

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 19		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME		MS / MRS / MR FIRST MI			
		NICKNAME LAST SUFFIX			
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit _____ <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Date Hand-delivered or Date Postmarked	
5 ORIGINAL PERIOD COVERED		Month Day Year Month Day Year 02 / 07 / 2017 THROUGH 03 / 27 / 2017		Receipt # Amount \$	
				Date Processed	
				Date Imaged	

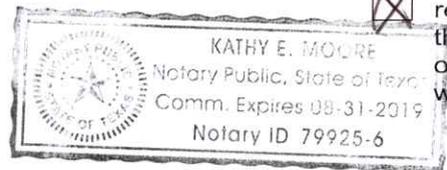
6 EXPLANATION OF CORRECTION
**There was an error in the calculation of in-kind contributions
 In-kind contributions went from \$8536.84 to \$3127.77**

7 AFFIDAVIT
 I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Sandra Lee
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sandra Lee, this the 4th day of January

20 18, to certify which, witness my hand and seal of office.

Kathy E. Moore *Kathy E. Moore* *Deputy City Secretary*
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
 Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Sandra Lee 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 100.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4992.77
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1362.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 504.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1.00

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.

Sandra Lee
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sandra Lee, this the 4th day of January, 2018, to certify which, witness my hand and seal of office.

Kathy E. Moore
Signature of officer administering oath

Kathy E. Moore
Printed name of officer administering oath

Deputy City Secretary
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Sandra Lee

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1765.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3127.77
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1362.00
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 3

2 FILER NAME

Sandra Lee

3 Filer ID (Ethics Commission Filers)

4 Date

3-1-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Buddy Saunders

7 Amount of contribution (\$)

100.00

6 Contributor address; City; State; Zip Code

[REDACTED]

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-1-17

Full name of contributor

out-of-state PAC (ID#: _____)

Jan Joplin Campaign

Amount of contribution (\$)

765.00

Contributor address; City; State; Zip Code

[REDACTED]

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-1-17

Full name of contributor

out-of-state PAC (ID#: _____)

Deborah Peoples

Amount of contribution (\$)

100.00

Contributor address; City; State; Zip Code

[REDACTED]

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-6-17

Full name of contributor

out-of-state PAC (ID#: _____)

Ronald Sturgeon

Amount of contribution (\$)

200.00

Contributor address; City; State; Zip Code

[REDACTED]

Principal occupation / Job title (See Instructions)

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 3

2 FILER NAME

Sandra Lee

3 Filer ID (Ethics Commission Filers)

4 Date

3-8-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Robert Gruenhagen

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3-13-17

Full name of contributor

out-of-state PAC (ID#: _____)

Cathy Brown

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-13-17

Full name of contributor

out-of-state PAC (ID#: _____)

Tom Newsome

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3-20-17

Full name of contributor

out-of-state PAC (ID#: _____)

Ronald Sturgeon

Amount of contribution (\$)

100.00

Contributor address;

Principal occupation / Job title (See Instructions)

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 3

2 FILER NAME

Sandra Lee

3 Filer ID (Ethics Commission Filers)

4 Date

3-25-17

5 Full name of contributor

out-of-state PAC (ID#: _____)

Robert Gruenhagen

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

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: **1 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ **0.00**

5 Date 3-3-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cliff & Gail Uranga	8 Amount of Contribution \$ 60.00	9 In-kind contribution description Towncenter Pavilion
7 Contributor address: _____ [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date 3-25-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Compassion of Christ Ministries	Amount of Contribution \$ 66.67	In-kind contribution description Food & drink
Contributor address: _____ [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

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 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date
3-17-17

6 Full name of contributor out-of-state PAC (OR: _____)
Allen Ray Associates

7 Contributor address (City, State, Zip Code)
[REDACTED]

8 Amount of Contribution \$ **166.67** 9 In-kind contribution description
Printing

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
3-17-17

Full name of contributor out-of-state PAC (OR: _____)
Rockie Gilley Campaign

Contributor address (City, State, Zip Code)
[REDACTED]

Amount of Contribution \$ **131.47** In-kind contribution description
Printing

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: **3 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date: **3-27-17**
6 Full name of contributor out-of-state PAC (OR): **Rockie Gilley Campaign**
7 Contributor address; City, State, Zip Code

