

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Elizondo, Paul (Commissioner)

16 ACCOUNT # (Ethics Commission filers)
00001234

17 NOTICE FROM POLITICAL COMMITTEE(S)

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

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

additional pages

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED **\$ 0.00**

2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **\$ 22,734.00**

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED **\$ 0.00**

4. **TOTAL POLITICAL EXPENDITURES** **\$ 27,931.21**

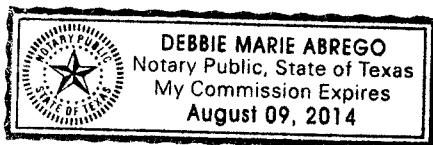
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD **\$ 0.00**

OUTSTANDING LOAN TOTALS

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

Paul Elizondo
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Paul Elizondo, this the 19 day of July, 2011, to certify which, witness my hand and seal of office.

Debbie Marie Abrego
Signature of officer administering oath

Debbie Marie Abrego
Print name of officer administering oath

Executive Assistant
Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 3/14	
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Adkisson, Tommy (Mr.) 6 Contributor address; City; State; Zip Code 2933 E. Southcross San Antonio, TX 78223	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Arias, Robert (Mr.) Contributor address; City; State; Zip Code 221 Meadowbrook San Antonio, TX 78232	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barrett, Daniel (Mr.) Contributor address; City; State; Zip Code 1407 Viewridge San Antonio, TX	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Burge, William III Contributor address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77058	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bury, Paul J. III (Mr.) Contributor address; City; State; Zip Code 221 W. 6th St., Ste. 600 Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/6 Report: 4/14

2 FILER NAME Elizondo, Paul (Commissioner)

3 ACCOUNT # (Ethics Commission filers)
00001234

4 Date 5 Full name of contributor out-of-state PAC(ID# _____)
06/08/2011 Carmona, Mark (Mr.)

7 Amount of contribution (\$)
\$100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
P. O. :Box 690375
San Antonio, TX 78269

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
05/11/2011 Carruth, Chris L. (Mr.)

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
31351 Tres Lomas
Bulverde, TX 78163

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
05/11/2011 Cotrell, Charles (Mr.)

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
508 W. Craig Pl.
San Antonio, TX 78212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
05/11/2011 Crittenden, Robert (Mr.)

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
614 Birdsong South
San Antonio, TX 78258

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC(ID# _____)
05/18/2011 Dawson, Eugene (Mr.)

Amount of contribution (\$)
\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
208 N. Tower Dr.
San Antonio, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 5/14	
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234	
4 Date 05/03/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Escobar, Manuel Jr. (Mr.) 6 Contributor address; City; State; Zip Code 201 West Poplar San Antonio, TX 78212	7 Amount of contribution (\$) \$5,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Flores, Christopher (Mr.) Contributor address; City; State; Zip Code 2919 Ivory Creek San Antonio, TX 78258	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/28/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Foster, Paul (Mr.) Contributor address; City; State; Zip Code 1815 Fieldstone Rd. San Antonio, TX 78232	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fulbright & Jaworski LLP Texas Committee Contributor address; City; State; Zip Code 1301 McKinney, Ste 5100 Houston, TX 77010	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/04/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) G.E.O.Group Contributor address; City; State; Zip Code 1 Park Place, Ste. 700 621 N.W. 53rd St. Boca Raton, FL 33487	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 6/14	
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Garza, Gregory (Mr.) 6 Contributor address; City; State; Zip Code 15527 Dawn Crst. San Antonio, TX 78248	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/05/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gonzales, James (Mr.) Contributor address; City; State; Zip Code 8000 IH 10 West, Ste 600 San Antonio, TX 78230	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Green, Renee Contributor address; City; State; Zip Code 15110 Preston Hollow Dr. San Antonio, TX 78247-5120	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Grove, Andrew (Mr.) Contributor address; City; State; Zip Code 14919 Rio Rancho Way Helotes, TX 78023	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Heimer, Larry (Mr.) Contributor address; City; State; Zip Code 922 Isom Rd., Ste. 100 San Antonio, TX 78216	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 7/14	
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Heller, J. David (Mr.) 6 Contributor address; City; State; Zip Code 60 Rydalwood Lane Moreland Hills, OH 44022	7 Amount of contribution (\$) \$334.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/29/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hernden, A. L. (Mr.) Contributor address; City; State; Zip Code 222 Main Plaza E. San Antonio, TX 78205	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hill, Kara L. Contributor address; City; State; Zip Code 315 N. Valley San Antonio, TX 78216	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) HNTB PAC Contributor address; City; State; Zip Code 715 Kirk Dr. Kansas City, MO 64105	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hodges, Pamela Contributor address; City; State; Zip Code 414 Mountain Spring Dr. Boerne, TX 78006	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/6 Report: 8/14	
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234	
4 Date 05/05/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Holt, Peter (Mrs.) 6 Contributor address; City; State; Zip Code 2191 Little Blanco Rd. Blanco, TX 78606-4764	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/05/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jewett, Harry B. III (Mr.) Contributor address; City; State; Zip Code 307 W. Rhapsody San Antonio, TX 78216	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Johnson, Brenda Vickrey (Ms.) Contributor address; City; State; Zip Code 12940 Country Pkwy. San Antonio, TX 78216	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Phelan, James E. (Mr.) Contributor address; City; State; Zip Code 30 Greens Shade San Antonio, TX 78216	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/15/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Vazquez, Gilbert (Mr.) Contributor address; City; State; Zip Code 3519 Hunters Dawn San Antonio, TX 78230	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 9/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 02/24/2011	5 Payee name Amadeo Ortiz Campaign 6 Payee address; City; State; Zip Code P. O. Box 831486 San Antonio, TX 78283	7 Amount (\$) \$250.00
8 Purpose of payment (See instructions regarding type of information required.) contribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/09/2011	Payee name Cris Medina Campaign Payee address; City; State; Zip Code P. O. Box 5879 San Antonio, TX 78201	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/24/2011	Payee name Cris Medina Campaign Payee address; City; State; Zip Code P. O. Box 5879 San Antonio, TX 78201	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2011	Payee name Edgewood Education Fund Payee address; City; State; Zip Code 5358 W. Commerce San Antonio, TX 78237	Amount (\$) \$400.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/6 Report: 10/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 02/08/2011	5 Payee name Election Support Services 6 Payee address; City; State; Zip Code 8814 Tradeway San Antonio, TX 78217	7 Amount (\$) \$1,024.10
8 Purpose of payment (See instructions regarding type of information required.) Campaign Services		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2011	Payee name Election Support Services Payee address; City; State; Zip Code 8814 Tradeway San Antonio, TX 78217	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Campaign Services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/27/2011	Payee name Election Support Services Payee address; City; State; Zip Code 8814 Tradeway San Antonio, TX 78217	Amount (\$) \$2,500.00
Purpose of payment (See instructions regarding type of information required.) Campaign Services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 06/16/2011	Payee name Fed Ex Payee address; City; State; Zip Code 4418 Broadway San Antonio, TX 78209	Amount (\$) \$26.56
Purpose of payment (See instructions regarding type of information required.) delivery service		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 11/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 02/08/2011	5 Payee name Flores, Marilyn (Mrs.) 6 Payee address; City; State; Zip Code 2526 Old Gate San Antonio, TX 78230	7 Amount (\$) \$1,000.00
8 Purpose of payment (See instructions regarding type of information required.) Contract Services		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 06/16/2011	Payee name GDC Payee address; City; State; Zip Code 122 E. Houston San Antonio, TX 78205	Amount (\$) \$15,746.98
Purpose of payment (See instructions regarding type of information required.) Campaign Services		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 03/31/2011	Payee name Holy Rosary Church Payee address; City; State; Zip Code 159 Camino Santa Maria San Antonio, TX 78228	Amount (\$) \$300.00
Purpose of payment (See instructions regarding type of information required.) contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 02/08/2011	Payee name House of Neighborly Services Payee address; City; State; Zip Code 407 N. Calaveras San Antonio, TX 78207	Amount (\$) \$120.00
Purpose of payment (See instructions regarding type of information required.) contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 12/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 05/06/2011	5 Payee name La Preense Foundation 6 Payee address; City; State; Zip Code 318 S. Flores San Antonio, TX 78204	7 Amount (\$) \$1,500.00
8 Purpose of payment (See instructions regarding type of information required.) Contribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 03/31/2011	Payee name Leticia Cantu Campaign Payee address; City; State; Zip Code 7919 Liberty Island San Antonio, TX 78227	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2011	Payee name Lourdes Galvan Campagn Payee address; City; State; Zip Code 418 Rosa Verde San Antonio, TX 78207	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 03/31/2011	Payee name Monarch Trophy Studio Payee address; City; State; Zip Code 2121 N. W. Military San Antonio, TX 78213	Amount (\$) \$1,131.21
Purpose of payment (See instructions regarding type of information required.) Fiesta medals		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 13/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 05/06/2011	5 Payee name Olga Hernandez Campaign 6 Payee address; City; State; Zip Code 731 Clower San Antonio, TX 78212	7 Amount (\$) \$250.00
8 Purpose of payment (See instructions regarding type of information required.) contribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 03/17/2011	Payee name Quik Print Payee address; City; State; Zip Code 500 Sixth St. San Antonio, TX 78215	Amount (\$) \$212.36
Purpose of payment (See instructions regarding type of information required.) printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2011	Payee name Ralph Medina Campaign Payee address; City; State; Zip Code P.O. Box 15824 San Antonio, TX 78212	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2011	Payee name Ray Lopez Campaign Payee address; City; State; Zip Code 7015 Quiet Ridge Walk San Antonio, TX 78250	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Contribution		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/6 Report: 14/14
2 FILER NAME Elizondo, Paul (Commissioner)		3 ACCOUNT # (Ethics Commission filers) 00001234
4 Date 05/12/2011	5 Payee name Tommy Adkisson Campaign 6 Payee address; City; State; Zip Code 2823 Southcross San Antonio, TX 78223	7 Amount (\$) \$250.00
8 Purpose of payment (See instructions regarding type of information required.) contribution		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 03/17/2011	Payee name U.S. Postmaster Payee address; City; State; Zip Code Arsenal Station San Antonio, TX 78204	Amount (\$) \$220.00
Purpose of payment (See instructions regarding type of information required.) postage		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held: