

# 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:** 48

**3 CANDIDATE / OFFICEHOLDER NAME**  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Nelson MI: W  
 NICKNAME: \_\_\_\_\_ LAST: Wolff SUFFIX: \_\_\_\_\_

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**  
 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
 107 Regents Park, San Antonio, TX 78230  
 Change of Address

**5 CANDIDATE / OFFICEHOLDER PHONE**  
 AREA CODE: (210) PHONE NUMBER: 335-2850 EXTENSION: \_\_\_\_\_

**6 CAMPAIGN TREASURER NAME**  
 MS / MRS / MR: \_\_\_\_\_ FIRST: Bruce MI: E  
 NICKNAME: \_\_\_\_\_ LAST: Parker SUFFIX: \_\_\_\_\_

**7 CAMPAIGN TREASURER ADDRESS (Residence or business)**  
 STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
 29607 Fairway Bluff, Fair Oaks Ranch, TX 78015

**8 CAMPAIGN TREASURER PHONE**  
 AREA CODE: (830) PHONE NUMBER: 981-4755 EXTENSION: \_\_\_\_\_

**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  
 01 / 01 / 2009    THROUGH    06 / 30 / 2009

**11 ELECTION**  
 ELECTION DATE: Month Day Year    ELECTION TYPE:  
 Primary     Runoff     General     Special

**12 OFFICE** OFFICE HELD (if any): Constitutional County Judge  
**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

**OFFICE USE ONLY**

Date Received: 2009 JUL 16 A 10:16  
 FILED IN MY OFFICE  
 JACQUELYN HALL  
 ELECTIONS ADMINISTRATOR  
 BEXAR COUNTY

Date Hand-delivered: \_\_\_\_\_ Date Received: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Date Processed: \_\_\_\_\_  
 Date Imaged: \_\_\_\_\_

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

**15 C/OH NAME** Nelson W. Wolff **16 ACCOUNT # (Ethics Commission Filers)**

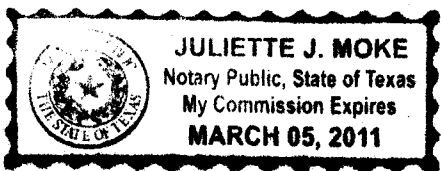
**17 NOTICE FROM POLITICAL COMMITTEE(S)**

-- 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 checked="" type="checkbox"/> <b>GENERAL</b>  <input type="checkbox"/> <b>SPECIFIC</b>  <input type="checkbox"/> additional pages	<b>COMMITTEE NAME</b> Friends for Nelson W. Wolff
	<b>COMMITTEE ADDRESS</b> P.O. Box 890187, San Antonio, TX 78269-0187
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b> Bruce E. Parker
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> 29607 Fairway Bluff, Fair Oaks Ranch, TX 78015

<b>18 CONTRIBUTION TOTALS</b>  <b>EXPENDITURE TOTALS</b>  <b>CONTRIBUTION BALANCE</b>  <b>OUTSTANDING LOAN TOTALS</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</b>	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 84,625.00
	<b>3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED</b>	\$ 1,610.13
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 39,080.64
	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</b>	\$ 55,176.17
	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**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.

*Nelson W. Wolff*  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said NELSON W. WOLFF, this the 8<sup>th</sup> day of JULY, 2009, to certify which, witness my hand and seal of office.

*Juliette J. Moke*      JULIETTE J. MOKE      NOTARY PUBLIC  
 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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/15/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Emerson Banack Jr.

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
7611 Vinewood Ct  
SA Tx 78209

200.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/15/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Steve C Lewis

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
633 Terrell Rd  
SA Tx 78209

250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dan A Catalani

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1500 S Zarzamora  
SA Tx 78207

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/15/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
David Starr

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7334 Blanco Rd  
SA tx 78216

1500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Donald W Harris

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
300 Krameria  
SA Tx 78213

25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/16/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Virginia S Nicholas

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
117 Stanford Dr  
SA Tx 78212

100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ernesto A Gomez

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
10119 Pemhaven  
SA Tx 78240

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
D Capwell Lawton Jr

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
402 Harrison  
SA Tx 78209

250.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
John W Feik

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
221 Geneseo Rd  
SA Tx 78209

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
R Terrell Mc Combs

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
37 Westelm Cr  
SA Tx 78230

250.00

(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: **26**

2 FILER NAME  
Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/19/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jane Phipps

