

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form | 1 Filer ID(Ethics Commission filers) | 2 Total pages filed

|  |  |  |                             |
|--|--|--|-----------------------------|
| 3 CANDIDATE / OFFICEHOLDER NAME  | MS/MRS/MR FIRST MI<br>Douglas  | <b>OFFICE USE ONLY</b>   |                             |
|  | NICKNAME LAST SUFFIX<br>Peterson   |  |                             |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><input type="checkbox"/> Change of address | ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE<br>2118 Cherrytree Ridge Ln<br>Houston TX 77062   | Date Hand-delivered or Date Postmarked   |                             |
|  | 5 CANDIDATE / OFFICEHOLDER PHONE   | AREA CODE PHONE NUMBER EXTENSION<br>(281) 782-2721   |                             |
| 6 CAMPAIGN TREASURER NAME  | MS/MRS/MR FIRST MI<br>Randa  | Receipt #  | Amount                      |
|  | NICKNAME LAST SUFFIX<br>McCartney  | Date Processed   |                             |
| 7 CAMPAIGN TREASURER ADDRESS (Residence)   | STREET ADDRESS (No PO Box Please); APT/SUITE #; CITY; STATE; ZIP CODE<br>2118 Cherrytree Ridge Ln<br>Houston TX 77062  | Date Imaged  |                             |
|  | 8 CAMPAIGN TREASURER PHONE   | AREA CODE PHONE NUMBER EXTENSION<br>(281) 782-9869   |                             |
| 9 REPORT TYPE  | <input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit<br><input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only) |  |                             |
| 10 PERIOD COVERED  | Month Day Year<br>7/1/2015   | THROUGH  | Month Day Year<br>9/24/2015 |
| 11 ELECTION  | ELECTION DATE<br>Month Day Year<br>11/3/2015   | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |                             |
| 12 OFFICE  | OFFICE HELD (if any)   | 13 OFFICE SOUGHT (if known)<br>City Council - At Large Position 3  |                             |

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

14 FILER NAME Douglas Peterson 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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

|                |                                      |
|----------------|--------------------------------------|
| COMMITTEE TYPE | COMMITTEE NAME                       |
|                | COMMITTEE ADDRESS                    |
|                | COMMITTEE CAMPAIGN TREASURER NAME    |
|                | COMMITTEE CAMPAIGN TREASURER ADDRESS |

GENERAL  
 SPECIFIC

|                         |   |  |             |
|-------------------------|---|--|-------------|
| 17 CONTRIBUTION TOTALS  | 1 | TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$20.00     |
|                         | 2 | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                  | \$10,225.00 |
| EXPENDITURE TOTALS      | 3 | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$244.15    |
|                         | 4 | TOTAL POLITICAL EXPENDITURES   | \$9,886.27  |
| CONTRIBUTION BALANCE    | 5 | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$2,271.17  |
| OUTSTANDING LOAN TOTALS | 6 | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$0.00      |

18 AFFIDAVIT

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

Douglas Peterson

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

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

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Print name of officer administering oath

\_\_\_\_\_  
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                             | <b>SCHEDULE SUBTOTALS</b>  | <b>SUBTOTAL</b>                        |
|                                | <b>NAME OF SCHEDULE</b>  | <b>AMOUNT</b>                          |
| 1                              | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 10085                               |
| 2                              | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$ 120                                 |
| 3                              | SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$ 0                                   |
| 4                              | SCHEDULE E: LOANS  | \$ 0                                   |
| 5                              | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$ 9886                                |
| 6                              | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$ 0                                   |
| 7                              | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$ 0                                   |
| 8                              | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$ 909                                 |
| 9                              | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$ 0                                   |
| 10                             | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$ 18                                  |
| 11                             | 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.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Douglas Peterson 3 Filer ID (Ethics Commission filers)

|        |  |                                |
|--------|--|--------------------------------|
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) | 7 Amount of contributions (\$) |
|        | 6 Contributor address; City; State; Zip Code                               |                                |

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|           |   |                                |
|-----------|---|--------------------------------|
| 4 Date    | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Israel Galvan | 7 Amount of contributions (\$) |
| 8/14/2015 | 6 Contributor address; City; State; Zip Code<br>League City TX 77573                        |                                |

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|           |  |                                |
|-----------|--|--------------------------------|
| 4 Date    | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Kay Mudd | 7 Amount of contributions (\$) |
| 8/12/2015 | 6 Contributor address; City; State; Zip Code<br>Iowa Colony TX 77583                   |                                |

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|           |   |                                |
|-----------|---|--------------------------------|
| 4 Date    | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Spyros Varsos | 7 Amount of contributions (\$) |
| 8/14/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                            |                                |

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|        |  |  |
|--------|--|--|
| 4 Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) |  |
|--------|--|--|

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |                               |                                     |
|---|---|-------------------------------|-------------------------------------|
| The Instruction Guide explains how to complete this form. |   | 1                             | Total Pages Schedule A1:            |
| 2 FILER NAME Douglas Peterson                             |   | 3                             | Filer ID (Ethics Commission filers) |
| 8/12/2015   | Albert Lapidus<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77062  | 7                             | Amount of contributions (\$) 25.00  |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                     |
| 8/18/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Eva Hern<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Kemah TX 77565        | 7                             | Amount of contributions (\$) 200.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                     |
| 8/18/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Ralph Parr<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77062    | 7                             | Amount of contributions (\$) 250.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                     |
| 8/22/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Kenneth Olive<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77081 | 7                             | Amount of contributions (\$) 200.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                     |
| 4   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Peter Bowman  | 7                             | Amount of contributions (\$) 200.00 |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |   |                                     |
|---|---|---|---|-------------------------------------|
| The Instruction Guide explains how to complete this form. |   |   | 1 | Total Pages Schedule A1:            |
| 2 FILER NAME Douglas Peterson                             |   |   | 3 | Filer ID (Ethics Commission filers) |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Jane Williams   | 7 | Amount of contributions (\$)        |
|   | 8/25/2015   | 6 Contributor address; City; State; Zip Code<br>Seabrook TX 77586                             |   | 500.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Diane Rhorer    | 7 | Amount of contributions (\$)        |
|   | 9/8/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                              |   | 250.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Aaron Rublein   | 7 | Amount of contributions (\$)        |
|   | 9/8/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77058                              |   | 50.00                               |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Sandra Anderson | 7 | Amount of contributions (\$)        |
|   | 9/8/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                              |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )                    |   |                                     |







# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |   |                                     |
|---|---|---|---|-------------------------------------|
| The Instruction Guide explains how to complete this form. |   |   | 1 | Total Pages Schedule A1:            |
| 2 FILER NAME Douglas Peterson                             |   |   | 3 | Filer ID (Ethics Commission filers) |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Lela A. Hammond | 7 | Amount of contributions (\$)        |
|   | 9/8/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                              |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Jose Parra      | 7 | Amount of contributions (\$)        |
|   | 9/1/2015  | 6 Contributor address; City; State; Zip Code<br>Pearland TX 77584                             |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Merle Bunde     | 7 | Amount of contributions (\$)        |
|   | 8/29/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                              |   | 50.00                               |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Brandt Mannchen | 7 | Amount of contributions (\$)        |
|   | 8/30/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77096                              |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |   | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )                    |   |                                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |                                       |                                     |
|---|---|---------------------------------------|-------------------------------------|
| The Instruction Guide explains how to complete this form. |   | 1                                     | Total Pages Schedule A1:            |
| 2 FILER NAME Douglas Peterson                             |   | 3 Filer ID (Ethics Commission filers) |                                     |
| 8/31/2015   | Robert Tomlinson<br><hr style="border-top: 1px dashed black;"/> 6 Contributor address; City; State; Zip Code<br>Friendswood TX 77546  | 7                                     | Amount of contributions (\$) 15.00  |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |                                     |
| 9/8/2015  | Cheryl Willis<br><input type="checkbox"/> out of state PAC(ID# )<br><hr style="border-top: 1px dashed black;"/> 6 Contributor address; City; State; Zip Code<br>Houston TX 77058      | 7                                     | Amount of contributions (\$) 100.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |                                     |
| 9/5/2015  | Mohammed Nasrullah<br><input type="checkbox"/> out of state PAC(ID# )<br><hr style="border-top: 1px dashed black;"/> 6 Contributor address; City; State; Zip Code<br>Houston TX 77059 | 7                                     | Amount of contributions (\$) 100.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |                                     |
| 9/8/2015  | Linda King<br><input type="checkbox"/> out of state PAC(ID# )<br><hr style="border-top: 1px dashed black;"/> 6 Contributor address; City; State; Zip Code<br>Houston TX 77058         | 7                                     | Amount of contributions (\$) 100.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |                                     |
| 9/8/2015  | Melissa Courteau<br><input type="checkbox"/> out of state PAC(ID# )   | 7                                     | Amount of contributions (\$) 100.00 |

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

|   |  |                                       |                          |
|---|--|---------------------------------------|--------------------------|
| The Instruction Guide explains how to complete this form. |  | 1                                     | Total Pages Schedule A1: |
| 2 FILER NAME Douglas Peterson                             |  | 3 Filer ID (Ethics Commission filers) |                          |
| 9/8/2015  | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77062                              | 40.00                                 |                          |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |                          |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>John Cobarruvas    | 7 Amount of contributions (\$)        |                          |
| 9/8/2015  | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77062                              | 30.00                                 |                          |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |                          |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Kay Pfister        | 7 Amount of contributions (\$)        |                          |
| 8/10/2015   | 6 Contributor address;<br>City; State; Zip Code<br>Seabrook TX 77586                             | 100.00                                |                          |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |                          |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Frances Valenzuela | 7 Amount of contributions (\$)        |                          |
| 9/3/2015  | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77059                              | 25.00                                 |                          |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |                          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |   |                                     |
|---|---|--|---|-------------------------------------|
| The Instruction Guide explains how to complete this form. |   |  | 1 | Total Pages Schedule A1:            |
| 2 FILER NAME Douglas Peterson                             |   |  | 3 | Filer ID (Ethics Commission filers) |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>James Williams | 7 | Amount of contributions (\$)        |
|   | 9/10/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77004                             |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |  | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Harold Brown   | 7 | Amount of contributions (\$)        |
|   | 8/29/2015   | 6 Contributor address; City; State; Zip Code<br>League City TX 77573                         |   | 100.00                              |
| 8   | Principal occupation / Job title (See Instructions) |  | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Kenneth Aitken | 7 | Amount of contributions (\$)        |
|   | 9/8/2015  | 6 Contributor address; City; State; Zip Code<br>Friendswood TX 77546                         |   | 20.00                               |
| 8   | Principal occupation / Job title (See Instructions) |  | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Jerry Gunn     | 7 | Amount of contributions (\$)        |
|   | 9/15/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062                             |   | 300.00                              |
| 8   | Principal occupation / Job title (See Instructions) |  | 9 | Employer (See Instructions)         |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )                   |   |                                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |                               |                                       |
|---|---|-------------------------------|---------------------------------------|
| The Instruction Guide explains how to complete this form. |   | 1                             | Total Pages Schedule A1:              |
| 2 FILER NAME Douglas Peterson                             |   | 3                             | Filer ID (Ethics Commission filers)   |
| 9/16/2015   | Frank Perez<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77059   | 7                             | Amount of contributions (\$) 50.00    |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                       |
| 9/23/2015   | Randa McCartney <input type="checkbox"/> out of state PAC(ID# )<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77062 | 7                             | Amount of contributions (\$) 500.00   |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                       |
| 9/22/2015   | Gary Seloff <input type="checkbox"/> out of state PAC(ID# )<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77062     | 7                             | Amount of contributions (\$) 50.00    |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                       |
| 9/24/2015   | R. David King <input type="checkbox"/> out of state PAC(ID# )<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77058   | 7                             | Amount of contributions (\$) 1,000.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions) |                                       |
| John Branch   | John Branch <input type="checkbox"/> out of state PAC(ID# )   | 7                             | Amount of contributions (\$) 0.00     |

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

|   |   |                                       |  |
|---|---|---------------------------------------|--|
| The Instruction Guide explains how to complete this form. |   | 1                                     | Total Pages Schedule A1:                     |
| 2 FILER NAME Douglas Peterson                             |   | 3 Filer ID (Ethics Commission filers) |  |
| 9/21/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062  |                                       | 250.00                                       |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |  |
| 8/23/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Robert Bertrand<br>6 Contributor address; City; State; Zip Code<br>Friendswood TX 77546 |                                       | 7 Amount of contributions (\$)<br><br>100.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |  |
| 8/19/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Evelyn Merz<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77061         |                                       | 7 Amount of contributions (\$)<br><br>100.00 |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |  |
| 8/16/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Dennis Lawler<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77058       |                                       | 7 Amount of contributions (\$)<br><br>25.00  |
| 8 Principal occupation / Job title (See Instructions)     |   | 9 Employer (See Instructions)         |  |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |           |   |                               |                                     |   |                              |
|---|-----------|---|-------------------------------|-------------------------------------|---|------------------------------|
| The Instruction Guide explains how to complete this form. |           |   | 1                             | Total Pages Schedule A1:            |   |                              |
| 2 FILER NAME Douglas Peterson                             |           |   | 3                             | Filer ID (Ethics Commission filers) |   |                              |
| 4   | Date      | 5 Full name of contributor<br>Ken Council     | <input type="checkbox"/>      | out of state PAC(ID# )              | 7 | Amount of contributions (\$) |
|   | 8/13/2015 | 6 Contributor address;<br>Houston TX 77019    |                               | City; State; Zip Code               |   |                              |
| 8 Principal occupation / Job title (See Instructions)     |           |   | 9 Employer (See Instructions) |                                     |   |                              |
| 4   | Date      | 5 Full name of contributor<br>Timothy Riley   | <input type="checkbox"/>      | out of state PAC(ID# )              | 7 | Amount of contributions (\$) |
|   | 9/23/2015 | 6 Contributor address;<br>Houston TX 77007    |                               | City; State; Zip Code               |   |                              |
| 8 Principal occupation / Job title (See Instructions)     |           |   | 9 Employer (See Instructions) |                                     |   |                              |
| 4   | Date      | 5 Full name of contributor<br>Ellys Abrams    | <input type="checkbox"/>      | out of state PAC(ID# )              | 7 | Amount of contributions (\$) |
|   | 9/23/2015 | 6 Contributor address;<br>Washington DC 20001 |                               | City; State; Zip Code               |   |                              |
| 8 Principal occupation / Job title (See Instructions)     |           |   | 9 Employer (See Instructions) |                                     |   |                              |
| 4   | Date      | 5 Full name of contributor<br>Segun Thomas    | <input type="checkbox"/>      | out of state PAC(ID# )              | 7 | Amount of contributions (\$) |
|   | 9/21/2015 | 6 Contributor address;<br>Houston TX 77059    |                               | City; State; Zip Code               |   |                              |
| 8 Principal occupation / Job title (See Instructions)     |           |   | 9 Employer (See Instructions) |                                     |   |                              |
| 4   | Date      | 5 Full name of contributor                    | <input type="checkbox"/>      | out of state PAC(ID# )              |   |                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |                                |
|---|--|---|--------------------------------|
| The Instruction Guide explains how to complete this form. |  | 1   | Total Pages Schedule A1:       |
| 2 FILER NAME Douglas Peterson                             |  | 3 Filer ID (Ethics Commission filers)   |                                |
| 9/8/2015  | Marion Hulen   | 7   | Amount of contributions (\$)   |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77062       |   |                                |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)   |                                |
| 8/11/2015   | 4 Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>James Rine    | 7 Amount of contributions (\$) |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008       | 100.00  |                                |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)   |                                |
| 7/22/2015   | 4 Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Tom Gederberg | 7 Amount of contributions (\$) |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX \$77,025.00 | 100.00  |                                |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)   |                                |
| 7/19/2015   | 4 Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Cheryl Willis | 7 Amount of contributions (\$) |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77058       | 100.00  |                                |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)   |                                |
|   | 4 Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Art Stretton  | 7 Amount of contributions (\$) |
|   |  |   |                                |

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

|   |                            |
|---|----------------------------|
| The Instruction Guide explains how to complete this form. | 1 Total Pages Schedule A1: |
|---|----------------------------|

|                               |                                       |
|-------------------------------|---------------------------------------|
| 2 FILER NAME Douglas Peterson | 3 Filer ID (Ethics Commission filers) |
|-------------------------------|---------------------------------------|

|          |  |       |
|----------|--|-------|
| 7/7/2015 | 6 Contributor address; City; State; Zip Code<br>Webster TX 77598 | 25.00 |
|----------|--|-------|

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|                     |  |   |
|---------------------|--|---|
| 4 Date<br>9/23/2015 | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Art Stretton<br>6 Contributor address; City; State; Zip Code<br>Webster TX 77598 | 7 Amount of contributions (\$)<br>25.00 |
|---------------------|--|---|

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

|                     |   |  |
|---------------------|---|--|
| 4 Date<br>8/10/2015 | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Sandra Anderson<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77062 | 7 Amount of contributions (\$)<br>600.00 |
|---------------------|---|--|

|   |                               |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements**

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|   |                            |
|---|----------------------------|
| The Instruction Guide explains how to complete this form. | 1 Total Pages Schedule A2: |
|---|----------------------------|

|                               |                                       |
|-------------------------------|---------------------------------------|
| 2 FILER NAME Douglas Peterson | 3 Filer ID (Ethics Commission filers) |
|-------------------------------|---------------------------------------|

|   |          |
|---|----------|
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | \$120.00 |
|---|----------|

|   |      |  |                          |   |  |   |                              |                                    |
|---|------|--|--------------------------|---|--|---|------------------------------|------------------------------------|
| 5 | Date | 6 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# )                                |  | 8 | Amount of contributions (\$) | 9 In-Kind contribution description |
|   |      | 7 Contributor address; City; State; Zip Code |                          |   |  |   |                              |                                    |
|   |      |  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T |  |   |                              |                                    |

|  |                                |
|--|--------------------------------|
| 10 Principal occupation / Job title (See Instructions) | 11 Employer (See Instructions) |
|--|--------------------------------|

|   |          |  |                          |   |  |   |                              |                                    |
|---|----------|--|--------------------------|---|--|---|------------------------------|------------------------------------|
| 5 | Date     | 6 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# )                                |  | 8 | Amount of contributions (\$) | 9 In-Kind contribution description |
|   |          | Michael Matula                               |                          |   |  |   |                              |                                    |
|   |          | 7 Contributor address; City; State; Zip Code |                          |   |  |   |                              |                                    |
|   | 9/1/2015 |  |                          | Houston TX 77059                                      |  |   | 120.00                       | Printing Services                  |
|   |          |  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T |  |   |                              |                                    |

|  |                                |
|--|--------------------------------|
| 10 Principal occupation / Job title (See Instructions) | 11 Employer (See Instructions) |
|--|--------------------------------|

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements**

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Douglas Peterson   |   | <b>3</b> Filer ID (Ethics Commission filers) |
| <b>4</b> Date<br>8/24/2015        | <b>5</b> Payee name<br>Matala Idi  |   |  |
| <b>6</b> Amount (\$)<br>500.00    | <b>7</b> Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023                      |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Sal/Wages/Ctrct. Lbr   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |  |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |  |

|                                 |  |   |  |
|---------------------------------|--|---|--|
| <b>4</b> Date<br>8/26/2015      | <b>5</b> Payee name<br>Matala Idi  |   |  |
| <b>6</b> Amount (\$)<br>500.00  | <b>7</b> Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023                      |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Sal/Wages/Ctrct. Lbr   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |  |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |  |

|                                 |  |                 |  |
|---------------------------------|--|-----------------|--|
| <b>4</b> Date<br>9/2/2015       | <b>5</b> Payee name<br>Matala Idi  |                 |  |
| <b>6</b> Amount (\$)<br>500.00  | <b>7</b> Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023                      |                 |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category   | (b) Description |  |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |  |

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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)   |
|  | Sal/Wages/Ctrct. Lbr          | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought            | office held   |

|  |  |                          |  |
|--|--|--------------------------|--|
| 4 Date<br>9/9/2015                                     | 5 Payee name<br>Matala Idi   |                          |  |
| 6 Amount (\$)<br>500.00                                | 7 Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023 |                          |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Sal/Wages/Ctrct. Lbr   | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

|                                   |  |   |  |
|-----------------------------------|--|---|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Douglas Peterson   |   | <b>3</b> Filer ID (Ethics Commission filers) |
| <b>4</b> Date<br>9/18/2015        | <b>5</b> Payee name<br>Matala Idi  |   |  |
| <b>6</b> Amount (\$)<br>500.00    | <b>7</b> Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023                      |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Sal/Wages/Ctrct. Lbr   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |  |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |  |

|                                 |  |   |  |
|---------------------------------|--|---|--|
| <b>4</b> Date<br>9/23/2015      | <b>5</b> Payee name<br>Matala Idi  |   |  |
| <b>6</b> Amount (\$)<br>500.00  | <b>7</b> Payee address; City; State; Zip Code<br>910 Fair Oaks Dr.<br>Apt. 2021<br>Houston TX 77023                      |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Sal/Wages/Ctrct. Lbr   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Ctrct Lbr for Camp Serv |  |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |  |

|                                 |   |                 |  |
|---------------------------------|---|-----------------|--|
| <b>4</b> Date<br>7/26/2015      | <b>5</b> Payee name<br>FedExOffice  |                 |  |
| <b>6</b> Amount (\$)<br>8.34    | <b>7</b> Payee address; City; State; Zip Code<br>495 Bay Area Blvd.<br><br>Houston TX 77058 |                 |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category  | (b) Description |  |
|                                 |   |                 |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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)   |
|  | Printing Expense  | <input type="checkbox"/><br><input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Copies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name                      office sought                      office held |  |   |

|  |   |  |  |
|--|---|--|--|
| 4 Date<br><br>8/10/2015                                | 5 Payee name<br><br>FedExOffice   |  |  |
| 6 Amount (\$)<br><br>7.04                              | 7 Payee address;                      City;                      State;                      Zip Code<br><br>495 Bay Area Blvd.<br><br>Houston TX 77058 |  |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Printing Expense  | <input type="checkbox"/><br><input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Copies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name                      office sought                      office held   |  |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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<br>9/8/2015         | 5 Payee name<br>FedExOffice   |  |
| 6 Amount (\$)<br>5.20      | 7 Payee address; City; State; Zip Code<br>495 Bay Area Blvd.<br><br>Houston TX 77058                              |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Printing Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Copies |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |   |
|--------------------------|---|---|
| 4 Date<br>9/8/2015       | 5 Payee name<br>FedExOffice   |   |
| 6 Amount (\$)<br>60.61   | 7 Payee address; City; State; Zip Code<br>495 Bay Area Blvd.<br><br>Houston TX 77058                              |   |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Printing Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Sign Boards |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>9/19/2015      | 5 Payee name<br>FedExOffice   |                 |
| 6 Amount (\$)<br>17.41   | 7 Payee address; City; State; Zip Code<br>495 Bay Area Blvd.<br><br>Houston TX 77058                              |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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)  |
|  | Printing Expense              | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Copies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought            | office held  |

|  |  |                          |   |
|--|--|--------------------------|---|
| 4 Date<br>9/14/2015                                    | 5 Payee name<br>FedExOffice  |                          |   |
| 6 Amount (\$)<br>3.85                                  | 7 Payee address; City; State; Zip Code<br>495 Bay Area Blvd.<br>Houston TX 77058 |                          |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Printing Expense   | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Copies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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<br>8/29/2015        | 5 Payee name<br>Starbucks   |   |
| 6 Amount (\$)<br>16.18     | 7 Payee address; City; State; Zip Code<br>515 Bay Area Blvd.<br><br>Houston TX 77058                              |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Food/Beverage Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mtg to discuss camp iss |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                          |   |   |
|--------------------------|---|---|
| 4 Date<br>8/29/2015      | 5 Payee name<br>Kroger  |   |
| 6 Amount (\$)<br>2.60    | 7 Payee address; City; State; Zip Code<br>16400 El Camino Real<br><br>Houston TX 77062                            |   |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Food/Beverage Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mtg to discuss camp iss |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>8/29/2015      | 5 Payee name<br>Einstein Bros Bagels  |                 |
| 6 Amount (\$)<br>16.95   | 7 Payee address; City; State; Zip Code<br>923 Bay Area Blvd.<br><br>Houston TX 77058                              |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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)   |
|  | Food/Beverage Expense         | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mtg to discuss camp iss |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought            | office held   |

|  |   |                          |  |
|--|---|--------------------------|--|
| 4 Date<br>9/8/2015                                     | 5 Payee name<br>Frenchy's Villa Capri   |                          |  |
| 6 Amount (\$)<br>1,191.37                              | 7 Payee address; City; State; Zip Code<br>3713 NASA Rd 1<br><br>Seabrook TX 77586 |                          |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Food/Beverage Expense   | <input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising event |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought            | office held  |

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:                             | <b>2</b> FILER NAME Douglas Peterson   | <b>3</b> Filer ID (Ethics Commission filers)  |
| <b>4</b> Date<br>7/14/2015                                    | <b>5</b> Payee name<br>Monarch Printing Co Inc                                   |   |
| <b>6</b> Amount (\$)<br>319.33                                | <b>7</b> Payee address; City; State; Zip Code<br>6605 McGrew<br>Houston TX 77087 |   |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category<br><br>Printing Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>candidate cards |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought office held   |

|   |  |  |
|---|--|--|
| <b>4</b> Date<br>8/10/2015                                    | <b>5</b> Payee name<br>Monarch Printing Co Inc                                   |  |
| <b>6</b> Amount (\$)<br>895.10                                | <b>7</b> Payee address; City; State; Zip Code<br>6605 McGrew<br>Houston TX 77087 |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category<br><br>Printing Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>push cards |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought office held  |

|                                  |  |                 |
|----------------------------------|--|-----------------|
| <b>4</b> Date<br>9/14/2015       | <b>5</b> Payee name<br>Monarch Printing Co Inc                                   |                 |
| <b>6</b> Amount (\$)<br>1,463.54 | <b>7</b> Payee address; City; State; Zip Code<br>6605 McGrew<br>Houston TX 77087 |                 |
| <b>8 PURPOSE OF EXPENDITURE</b>  | (a) Category   | (b) Description |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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)   |
|  | Printing Expense              | <input type="checkbox"/><br><input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>doorhangers&push cards |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought  | office held   |

|  |  |  |  |
|--|--|--|--|
| 4 Date<br>7/11/2015                                    | 5 Payee name<br>Kroger   |  |  |
| 6 Amount (\$)<br>2.48                                  | 7 Payee address; City; State; Zip Code<br>1950 El Dorado<br>Houston TX 77062 |  |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Office Overhead  | <input type="checkbox"/><br><input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>campaign office supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought  | office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

