

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT#  
(Ethics Commission filers)

2 Total pages filed:

2

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR FIRST MI  
 NICKNAME LAST SUFFIX  
 Cheryl J.  
 PETERS

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

1.14.05  
JL

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  
 Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
 38479 FM 1488 Hempstead TX 77445

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION  
 (979) 826-3101

6 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI  
 NICKNAME LAST SUFFIX  
 Ricky L.  
 PETERS

7 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
 38479 FM 1488 Hempstead TX 77445

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION  
 (979) 826-3101

9 REPORT TYPE

January 15     30th day before election     Runoff     15th day after campaign treasurer appointment (officeholder only)  
 July 15     8th day before election     Exceeded \$500 limit     Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year    THROUGH    Month Day Year  
 07 / 15 / 04          01 / 14 / 05

11 ELECTION

ELECTION DATE    ELECTION TYPE  
 Month Day Year     Primary     Runoff     General     Special

12 OFFICE

OFFICE HELD (if any)  
 Waller County Clerk

13 OFFICE SOUGHT (if known)

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

Address / PO Box; Apt. / Suite #: City; State; Zip Code

additional pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

GENERAL

SPECIFIC

additional pages

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 0

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 0

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT



AFFIX NOTARY STAMP

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.

*Cheryl Peters*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Cheryl Peters, this the 14th day of January, 20 05, to certify which, witness my hand and seal of office.

*LeLa Loewe*  
Signature of officer administering oath

LELA LOEWE  
Printed name of officer administering oath

ELECTIONS ADMIN  
Title of officer administering oath