7 Amount of contribution (\$) **200.00**

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
48 Sendero Verde  
SA Tx 78261

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/20/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Harvey E Najim

Amount of contribution (\$) **1000.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
33 Champion Tr  
SA Tx 78258

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/18/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Patrick H Swearingen Jr

Amount of contribution (\$) **200.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
310 Argyle  
SA Tx 78209

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dan A Naranjo

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
PO Box 781828  
SA Tx 78278

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/18/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Joe C McKinney

Amount of contribution (\$) **100.00**

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
6110 Yorkshire Dr  
Spring Branch, Tx 78070

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
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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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/15/09

5 Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

James D Goudge

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

254 Cave Ln

SA Tx 78209

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/20/09

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Charles E Cheever Jr

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

604 Ridgemont Ave

SA Tx 78209

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/19/09

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Jack J Spector

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

227 Devine

SA Tx 78209

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/09

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Thomas G Keyser

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

300 Convent St #2500

SA Tx 78205

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/16/09

Full name of contributor

out-of-state PAC (ID#: \_\_\_\_\_)

Morris Spector

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PO Box 15273

SA Tx 78212

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/19/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
James M Cavender III

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
PO Box 681237  
SA Tx 78268

300.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
W Marvin Rush

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
PO Box 34630  
SA Tx 78265

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/20/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ralph Brown

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
2008 NW Military Hwy  
SA Tx 78213

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Michael D Beldon

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
PO Box 13380  
SA Tx 78213

200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Michael Gribble

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1901 NW Military Hwy  
SA Tx 78213

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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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: **26**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/21/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Roger R Hemminghaus

7 Amount of contribution (\$)   
  
125.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
PO Box 696010  
SA Tx 78269

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
John D Likovich

Amount of contribution (\$)   
  
500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
236 King William  
SA Tx 78204

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/20/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Park E Pearson

Amount of contribution (\$)   
  
200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1502 Fox Haven  
SA Tx 78248

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
WM Eugene Powell

Amount of contribution (\$)   
  
500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11 Lynn Batts Lane #100  
SA Tx 78218

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Lloyd A Denton Jr

Amount of contribution (\$)   
  
500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
11 Lynn Batts Lane # 101  
SA Tx 78218

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
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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: **26**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/19/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Carol Klein

6 Contributor address; City; State; Zip Code  
13279 Hunters View  
SA Tx 78230

7 Amount of contribution (\$)  
100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Curtis V Anastasio

Contributor address; City; State; Zip Code  
3103 Old Elm Way  
SA Tx 78230

Amount of contribution (\$)  
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jack L Martin

Contributor address; City; State; Zip Code  
4126 Westlake Dr  
Austin, Tx 78746

Amount of contribution (\$)  
500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/23/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Marmon Mok LLP

Contributor address; City; State; Zip Code  
700 N St Marys #1600  
SA Tx 78205

Amount of contribution (\$)  
1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Emerald Realty of SA

Contributor address; City; State; Zip Code  
3355 Cherry Ridge # 202  
SA Tx 78230

Amount of contribution (\$)  
100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **26**

2 FILER NAME  
**Nelson W. Wolff**

3 ACCOUNT # (Ethics Commission filers)

4 Date: **1/20/09**  
5 Full name of contributor: **BJ McCombs**  
 out-of-state PAC (ID#: \_\_\_\_\_)  
6 Contributor address; City; State; Zip Code  
**PO Box BH003  
SA Tx 78201**

7 Amount of contribution (\$): **1000.00**  
8 In-kind contribution description (if applicable):  
**(If travel outside of Texas, complete Schedule T)**

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date: **1/22/09**  
Full name of contributor: **Henry G Cisneros**  
 out-of-state PAC (ID#: \_\_\_\_\_)  
Contributor address; City; State; Zip Code  
**454 Soledad St # 300  
SA Tx 78205**

Amount of contribution (\$): **200.00**  
In-kind contribution description (if applicable):  
**(If travel outside of Texas, complete Schedule T)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: **1/22/09**  
Full name of contributor: **George C Hixon**  
 out-of-state PAC (ID#: \_\_\_\_\_)  
Contributor address; City; State; Zip Code  
**315 East Commerce St #300  
SA Tx 78205**

Amount of contribution (\$): **1000.00**  
In-kind contribution description (if applicable):  
**(If travel outside of Texas, complete Schedule T)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: **1/21/09**  
Full name of contributor: **Richard W Evans Jr**  
 out-of-state PAC (ID#: \_\_\_\_\_)  
Contributor address; City; State; Zip Code  
**315 Terrell RD  
SA Tx 78209**

Amount of contribution (\$): **1000.00**  
In-kind contribution description (if applicable):  
**(If travel outside of Texas, complete Schedule T)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date: **1/21/09**  
Full name of contributor: **Wayne Harwell**  
 out-of-state PAC (ID#: \_\_\_\_\_)  
Contributor address; City; State; Zip Code  
**PO Box 17065  
SA Tx 78217**

Amount of contribution (\$): **1000.00**  
In-kind contribution description (if applicable):  
**(If travel outside of Texas, complete Schedule T)**

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
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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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/22/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Ronald J Herrmann

6 Contributor address; City; State; Zip Code

5005 West Ave  
SA Tx 78213

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/21/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

David F Nicolson III

Contributor address; City; State; Zip Code

70 NE Loop 410 #450  
SA Tx 78216

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/21/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Stanley D Rosenberg

Contributor address; City; State; Zip Code

755 E Mulberry Ave #200  
SA Tx 78212

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

James R Adams

Contributor address; City; State; Zip Code

209 Geneseo  
SA Tx 78209

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Jim Dawson

Contributor address; City; State; Zip Code

129 Turnberry Way  
SA Tx 78230

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **26**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/25/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Ardow Ameduri Jr

6 Contributor address; City; State; Zip Code  
179 Paddington Way  
SA Tx 78209

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Rosemary E Kowalski

Contributor address; City; State; Zip Code  
One Towers Park Lane #1512  
SA Tx 78209

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/28/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
John M Yantis

Contributor address; City; State; Zip Code  
5331 Fredericksburg Rd  
SA Tx 78229

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/26/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
A L Hernden

Contributor address; City; State; Zip Code  
222 E Main Plaza  
SA Tx 78205

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/27/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
James L Hayne

Contributor address; City; State; Zip Code  
100 Dolorosa  
SA Tx 78205

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/28/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Jesse H Oppenheimer

6 Contributor address; City; State; Zip Code

711 Navarro St 6th Floor  
SA Tx 78205

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/29/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Walter F Brown

Contributor address; City; State; Zip Code

213 Sir Arthur Ct  
SA Tx 78213

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Charles A Gonzalez

Contributor address; City; State; Zip Code

PO Box 12612  
SA Tx 78212

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/27/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

WM D Balthope

Contributor address; City; State; Zip Code

4242 N Pan Am Expwy  
SA Tx 78218

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Joe R Staus Jr

Contributor address; City; State; Zip Code

PO Box 47535  
SA Tx 78265

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/25/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

David A Spencer

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

26610 Harmony Hills  
SA Tx 78258

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

HomeSpring

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PO Box 29156  
SA Tx 78229

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/24/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Law Office of Pat Maloney

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

239 E Commerce  
SA Tx 78205

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/23/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Valero Political Action Committee

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PO Box 696000  
SA Tx 78269

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/27/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Henry R Munoz III

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

235 W Kings Hwy  
SA Tx 78212

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/31/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Louis J Fox

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
34 Haverhill Way  
SA Tx 78209

150.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
1/25/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Robert P Braubach

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

106 S St Marys St #200  
SA Tx 78205

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/1/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Edward E Whitacre Jr

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

155 Bushnell Ave  
SA Tx 78212

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/2/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Charles E Amato

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

9311 San Pedro Ave # 600  
SA Tx 78216

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/2/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Francisco G Cigarroa

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

13 West Elm Garden  
SA Tx 78230

200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/26/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
William E Greehey

6 Contributor address; City; State; Zip Code  
PO Box 780489  
SA Tx 78278

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/22/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Gordon V Hartman

Contributor address; City; State; Zip Code  
1202 W Bitters Bldg 1 #1200  
SA Tx 78216

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Tom E Turner Jr

Contributor address; City; State; Zip Code  
PO Box 171720  
SA Tx 78217

Amount of contribution (\$)

2500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Richard , Kleberg III

Contributor address; City; State; Zip Code  
PO Box 17777  
SA Tx 78217

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Rio Perla Properties

Contributor address; City; State; Zip Code  
PO Box 460567  
SA Tx 78246

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/21/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

NuStarpac

6 Contributor address; City; State; Zip Code

2330 North Loop 1604 West  
SA Tx 78248

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/2/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

M P Mays

Contributor address; City; State; Zip Code

PO Box 659512  
SA Tx 78265

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/4/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Sam Barshop

Contributor address; City; State; Zip Code

900 Isom Rd #300  
SA Tx 78216

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/3/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

William T Kaufman

Contributor address; City; State; Zip Code

100 West Houston #1250  
SA Tx 89205

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/6/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Alfred A Moursund

Contributor address; City; State; Zip Code

2515 McCullough  
SA Tx 78212

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/20/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Raba-Kistner PAC

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
PO Box 690287  
SA Tx 78269

1000.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
2/5/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Phyllis Browning Company

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
6101 Broadway  
SA Tx 78209

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/2/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
MTC Real Estate

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
800 Dolorosa #204  
SA Tx 78207

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/26/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Rolando H Briones Jr

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
8118 Broadway #100  
SA Tx 78209

1500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
1/26/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Baltazar Serna Jr

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
126 Villita  
SA Tx 78205

500.00

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/28/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Serna & Perez Consulting Services

6 Contributor address; City; State; Zip Code

120 Villita St  
SA Tx 78205

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/27/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Robert J Perez

Contributor address; City; State; Zip Code

600 Navarro St #500  
SA Tx 78205

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/23/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Lorraine Gonzalez

Contributor address; City; State; Zip Code

2330 Park Farm  
SA Tx 78259

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Loretta Agosto

Contributor address; City; State; Zip Code

410 Balfour Dr  
SA Tx 78239

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Pablo Escamilla

Contributor address; City; State; Zip Code

201 Statford  
Houston, TX 77006

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
2/6/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Martin Weiss

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
8207 Callaghan Rd #400  
SA Tx 78230

1000.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
2/9/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Davidson & Troilo

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
7550 W IH 10 #800  
SA Tx 78229

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/13/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
J Russell Davis

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
755 E Mulberry Ave #500  
SA Tx 78212

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/10/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Charles C Butt

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
335 King William  
SA Tx 78204

1000.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Freese and Nichols PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
4055 International Plaza #200  
Fort Worth, TX 76109

500.00

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/13/09

5 Full name of contributor

PSCO PAC

out-of-state PAC (ID#: \_\_\_\_\_)

6 Contributor address; City; State; Zip Code

100 NE Loop 410 #1100  
SA Tx 78216

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/09

Full name of contributor

Linebarger Goggan Blair & Sampson

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

PO Box 17428  
Austin, Tx 78760

Amount of contribution (\$)

2500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/17/09

Full name of contributor

Rene E Gonzalez

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

9114 Fairland  
SA Tx 78230

Amount of contribution (\$)

400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/09

Full name of contributor

Milton Guess

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

800 Navarro St #210  
SA Tx 78205

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/09

Full name of contributor

Henry Bain

out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

3051 Spring Branch Rd  
Spring Branch, Tx 78070

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(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: **26**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/23/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Marco A Mena

6 Contributor address; City; State; Zip Code

100 Dolorosa  
SA Tx 78205

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/20/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Michael G Sweeney

Contributor address; City; State; Zip Code

335 Nottingham Place  
SA Tx 78209

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Dean Fleming

Contributor address; City; State; Zip Code

122 Rio Bravo  
SA Tx 78232

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Mark E Watson Jr

Contributor address; City; State; Zip Code

PO Box 6886  
SA Tx 78209

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/20/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

David A Spencer

Contributor address; City; State; Zip Code

26610 Harmony Hills  
SA Tx 78258

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **26**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
2/19/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Davila Construction

6 Contributor address; City; State; Zip Code  
520 Bonham St  
SA Tx 78205

7 Amount of contribution (\$)  
250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
2/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Tom Frost III

Contributor address; City; State; Zip Code  
PO Box 2361  
SA Tx 78298

Amount of contribution (\$)  
150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/18/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Harriett Romo

Contributor address; City; State; Zip Code  
125 W Agarita Ave  
SA Tx 78212

Amount of contribution (\$)  
100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
2/13/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
John T Montford

Contributor address; City; State; Zip Code  
1 Buckingham Court  
SA Tx 78257

Amount of contribution (\$)  
1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/3/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Jim Powers

Contributor address; City; State; Zip Code  
PO Box 350  
Dripping Springs Tx 78620

Amount of contribution (\$)  
500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**  
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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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/10/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Weir Labatt III

6 Contributor address; City; State; Zip Code  
PO Box 12506  
SA Tx 78212

7 Amount of contribution (\$)  
  
100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
2/23/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Alvin Frieden

Contributor address; City; State; Zip Code  
700 E Hildebrand Ave Apt 301  
SA Tx 78212

Amount of contribution (\$)  
  
50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/10/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Fulbright & Jaworski LLP

Contributor address; City; State; Zip Code  
1301 McKinney #5100  
Houston, Tx 77010

Amount of contribution (\$)  
  
1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/11/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
C T Ladner

Contributor address; City; State; Zip Code  
4903 Candletree  
Houston, Tx 77018

Amount of contribution (\$)  
  
250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/4/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Cargil Consultants

Contributor address; City; State; Zip Code  
201 E Commerce St #355  
SA Tx 78205

Amount of contribution (\$)  
  
50.00

In-kind contribution description (if applicable)

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
2/24/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Dolph Briscoe

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
Box 389  
Uvalde, Tx 78802

1000.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
3/5/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Philip A Cortez

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
351 McNarney  
SA Tx 78211

500.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
R J Lenss

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3 Sedgewick Ct  
SA Tx 78257

100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
The PBSJ Corporation PAC

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5300 W Cypress St #200  
Tampa, Fl 33607

1000.00

(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  out-of-state PAC (ID#: \_\_\_\_\_)  
John L Nau III

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
3217 Del Monte  
Houston, Tx 77019

1000.00

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/25/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Half Associates State PAC

6 Contributor address; City; State; Zip Code  
1201 N Bowser Rd  
Richardson, Tx 75081

7 Amount of contribution (\$)  
1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
3/19/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
URBAN Concrete Contractors

Contributor address; City; State; Zip Code  
24114 Blanco Rd  
SA Tx 78260

Amount of contribution (\$)  
5000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
3/16/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Richard Sheldon

Contributor address; City; State; Zip Code  
4006 Green Oak Dr  
Waco, Tx 76710

Amount of contribution (\$)  
1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/3/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Peter M Holt

Contributor address; City; State; Zip Code  
2191 Little Blanco Rd  
Blanco, Tx 78606

Amount of contribution (\$)  
5000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
4/14/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Parsons Corp PAC

Contributor address; City; State; Zip Code  
100 W Walnut St  
Pasadena, Ca 91124

Amount of contribution (\$)  
1000.00

In-kind contribution description (if applicable)

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/14/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Kunz Construction Co.

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

211 W Turbo  
SA Tx 78279

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/23/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Gurvinder P Singh

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

24902 Miranda Rdg  
Boerne, Tx 78006

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/15/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Brenda Vickrey Johnson

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

12940 Country Pkwy  
SA Tx 78216

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/5/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Lionel Sosa

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

215 Rohde Ct N  
Floresville, Tx 78114

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/09

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Mark E Watson Jr

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PO Box 6886  
SA Tx 78209

(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:

26

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
6/25/09

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Robert P Dugas

6 Contributor address; City; State; Zip Code

1939 Flint Oak  
SA Tx 78248

7 Amount of contribution (\$)

75.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	7 Amount (\$)
1/9/09	Tracy Wolff	216.18
	6 Payee address; City; State; Zip Code 107 Regents Park SA Tx 78230	

8 Purpose of payment (See instructions regarding type of information required.) Reimburesment for Mailout Envelopes (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name, Office sought Office held
---	--

Date	Payee name	Amount (\$)
1/9/09	SA Observer	437.50
	6 Payee address; City; State; Zip Code 1975 S WW White Rd SA Tx 78222	

Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date	Payee name	Amount (\$)
1/13/09	US Postmaster	420.00
	6 Payee address; City; State; Zip Code Beacon Hill Station SA Tx 78201	

Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date	Payee name	Amount (\$)
1/13/09	Urban 15	500.00
	6 Payee address; City; State; Zip Code 2500 S Presa St SA Tx 78210	

Purpose of payment (See instructions regarding type of information required.) Contribution (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

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# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **19**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
1/26/09

5 Payee name  
Trinity Press

7 Amount (\$)

6 Payee address; City; State; Zip Code  
One Trinity Place  
SA Tx 78212

598.80

8 Purpose of payment (See instructions regarding type of information required.)

Office Supplies

(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
1/12/09

Payee name  
Barnes & Noble

Amount (\$)

Payee address; City; State; Zip Code  
12635 IH 10 West  
SA Tx 78230

131.54

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date

1/12/09

Payee name  
Mexican Manhattan

Amount (\$)

Payee address; City; State; Zip Code  
110 Solodad  
SA Tx 78205

51.20

Purpose of payment (See instructions regarding type of information required.)