|                                   |  |  |  |
|-----------------------------------|--|--|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Douglas Peterson   |  | <b>3</b> Filer ID (Ethics Commission filers) |
| <b>4</b> Date<br><br>7/11/2015    | <b>5</b> Payee name<br><br>Kroger  |  |  |
| <b>6</b> Amount (\$)<br><br>19.60 | <b>7</b> Payee address; City; State; Zip Code<br><br>1950 El Dorado<br><br>Houston TX 77062                              |  |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Office Overhead  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign office supplies |  |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |  |

|                                    |  |  |  |
|------------------------------------|--|--|--|
| <b>4</b> Date<br><br>8/27/2015     | <b>5</b> Payee name<br><br>Kroger  |  |  |
| <b>6</b> Amount (\$)<br><br>196.00 | <b>7</b> Payee address; City; State; Zip Code<br><br>1950 El Dorado<br><br>Houston TX 77062                              |  |  |
| <b>8 PURPOSE OF EXPENDITURE</b>    | (a) Category<br><br>Office Overhead  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>stamps |  |
|                                    | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |  |

|                                   |  |                 |  |
|-----------------------------------|--|-----------------|--|
| <b>4</b> Date<br><br>7/28/2015    | <b>5</b> Payee name<br><br>Office Depot  |                 |  |
| <b>6</b> Amount (\$)<br><br>38.93 | <b>7</b> Payee address; City; State; Zip Code<br><br>961 E. NASA Pkwy.<br><br>Houston TX 77058                           |                 |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category   | (b) Description |  |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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)  |
|  | Office Overhead               | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign office supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought            | office held  |

|  |   |                          |   |
|--|---|--------------------------|---|
| 4 Date<br>8/25/2015                                    | 5 Payee name<br>Office Depot  |                          |   |
| 6 Amount (\$)<br>81.16                                 | 7 Payee address; City; State; Zip Code<br>961 E. NASA Pkwy.<br><br>Houston TX 77058 |                          |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Office Overhead   | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign office supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought            | office held   |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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<br>7/27/2015                                    |  | 5 Payee name<br>USPS   |  |  |  |
| 6 Amount (\$)<br>98.00                                 |  | 7 Payee address; City; State; Zip Code<br>14917 El Camino Real<br><br>Houston TX 77062 |  |  |  |
| 8 PURPOSE OF EXPENDITURE                               |  | (a) Category<br><br>Office Overhead  |  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>stamps |  |
| 9 Complete ONLY if direct expendituree to benefit C/OH |  | Candidate / Officeholder name  |  | office sought office held  |  |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| 4 Date<br>8/24/2015                                    |  | 5 Payee name<br>Fry's Electronics  |  |  |  |
| 6 Amount (\$)<br>6.48                                  |  | 7 Payee address; City; State; Zip Code<br>21300 Gulf Fwy<br><br>Webster TX 77598 |  |  |  |
| 8 PURPOSE OF EXPENDITURE                               |  | (a) Category<br><br>Office Overhead  |  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>campaign office supplies |  |
| 9 Complete ONLY if direct expendituree to benefit C/OH |  | Candidate / Officeholder name  |  | office sought office held  |  |

|                          |  |  |  |                 |  |
|--------------------------|--|--|--|-----------------|--|
| 4 Date<br>8/31/2015      |  | 5 Payee name<br>Fry's Electronics  |  |                 |  |
| 6 Amount (\$)<br>54.10   |  | 7 Payee address; City; State; Zip Code<br>21300 Gulf Fwy<br><br>Webster TX 77598 |  |                 |  |
| 8 PURPOSE OF EXPENDITURE |  | (a) Category   |  | (b) Description |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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)  |
|  | Office Overhead   | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign office supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name office sought office held |                          |  |

|                           |   |  |  |
|---------------------------|---|--|--|
| 4 Date<br>9/14/2015       | 5 Payee name<br>Sprint 2 Print  |  |  |
| 6 Amount (\$)<br>1,385.60 | 7 Payee address; City; State; Zip Code<br>8748 Clay Rd, Ste 300<br><br>Houston TX 77080 |  |  |

|                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Advertising Expense | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>yard signs |
|--------------------------|---|--------------------------|---|

|  |   |  |  |
|--|---|--|--|
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name office sought office held |  |  |
|--|---|--|--|

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

|                                   |  |  |  |
|-----------------------------------|--|--|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Douglas Peterson   |  | <b>3</b> Filer ID (Ethics Commission filers) |
| <b>4</b> Date<br>7/20/2015        | <b>5</b> Payee name<br>Douglas Peterson  |  |  |
| <b>6</b> Amount (\$)<br>49.97     | <b>7</b> Payee address; City; State; Zip Code<br>2118 Cherrytree Ridge Ln<br><br>Houston TX 77062                        |  |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Reimbursement  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign expenses June |  |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |  |

|                                 |  |   |  |
|---------------------------------|--|---|--|
| <b>4</b> Date<br>8/6/2015       | <b>5</b> Payee name<br>Douglas Peterson  |   |  |
| <b>6</b> Amount (\$)<br>78.51   | <b>7</b> Payee address; City; State; Zip Code<br>2118 Cherrytree Ridge Ln<br><br>Houston TX 77062                        |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Reimbursement  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign epenses July |  |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |  |

|                                 |  |                 |  |
|---------------------------------|--|-----------------|--|
| <b>4</b> Date<br>9/15/2015      | <b>5</b> Payee name<br>Douglas Peterson  |                 |  |
| <b>6</b> Amount (\$)<br>830.83  | <b>7</b> Payee address; City; State; Zip Code<br>2118 Cherrytree Ridge Ln<br><br>Houston TX 77062                        |                 |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category   | (b) Description |  |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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)   |
|  | Reimbursement                 | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>camp exp July - Sept |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought                      office held  |

|  |   |
|--|---|
| 4 Date<br>9/24/2015                                    | 5 Payee name<br>Democracy Engine  |
| 6 Amount (\$)<br>37.09                                 | 7 Payee address;                      City;                      State;                      Zip Code<br>2125 14th St., NW<br><br>Washington DC 20009   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Fees<br><br>(b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>on-line contribution fees |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name                      office sought                      office held   |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| 1 Total pages Schedule F4:                                  | 2 FILER NAME Douglas Peterson   | 3 Filer ID (Ethics Commission filers)  |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$244.15  |  |
| 5 Date<br>7/6/2015  | 6 Payee name<br>Staples   |  |
| 7 Amount (\$)<br>56.27                                      | 8 Payee address;                      City;                      State;                      Zip Code<br>19335 Gulf Fwy<br><br>Webster TX 77598 |  |
| 9 TYPE OF EXPENDITURE                                       | <input checked="" type="checkbox"/> Political   | <input type="checkbox"/> Non-Political |



**EXPENDITURES MADE BY CREDIT CARD****SCHEDULE F4**

The Instruction Guide explains how to complete this form.

|   |                                |                                       |
|---|--------------------------------|---------------------------------------|
| 1 Total pages Schedule F4:                                  | 2 FILER NAME Douglas Peterson  | 3 Filer ID (Ethics Commission filers) |
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$244.15                       |                                       |
|   | Office Overhead/Rental Expense | Printer Ink                           |
| 11 Complete ONLY if direct expendituree to benefit C/OH     | Candidate / Officeholder name  | office sought office held             |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

|   |  |  |              |                   |
|---|--|--|--------------|-------------------|
| <b>1</b> Total Pages Schedule G:  | <b>2</b> FILER NAME Douglas Peterson           | <b>3</b> FilerID (Ethics Commission filers)                                    |              |                   |
| <b>4</b> Date<br>8/24/2015  | <b>5</b> Payee name<br>City of Houston parking |  |              |                   |
| <b>6</b> Amount (\$) 4.00   | <b>7</b> Payee Address;<br>2020 McKinney       | City;<br>Houston   | State;<br>TX | Zip Code<br>77003 |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended |  |  |              |                   |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Travel in District             | (b) Description<br>Parking   |              |                   |
|   |  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |              |                   |
|   |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |              |                   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                            | Candidate / Officeholder name                  | Office sought  | Office held  |                   |

|   |  |  |              |                   |
|---|--|--|--------------|-------------------|
| <b>4</b> Date<br>8/24/2015  | <b>5</b> Payee name<br>City of Houston parking |  |              |                   |
| <b>6</b> Amount (\$) 2.00   | <b>7</b> Payee Address;<br>2020 McKinney       | City;<br>Houston   | State;<br>TX | Zip Code<br>77003 |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended |  |  |              |                   |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Travel in District             | (b) Description<br>Parking   |              |                   |
|   |  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |              |                   |
|   |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |              |                   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                            | Candidate / Officeholder name                  | Office sought  | Office held  |                   |

|   |   |                  |              |                   |
|---|---|------------------|--------------|-------------------|
| <b>4</b> Date<br>9/17/2015  | <b>5</b> Payee name<br>JSCFCU VISA      |                  |              |                   |
| <b>6</b> Amount (\$) 123.00   | <b>7</b> Payee Address;<br>PO Box 58346 | City;<br>Houston | State;<br>TX | Zip Code<br>77258 |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended |   |                  |              |                   |
| <b>8</b>  | (a) Category                            | (b) Description  |              |                   |
|   |   |                  |              |                   |

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

|  |                                      |  |
|--|--------------------------------------|--|
| <b>1</b> Total Pages Schedule G:                             | <b>2</b> FILER NAME Douglas Peterson | <b>3</b> FilerID (Ethics Commission filers)  |
| <b>PURPOSE OF EXPENDITURE</b>                                | Credit Card Payment                  | Campaign Expenses<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name        | Office sought      Office held   |

|   |  |   |              |                   |
|---|--|---|--------------|-------------------|
| <b>4</b> Date<br>8/12/2015  | <b>5</b> Payee name<br>Chase Card Service VISA |   |              |                   |
| <b>6</b> Amount (\$)<br>107.51<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee Address;<br>PO Box 94014        | City;<br>Palatine   | State;<br>IL | Zip Code<br>60094 |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Credit Card Payment            | (b) Description<br>Campaign Expenses<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |              |                   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name                  | Office sought   | Office held  |                   |

|   |   |  |              |                   |
|---|---|--|--------------|-------------------|
| <b>4</b> Date<br>8/21/2015  | <b>5</b> Payee name<br>Houston Mayor's Office |  |              |                   |
| <b>6</b> Amount (\$)<br>500.00<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee Address;<br>900 Bagby St.      | City;<br>Houston   | State;<br>TX | Zip Code<br>77002 |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Fees                          | (b) Description<br>Filing fee<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |              |                   |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name                 | Office sought  | Office held  |                   |

|                            |  |  |  |
|----------------------------|--|--|--|
| <b>4</b> Date<br>8/13/2015 | <b>5</b> Payee name<br>Harris Co Tejano Dems |  |  |
|----------------------------|--|--|--|



**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

|   |  |  |
|---|--|--|
| <b>1</b> Total Pages Schedule G:  | <b>2</b> FILER NAME Douglas Peterson       | <b>3</b> FilerID (Ethics Commission filers)                                    |
| <b>6</b> Amount (\$) 25.00<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee Address; 2314 Tannehill Dr. | City; State; Zip Code<br>Houston TX 77008                                      |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Fees                       | (b) Description<br>Membership fee  |
|   |  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |
|   |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name              | Office sought Office held  |

|   |  |  |
|---|--|--|
| <b>4</b> Date<br>9/10/2015  | <b>5</b> Payee name<br>Chase Card Service VISA |  |
| <b>6</b> Amount (\$) 40.91<br><input checked="" type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee Address; PO Box 94014           | City; State; Zip Code<br>Palatine IL 60094                                     |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | (a) Category<br>Credit Card Payment            | (b) Description<br>Campaign Expenses   |
|   |  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |
|   |  | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name                  | Office sought Office held  |

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

|   |  |   |  |                             |
|---|--|---|--|-----------------------------|
| <b>1</b> Total Pages Schedule G:  | <b>2</b> FILER NAME Douglas Peterson           | <b>3</b> FilerID (Ethics Commission filers) |  |                             |
| <b>4</b> Date<br>9/24/2015  | <b>5</b> Payee name<br>Chase Card Service VISA |   |  |                             |
| <b>6</b> Amount (\$)<br>106.92  | <b>7</b> Payee Address;<br>PO Box 94014        |   | City;<br>Palatine  | State; Zip Code<br>IL 60094 |
| <input checked="" type="checkbox"/> Reimbursement from political contributions intended |  |   |  |                             |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>   | <b>(a) Category</b><br>Credit Card Payment     |   | <b>(b) Description</b><br>Campaign Expenses                                    |                             |
|   |  |   | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |                             |
|   |  |   | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |                             |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH                            | Candidate / Officeholder name                  | Office sought                               | Office held  |                             |

|  |                               |               |  |                 |
|--|-------------------------------|---------------|--|-----------------|
| <b>4</b> Date  | <b>5</b> Payee name           |               |  |                 |
| <b>6</b> Amount (\$)<br><br><input type="checkbox"/> Reimbursement from political contributions intended | <b>7</b> Payee Address;       |               | City;  | State; Zip Code |
| <b>8</b><br><b>PURPOSE OF EXPENDITURE</b>  | <b>(a) Category</b>           |               | <b>(b) Description</b>   |                 |
|  |                               |               | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T |                 |
|  |                               |               | <input type="checkbox"/> Check if Austin, TX, officeholder living expense      |                 |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name | Office sought | Office held  |                 |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

|                                  |  |  |              |                   |
|----------------------------------|--|--|--------------|-------------------|
| <b>1</b> Total Pages Schedule I: | <b>2</b> FILER NAME Douglas Peterson           | <b>3</b> ACCOUNT # (Ethics Commission filers)  |              |                   |
| <b>4</b> Date<br>9/15/2015       | <b>5</b> Payee name<br>BBVA Compass            |  |              |                   |
| <b>6</b> Amount (\$)<br>12.00    | <b>7</b> Payee address;<br>1212 Bay Area Blvd. | City;<br>Houston   | State;<br>TX | Zip Code<br>77058 |
| <b>8</b> PURPOSE OF EXPENDITURE  | (a) Category<br>Fees                           | (b) Description (See instructions regarding type of information required)<br>Bank fees |              |                   |
| <b>4</b> Date<br>9/15/2015       | <b>5</b> Payee name<br>BBVA Compass            |  |              |                   |
| <b>6</b> Amount (\$)<br>6.00     | <b>7</b> Payee address;<br>1212 Bay Area Blvd. | City;<br>Houston   | State;<br>TX | Zip Code<br>77058 |
| <b>8</b> PURPOSE OF EXPENDITURE  | (a) Category<br>Fees                           | (b) Description (See instructions regarding type of information required)<br>Bank fees |              |                   |

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILERS

**SCHEDULE K**

The Instruction Guide explains how to complete this form.

**1** Total Pages Schedule K:

|                                      |  |  |  |
|--------------------------------------|--|--|--|
| <b>2</b> FILER NAME Douglas Peterson |  | <b>Filer ID</b> (Ethics Commission filers) |  |
| <b>4</b> Date<br>9/17/2015           | <b>5</b> Name of person whom amount is received<br>Fry's Electronics                               | <b>8</b> Amount<br>(\$)<br>No              |  |
|                                      | <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br>Webster TX 77598 |  |  |
|                                      | <b>7</b> Purpose for which amount is received<br>refund merch retrnd                               |  | <input type="checkbox"/> Check if political contribution returned to filer |
| <b>4</b> Date<br>9/18/2015           | <b>5</b> Name of person whom amount is received<br>BBVA Compass                                    | <b>8</b> Amount<br>(\$)<br>No              |  |
|                                      | <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br>Houston TX 77058 |  |  |
|                                      | <b>7</b> Purpose for which amount is received<br>refund bank fees                                  |  | <input type="checkbox"/> Check if political contribution returned to filer |

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