

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: <div style="font-size: 2em; text-align: center;">21</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: <i>Mr.</i> FIRST: <i>Thomas</i> MI: <i>F</i> NICKNAME: <i>Tommy</i> LAST: <i>Adkisson</i> SUFFIX:	OFFICE USE ONLY Date Received Date Hand-delivered Receipt # Date Processed Date Imaged <div style="text-align: center; border: 1px solid black; padding: 5px;"> FILED IN MY OFFICE JACQUELYN B. CALLANEN ELECTIONS ADMINISTRATION BEXAR COUNTY </div>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>2823 E. Southcross San Antonio, TX 78223</i>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(210) 531-9491</i>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: <i>M</i> FIRST: <i>ROSE</i> MI: <i>M</i> NICKNAME: <i>Espaya</i> LAST: SUFFIX:		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>1129 Green St. San Antonio, TX 78210</i>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(210) 531-9491</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <i>01 / 01 / 09</i> <i>06 / 30 / 09</i>		
11 ELECTION	ELECTION DATE Month Day Year / /	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages		<i>Bexar County Commissioner Pet 4</i> <i>Bexar County Commissioner Pet 4</i> ** 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:	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

15 C/OH NAME Thomas F. "Tommy" Adkisson 16 ACCOUNT # (Ethics Commission Filers)

17 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
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	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)	\$ 66,275
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 29,250 ⁸³
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 186,239 ⁵⁴
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

19 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.

Tommy Adkisson
Signature of Candidate or Officeholder



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tommy Adkisson, this the 15th day of July, 2009, to certify which, witness my hand and seal of office.

K Garcia Kelly Garcia Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1/20</i>	
2 FILER NAME <i>Thomas F "Tommy" Adkisser</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>2/27/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Min-Chow Hew</i>	7 Amount of contribution (\$) <i>2,000</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>613 Contadora SAN ANTONIO, TX 78258</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>2/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Murali K Kaushalya Subramaniam</i>	Amount of contribution (\$) <i>\$2000</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>11 SAN ISIDRO SAN ANTONIO, TX 78261</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Arun & Karuna Verma</i>	Amount of contribution (\$) <i>\$2000</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4729 College Park SAN ANTONIO, TX 78249</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Channy & Laura Soew</i>	Amount of contribution (\$) <i>\$2000</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2004 E. Gann Hill Dr. CEDAR PARK, TX 78613</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>2/24/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alan Scott</i>	Amount of contribution (\$) <i>\$250</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>4255 Kilamoni Dr. AUM, OH 44011</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2/20	
2 FILER NAME Thomas F. "Tommy" Ackison		3 ACCOUNT # (Ethics Commission filers)	
4 Date 2/27/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teal & Jacqueline Bailey	7 Amount of contribution (\$) \$250	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5245 Miller Rd Breckoville, OH 44141		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 2/27/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David & Rebecca Heller	Amount of contribution (\$) \$250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 60 Rydalwood Ln Moreland Hills OH 44022		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/23/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SABINAL Group	Amount of contribution (\$) \$ 500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1461 S. Pines St. SAN ANTONIO, TX 78204		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/20/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renelope S. Farthing	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1503 35th St NW Washington, DC 20007		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/21/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAM & Laura Dawson	Amount of contribution (\$) \$ 1000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 129 Turnberry Way San Antonio, TX 78230		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3 / 20	
2 FILER NAME Thomas F. "Tommy" Adkisson		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/22/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene H. Dawson Jr.	7 Amount of contribution (\$) \$1000	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 208 N Tower Dr. San Antonio, TX 78232		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/26/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Shelley Rodriguez	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4851 Nicholas Lane Driftwood, TX 78619		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/26/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marc A. Rodriguez	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1122 Colorado St. Ste 2399 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/27/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob Carter & Burgess Inc PAC	Amount of contribution (\$) \$2,500	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code Bank One NA Dallas, TX 75247		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/6/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CDM PAC	Amount of contribution (\$) \$1000	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3050 Post Oak Blvd Ste 300 Houston, TX 77056		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 4/26	
2 FILER NAME Thomas F. "Tommy" Adkisson		3 ACCOUNT # (Ethics Commission filers)	
4 Date 3/18/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bilbert Perez	7 Amount of contribution (\$) \$100	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 1115 Seventh Tee Vista San Antonio, TX 78221		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/18/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joeris General Contractors LTD.	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1300 E. Bitters Rd PO Box 790036 San Antonio, TX 78279		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/18/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael & Belle Spain	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 955 Moonglow Ave New Braunfels, TX 78130		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/13/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright & Jaworski L.L.P.	Amount of contribution (\$) \$1000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1301 McKinney Suite 5100 Douster, TX 77010		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/13/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew J. Grove	Amount of contribution (\$) \$300	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14919 Rio Rancho Way Delotas, TX 78023		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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