Business Meeting

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date

1/12/09

Payee name  
HEB Grocery

Amount (\$)

Payee address; City; State; Zip Code  
8503 NW Military  
SA Tx 78230

75.33

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **19**

2 FILER NAME  
**Nelson W. Wolff**

3 ACCOUNT # (Ethics Commission filers)

4 Date 1/12/09	5 Payee name Houston Street Bistro 6 Payee address; City; State; Zip Code 204 E Houston St SA Tx 78205	7 Amount (\$)  119.18
-------------------	--	-----------------------------

8 Purpose of payment (See instructions regarding type of information required.) <b>Business Meeting</b> (If travel outside of Texas, complete Schedule T)	9 <b>** Complete if direct expenditure to benefit C/OH **</b> Candidate / Officeholder name Office sought Office held
---	--

Date 1/12/09	Payee name Office Max Payee address; City; State; Zip Code 2635 IH 10 West SA Tx 78230	Amount (\$)  166.45
-----------------	--	---------------------------

Purpose of payment (See instructions regarding type of information required.) <b>Business Meeting</b> (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date 1/12/09	Payee name Milam Diner Payee address; City; State; Zip Code 115 E Travis SA Tx 78205	Amount (\$)  50.59
-----------------	--	--------------------------

Purpose of payment (See instructions regarding type of information required.) <b>Business Meeting</b> (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

Date 2/9/9	Payee name Byron Miller Campaign Payee address; City; State; Zip Code 100 Dolorosa SA Tx 78205	Amount (\$)  500.00
---------------	--	---------------------------

Purpose of payment (See instructions regarding type of information required.) <b>Contribution</b> (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
---	---

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# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
2/11/09

5 Payee name  
Bexar County Performing Arts Center Foundation

7 Amount (\$)

6 Payee address; City; State; Zip Code  
700 North Pine  
SA Tx 78202

800.00

8 Purpose of payment (See instructions regarding type of information required.)

Contribution

(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

2/17/09

Clear Vision

Payee address; City; State; Zip Code

121 Interpark Blvd #801  
SA Tx 78279

1347.53

Purpose of payment (See instructions regarding type of information required.)

Mailout

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

2/27/09

Roy Fletcher

Payee address; City; State; Zip Code

11843 Braesview #601  
SA Tx 78213

378.88

Purpose of payment (See instructions regarding type of information required.)

Mailout

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

2/27/09

SA Symphony

Payee address; City; State; Zip Code

222 E Houston St #200  
SA Tx 78205

250.00

Purpose of payment (See instructions regarding type of information required.)

Contribution

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES**

**SCHEDULE F**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **19**

2 FILER NAME  
Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date 2/27/09	5 Payee name South SA Chamber of Commerce	7 Amount (\$)  150.00
6 Payee address; City; State; Zip Code 100 Dolorsa SA Tx 78205		

8 Purpose of payment (See instructions regarding type of information required.) Contribution (If travel outside of Texas, complete Schedule T)	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date 2/27/09	Payee name Keep SA Beautiful	Amount (\$)  100.00
Payee address; City; State; Zip Code 4431 Bayliss SA Tx 78233		

Purpose of payment (See instructions regarding type of information required.) Contribution (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date 2/17/09	Payee name Apple Store	Amount (\$)  2290.03
Payee address; City; State; Zip Code 15900 La Cantera SA Tx 78256		

Purpose of payment (See instructions regarding type of information required.) Office Supplies/Computer (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

Date 2/17/09	Payee name El Mirador Restaurant	Amount (\$)  52.82
Payee address; City; State; Zip Code 722 S St. Marys SA Tx 78205		

Purpose of payment (See instructions regarding type of information required.) Business Meeting (If travel outside of Texas, complete Schedule T)	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
--	---

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# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/17/09

5 Payee name

Palm Restaurant

7

Amount (\$)

6 Payee address; City; State; Zip Code

233 E Houston  
SA Tx 78205

58.39

8 Purpose of payment (See instructions regarding type of information required.)

Business Meeting

(If travel outside of Texas, complete Schedule T)

9

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

2/17/09

Payee name

California Pizza

Amount (\$)

Payee address; City; State; Zip Code

11745 IH 10 West  
SA Tx 78230

82.31

Purpose of payment (See instructions regarding type of information required.)

Business Meeting

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

3/03/09  
3/19/09

Payee name

Nelson W Wolff

Amount (\$)

Payee address; City; State; Zip Code

107 Regents Park  
SA Tx 78230

153.19  
209.00

Purpose of payment (See instructions regarding type of information required.)

Travel Expenses

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

Date

3/10/09

Payee name

Tommy Adkisson Campaign

Amount (\$)

Payee address; City; State; Zip Code

2823 E Southcross  
SA Tx 78223

250.00

Purpose of payment (See instructions regarding type of information required.)

Contribution

(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*

Candidate / Officeholder name

Office sought

Office held

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# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **19**

2 FILER NAME  
Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/10/09

5 Payee name  
Rosa Rosales Campaign Fund

7 Amount (\$)

6 Payee address; City; State; Zip Code  
107 Janis Rae  
SA Tx 78201

150.00

8 Purpose of payment (See instructions regarding type of information required.)

Contribution  
(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/19/09

Payee name  
Roy Fletcher

Amount (\$)

Payee address; City; State; Zip Code  
11843 Braesview  
SA Tx 78213

3247.50

Purpose of payment (See instructions regarding type of information required.)

Mailout  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/19/09

Payee name  
Citizens for Quality Education

Amount (\$)

Payee address; City; State; Zip Code  
1607 W Mariposa St  
SA Tx 78201

500.00

Purpose of payment (See instructions regarding type of information required.)

Contribution  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/23/09

Payee name  
Los Compadres

Amount (\$)

Payee address; City; State; Zip Code  
6701 San Pedro Dr  
SA Tx 78214

400.00

Purpose of payment (See instructions regarding type of information required.)

Contribution  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:

19

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/23/09  
3/24/09  
3/31/09

5 Payee name  
Trinity Press  
6 Payee address; City; State; Zip Code  
One Trinity Place  
SA Tx 78212

7 Amount (\$)  
1295.00  
647.45  
647.45

8 Purpose of payment (See instructions regarding type of information required.)  
Office Supplies/Books  
(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/26/09

Payee name  
Muscular Dystrophy Assc  
Payee address; City; State; Zip Code  
3300 E Sunrise  
Tucson, AZ 85718

Amount (\$)  
100.00

Purpose of payment (See instructions regarding type of information required.)  
Contribution  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/18/09

Payee name  
Four Seasons Hotel  
Payee address; City; State; Zip Code  
2800 Pennsylvania Ave NW  
Washington, DC 20007

Amount (\$)  
1177.95

Purpose of payment (See instructions regarding type of information required.)  
Travel  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/18/09

Payee name  
The Driskill Hotel  
Payee address; City; State; Zip Code  
604 Brazos St  
Austin, Tx 78701

Amount (\$)  
278.91

Purpose of payment (See instructions regarding type of information required.)  
Travel  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

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# POLITICAL EXPENDITURES

# SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: **19**

2 FILER NAME

Nelson W. Wolff

3 ACCOUNT # (Ethics Commission filers)

4 Date  
3/18/09

5 Payee name  
Southwest Airline

7 Amount (\$)

6 Payee address; City; State; Zip Code  
1657 Airport Rd  
Rockwell, Tx 75087

275.20

8 Purpose of payment (See instructions regarding type of information required.)  
Travel  
(If travel outside of Texas, complete Schedule T)

9 \*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/18/09

Payee name  
Office Depot

Amount (\$)

Payee address; City; State; Zip Code  
3713 Colony Dr  
SA Tx 78230

279.88

Purpose of payment (See instructions regarding type of information required.)  
Office Supplies  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/18/09

Payee name  
Texas Land & Cattle

Amount (\$)

Payee address; City; State; Zip Code  
201 N St Marys  
SA Tx 78205

67.30

Purpose of payment (See instructions regarding type of information required.)  
Business Meeting  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

Date  
3/18/09

Payee name  
Alphagraphics

Amount (\$)

Payee address; City; State; Zip Code  
9991 IH 10 West  
SA Tx 78230

471.19

Purpose of payment (See instructions regarding type of information required.)  
Mailout  
(If travel outside of Texas, complete Schedule T)

\*\* Complete if direct expenditure to benefit C/OH \*\*  
Candidate / Officeholder name Office sought Office held

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