8 Amount of Contribution \$: **166.67**
9 In-kind contribution description: **Event music**

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date: **3-27-17**
Full name of contributor out-of-state PAC (OR): **Allen Ray Associates**
Contributor address; City, State, Zip Code

Amount of Contribution \$: **201.60**
In-kind contribution description: **Printing**

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

Employer (FOR NON-JUDICIAL) (See instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: **4 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date

3-17-17

6 Full name of contributor out-of-state PAC (OR: _____)

Jan Joplin Campaign

7 Contributor address
[REDACTED]

8 Amount of Contribution \$

255.00

9 In-kind contribution description
Advertising

Check if travel outside of Texas. Complete Schedule I.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

3-14-17

Full name of contributor out-of-state PAC (OR: _____)

Jan Joplin Campaign

7 Contributor address
[REDACTED]

Amount of Contribution \$

173.33

In-kind contribution description

Advertising

Check if travel outside of Texas. Complete Schedule I.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

Employer (FOR NON-JUDICIAL) (See instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: **5 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ **0.00**

5 Date 3-10-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jan Joplin Campaign	8 Amount of Contribution \$ 189.16	9 In-kind contribution description Printing
7 Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date 3-13-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jan Joplin Campaign	Amount of Contribution \$ 57.59	In-kind contribution description Printing
Contributor address; City; State; Zip Code [REDACTED]		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

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: **7 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date: **3-17-17**
6 Full name of contributor out-of-state PAC (IDE): **Jan Joplin Campaign**
7 Contributor address: [REDACTED]

8 Amount of Contribution \$: **190.88**
9 In-kind contribution description: **Printing**
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date: **3-22-17**
Full name of contributor out-of-state PAC (IDE): **Jan Joplin Campaign**
Contributor address: [REDACTED]

Amount of Contribution \$: **21.75**
In-kind contribution description: **Printing**
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

Employer (FOR NON-JUDICIAL) (See instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: **8 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date

6 Full name of contributor out-of-state PAC (ID# _____)

8 Amount of Contribution \$: 9 In-kind contribution description

3-22-17 **Jan Joplin Campaign**

6.32 **Printing**

Check if travel outside of Texas. Complete Schedule T.
(FOR NON-JUDICIAL)(See Instructions)

10 Principal occupation

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID# _____)

Amount of Contribution \$: In-kind contribution description

2-9-17 **Jan Joplin Campaign**

161.67 **Advertising**

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: **9 of 10**

2 FILER NAME
Sandra Lee

3 Filer ID (Ethics Commission Files)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ **0.00**

5 Date
3-10-17

6 Full name of contributor out-of-state PAC (ID# _____)

Jan Joplin Campaign

7 Contributor address: _____ City _____ State _____ Zip Code _____

8 Amount of Contribution \$: 9 In-kind contribution description

583.33 Advertising

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID# _____)

3-13-17

Jan Joplin Campaign

Amount of Contribution \$: In-kind contribution description

66.67 Advertising

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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: 10 of 10	
2 FILER NAME Sandra Lee		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 3-15-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jan Joplin Campaign	8 Amount of Contribution \$	9 In-kind contribution description 505.17 Advertising
7 Contributor address: _____ City: _____ State: _____ Zip Code: _____		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address: _____ City: _____ State: _____ Zip Code: _____		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Sandra Lee		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$. 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Lee	9 Loan Amount (\$) 1.00
6 Is lender a financial institution? Y <input type="radio"/> N <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code <div style="background-color: black; width: 100%; height: 20px;"></div>	10 Interest rate
		Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1	2 FILER NAME Sandra Lee	3 Filer ID (Ethics Commission Filers)
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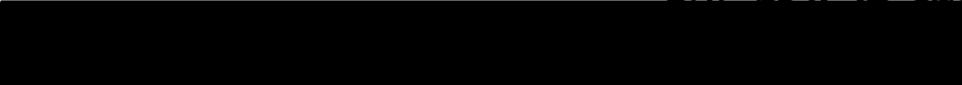
4 Date 3-1-17	5 Payee name Clear Channel
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6 Amount (\$) 765.00	7 Payee address; City; State; Zip Code 
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboard
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3-10-17	Payee name Rockie Gilley Campaign	[as portion of larger bill held by saying]
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Amount (\$) 597.00	Payee address; City; State; Zip Code 
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers/flyers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED