\$) 9/18/2015 Houston TΧ 77058 No Check if political contribution 7 Purpose for which amount is received returned to filer refund bank fees ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED