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:
3 CANDIDATE/	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
OFFICEHOLDER NAME	MR JAMES	SUFFIX	Date Received RECEIVED
	JIM WHEAT		APR 12 REC'D
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT / SUITE #; CITY:	Andre ZIP CODE	SUPERINTENDENTS OFFICE NORTH EAST ISD Date Hand-delivered or Postmarked
ADDRESS	301 Kacketti	78209	Receipt # Amount
change of address 5 CANDIDATE/	AREA CODE PHONE NUMBER	EXTENSION	Receipt # Amount
OFFICEHOLDER PHONE	(210) 254 6197	EXTENSION	Date Processed
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST JAMES	5	Date Imaged
	SIM WHEAT	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 507 ROCK hill San An-	CITY; STATE;	ZIP CODE
(residence or business)	So / Jeson III San III	10,10	201
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (2(0) 254 6197	EXTENSION	
9 REPORTTYPE	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 0 4 / 12	Year / 1 2
44 51 5051001	ELECTION DATE ELECTION TYPE		
11 ELECTION	Month Day Year 05/12/12 Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known NEISD TVus	tee Phie 4
14 NOTICE OF DIRECT CAMPAIGN	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITU CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION		
EXPENDITURE BY OTHER INDIVIDUALS	Name		
	Address / PO Box; Apt. / Suite #; City; State; Zip Co	de	
additional pages			
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

P.O. Box 12070

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	James 1	Wheat	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.		
COMMITTEE(S)	COMMITTEE TYPE COMMITTEE NAME		
	GENERAL COMMITTEE ADDRESS		
	SPECIFIC	31	
additional access	COMMITTEE CAMPAIGN TREASURER NAME		e
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THATES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2715.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$		
	4. TOTAL POLITICAL EXPENDITURES \$ 2013,91		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 701,09		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 2000, 00		
19 AFFIDAVIT	Annual residence of the second		
Not N	IRMA LINDA GAUN ary Public, State of ly Commission Exp July 21, 2015	is true and correct and includes a me under Title 15, Election Code Texas ires	of perjury, that the accompanying report all information required to be reported by
AFFIX NOTARY STAM	IP / SEAL ABOVE	1 2.16	
Sworn to and sub	100	me, by the said James Wheat, 20 13, to certify which, witness	my hand and seal of office.
Signature of officer administering oath Title of officer administering oath Title of officer administering oath			

(512) 463-5800

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:		
2 FILER NAME	James Wheat		3 ACCOUNT # (E	thics Commission Filers)	
4 Date	5 Full name of contributor out-of-state PAC(ID#:_)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
4-9-12	6 Contributor address; City; State; Zip Code	1 + T/	\$100,00		
	10410 Grand Park, San 1	8239	(If travel outside	of Texas, complete Schedule T)	
	pation / Job title (See Instructions) にかいと d	10 Employer (See	Instructions)		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
4-9-12	Contributor address; City; State; Zip Code 415 Albin San Autonio	Tr 78209	\$100.00		
	110 Mark out herally	1 (000)	(If travel outside	of Texas, complete Schedule T)	
	torkey	Employer (See			
Date	Full name of contributor out-of-state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)	
4-9-12	Contributor address; City; State; Zip Code		#200.00		
	P.O. Box 120423 San Atonio	TX 78212	(If travel outside	of Texas, complete Schedule T)	
	pation / Job title (See Instructions)	Employer (See			
Date	Full name of contributor out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
4-9-12	Contributor address; City; State; Zip Code 54 09 KWLII FAIMS San An	this Tx	\$ 100.00	[]	
		5218	(If travel outside	of Texas, complete Schedule T)	
	pation / Job title (See Instructions)	Employer (See		or roxus, complete contended 1/	
Date	Full name of contributor out-of-state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
4-9-12	Contributor address; City; State; Zip Code	Tu 702.0	# 100.00		
	130 Wyndale San Hatonio	1 × 1050	(15 4	of Tours correlate Oak at the Ti	
Principal occup	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)	
101100	/ V				

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O. Box 12070

SCHEDULE A

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:	
2 FILER NAME	James Wheat		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributor out-of-state PAC(ID#:)	7 Amount of	8 In-kind contribution
11 0 10	James Nowacek		contribution (\$)	description (if applicable)
4-9-12	6 Contributor address; City; State; Zip Code		\$ 100.00	
	40°C 20°C 20°C 20°C 20°C 20°C 20°C 20°C 2		100,00	
	414 (ave San Antonio TX	18209		
	1	50 AV	(If travel outside	of Texas, complete Schedule T)
	pation / Job title (See Instructions) (Equipmet Sales	10 Employer (See	Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
	Roger Lind		contribution (\$)	description (if applicable)
4-9-12	Roger Lind Contributor address; City; State; Zip Code		\$100.00	
,	62 Al. h : 1 C 1/h :	11	700.00	
	502 Northridge San Hutoni			<u>.</u> [
	9	18209	(If travel outside of	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See Fro ST	Instructions)	
Bank		1,021		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11 9 17	James Hasslocher			
4-9-12	Contributor address; City; State; Zip Code		\$500,00	
	129 Haskin San Actoris ,T	× 18709		
	IT (INSKIN OUT I TON II	(000)		
Principal occur	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
OWA	pation / Job title (See Instructions) RV Presi Out	Frontler	Enterpris	ses .
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of	In-kind contribution
	Ketta Shelly		contribution (\$)	description (if applicable)
14-9-12	Keth Shelly Contributor address; City; State; Zip Code		500.00	
4-1-16			300.00	1
	18 Thurn hurst San Antonis,	Tx 78218		
		11. (22.12	(If travel outside	of Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See	11	
Home	builder owner	Shelly	Home 5	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
_	Catarino Lope Z		contribution (\$)	description (if applicable)
14-9-12	Contributor address; City; State; Zip Code		9100.00	
	1800 Vil to C Antonio	a Til	100.00	
	1807 Kehilwith San Anton	1178209		
		5 1 2		of Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See		mes
J. Me		0,00,00	, , , , ,	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

P.O. Box 12070

LOANS			SCHEDULE E	
The Instruction Guide explains how to complete this form.			1 Total pages Schedule E:	
2 FILER NAME	MES WHEAT		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTA	L OF UNITEMIZED LOANS: ⇔	\$ \$ \$ \$ °	⇒ \$	
5 Date of loan 2-17-12	James Wheat	out-of-state PAC (ID#	9 Loan Amount (\$) 2,000,00	
6 Is lender a financial Institution?	8 Lender address; City; State; Zi	10 Interest rate NA 11 Maturity date		
Y (N)		11000/17 (0)	NA	
Attorney	Common Common Substitute V Substitute of Substitute Sub	13 Employer (See Instructions)		
14 Description of Col	ateral			
15 GUARANTOR INFORMATION	16 Name of guarantor		18 Amount Guaranteed (\$)	
not applicable	17 Guarantor address; City; State; Zip Code			
19 Principal Occupation (See Instructions) 20 Employer (See Instructions)				
Date of loan	Name of lender	out-of-state PAC (ID#	Loan Amount (\$)	
Is lender a financial Institution?	a financial			
Y N			Maturity date	
Principal occupati	on / Job title (See Instructions)	Employer (See Instructions)	I	
Description of Collateral				
none			-	
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)	
not applicable	Guarantor address; City; St	ate; Zip Code		
Principal Occupat	ion (See Instructions)	Employer (See Instructions)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.				

POLITICAL EXPENDITURES

P.O. Box 12070

SCHEDULE F

(512) 463-5800

Advertising Expense	EXPENDITURE CATEGORIES Gift/Awards/Memorials Expense Salaries/Wages/Co	1 - Market Market Control of the Con	
Accounting/Banking Consulting Expense	Legal Services Solicitation/Fundrai Food/Beverage Expense Travel In District	ising Expense Transportation Equipment & Related Expense Contributions/Donations Made By	
Event Expense	Polling Expense Travel Out Of Dist	rict Candidate/Officeholder/Political Committee	
Fees	Printing Expense Office Overhead/R The Instruction Guide explains how to	27 25 049500 350	
1 Total pages Schedule F:	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)	
1	James Wheat		
3-21-12	5 Payee name		
6 Amount (\$)	7 Payee address; City, State; Zip Code		
		Antonio TX 78212	
978.64	3700 Blanco Rd. Jan	The law of X	
8 PURPOSE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Printing Expense	Yard Signs	
9 Complete ONLY if direct	Candidate Officeholder name	Office sought Office held	
expenditure to benefit C/C	JT		
Date 7 10 10	New Lentury Graphi	15	
3-29-12 Amount (\$)	Payee address; City; State; Zip Code		
	<i>y</i>	CALC + really	
352.00	11991 Starcrest	San Antonio Tx 78247	
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE	Printing Expense	Mailing (ards	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought Office held	
Date	Payee name		
3-29-12	Election Services		
Amount (\$)	Payee address; City; State; Zip Code		
683,21	314 E. Commerce Sam	Antonio Tx 78205	
PURPOSE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
OF EXPENDITURE	Consulting Expense	Walk List and Mailing	
Complete ONLY if direct Candidate / Office holder name Office sought Office held expenditure to benefit C/OH			
Date	Payee name		
	2		
Amount (\$)	Payee address; City; State; Zip Code		
	Colores (Constant of the color	Description //fitrougle outside of Tower annuals Cohedula Ti	
PURPOSE OF	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)	
EXPENDITURE			
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			