CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 3 CANDIDATE/ MS / MRS / MR FIRST M OFFICE USE ONLY **OFFICEHOLDER** Mr. Thomas "Tom" N. NAME Date Received NICKNAME LAST SUFFIX Thompson 4-25-23 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE: ZIP CODE **OFFICEHOLDER** 3801 Ransom Rd. San Angelo, TX 76903 MAILING **ADDRESS** Change of Address 5 CANDIDATE/ AREA CODE PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (325)226-4154 PHONE Receipt # Amount \$ CAMPAIGN MS / MRS / MR FIRST TREASURER Mrs. Julia W. Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Antilley CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: STATE; ZIP CODE TREASURER 1204 Pinehurst Ct. San Angelo, TX 76904 ADDRESS (Residence or Business) AREA CODE CAMPAIGN PHONE NUMBER EXTENSION **TREASURER** PHONE (979 574-7564 9 REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only) Exceeded Modified 8th day before election Final Report (Attach C/OH - FR) Reporting Limit 10 PERIOD Month Day Year COVERED 4 25 24 **THROUGH** 11 ELECTION ELECTION DATE ELECTION TYPE Primary Runoff Month Day Year Description 3 25 Special OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) SMD 2 - San Angelo City Council Mayor - San Angelo City Council 14 NOTICE FROM 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. POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME TREPAC/Texas Realtors Political Action Committee COMMITTEE ADDRESS GENERAL Additional Pages P.O. Box 2246 Austin, TX 78768 COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC Leslie Cantu COMMITTEE CAMPAIGN TREASURER ADDRESS P.O. Box 2246 Austin, TX 78768

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Thomas "Tom" N. Tho	ompson 1	6 Filer ID (Ethics Commission Filers)				
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00				
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,700.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,260.75				
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ 31,378.59				
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LAST DAY OF THE REPORTING PERIOD	\$ 12,500.00				
18 SIGNATURE s	wear, or affirm, under penalty of perjury, that the accompanying report is true	and correct and includes all information				
	quired to be reported by me under Title 15, Election Code.	and correct and includes an information				
	- T 20 - T					
	Thomas N. /henry	ml				
	,	didate or Officeholder				
	Please complete either ontion below:					
	Please complete either option below:					
(1) Affidavit						
NOTARY STAMP/SEAL						
Sworn to and subscribed	before me by this the	day of,				
20, to certify which, witness my hand and seal of office.						
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath				
	OR					
(2) Unsworn Declaration	on					
•77	M T					
My name is <u>Newy</u>	, and my date of birth is	+ -75Ac7				
My address is	DI RANSOM Rd Son ayele . T	4. 1690) USA.				
(street) (city) (state) (zip code) (country)						
Executed in County, State of, on the, day of, 20, 20						
	There No Phuyeer					
	Signature of Candidat	e/Officeholder (Declarant)				

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	Thomas "Tom" N. Thompson			ion Filers)
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,700.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	4. SCHEDULE E: LOANS			
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			15,260.75
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			
10.	0. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			

SCHEDULE A1

in the requested information is not applicable, be not include this page in the report.					
The	Instruction Guide explains how to complete thi	1 Total pages Schedule A1:			
2 FILER NAME Thomas "	Tom" N. Thompson		3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor out-of-state PAC (ID#:) Reid & Kelly Stultz		7 Amount of contribution (\$)		
04/04/2025	6 Contributor address; City; P.O. Box 3 Christov	State; Zip Code ral, TX 76935	250.00		
8 Principal occu Banker	pation / Job title (See Instructions)	9 Employer (See Instruction Bank of San Angelo	^		
Date 04/04/2025	Mason & Lindsey McGuire Contributor address; City; 3337 Trinity Ave. San An	State; Zip Code	Amount of contribution (\$) 200.00		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Livestock Director SASSRA			tions)		
Date 04/04/2025	Full name of contributor out-of-state PA Fred Key Contributor address; City; 2632 Vista Del Arroyo San Ar	State; Zip Code	Amount of contribution (\$) 1,000.00		
Principal occup Media Compa	pation / Job title (See Instructions) any Owner	Employer (See Instruction Foster Communication			
Date 04/07/2025	Full name of contributor George Randall Contributor address; City; 801 W. Ave. N San Angelo, TX	State; Zip Code	Amount of contribution (\$) 250.00		
Principal occupation / Job title (See Instructions) Business Owner Employer (See Instructions) Randall Motors			tions)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.					

SCHEDULE A1

The state of the s					
The	Instruction Guide explains how to complete t	1 Total pages Schedule A1:			
² FILER NAME Thomas "	Tom" N. Thompson	3 Filer ID (Ethics Commission Filers)			
4 Date 04/07/2025	David & Angel Christian 6 Contributor address; City;	State; Zip Code	7 Amount of contribution (\$) 100.00		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct Self			tions)		
Date 04/07/2025	Stan Meador Contributor address; City; 4922 Mariner Terr. San A	State; Zip Code	Amount of contribution (\$) 100.00		
Principal occup Executive	ation / Job title (See Instructions)	Employer (See Instruction Pacifico	tions)		
Date 04/08/2025	John Mark McLaughlin		Amount of contribution (\$) 1,000.00		
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instruc	tions)		
Date 04/14/2025	John David Fields Contributor address; City; P.O. Box 61010 San Angelo	State; Zip Code	Amount of contribution (\$) 500.00		
Principal occup Owner	ation / Job title (See Instructions)	Employer (See Instruction	tions)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					
	If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.				

SCHEDULE A1

- The state of the					
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:	
² FILER NAME Thomas "Tom" N. Thompson				3 Filer ID (Ethics Commission Filers)	
4 Date 04/17/2025	5 Full name of contributor Owen "Bubba" Harrison 6 Contributor address;	out-of-state PAC (ID#:) City; State; Zip Code		7 Amount of contribution (\$)	
2200 Douglas San Angelo, TX 76904 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruc					
Harrison Roo			9 Employer (See Instruc	lions)	
Date 04/17/2025	Full name of contributor Wendall Hirschfeld Contributor address:	out-of-state PAC	C (ID#:) State; Zip Code	Amount of contribution (\$) 500.00	
	2006 Valleyview	•	gelo, TX 76904	300.00	
Principal occupation / Job title (See Instructions) Businessman		Employer (See Instruc	tions)		
Date 04/19/2025	Full name of contributor Rocky Templin	out-of-state PAC	C (ID#:)	Amount of contribution (\$)	
04/19/2023	Contributor address; 3845 Lake Ridge	city; San An	State; Zip Code gelo, TX 76904	500.00	
Principal occup Developer	pation / Job title (See Instructions)		Employer (See Instruc	tions)	
Date	Full name of contributor Louis & Barbara Hall	out-of-state PAC	C (ID#:)	Amount of contribution (\$)	
04/19/2025	Contributor address;	City;	State; Zip Code gelo, TX 76904	500.00	
Principal occupation / Job title (See Instructions) Salesman		Employer (See Instruct	tions)		
	ATTACH ADDITION If contributor is out-of-state PAC, p		OF THIS SCHEDULE AS Nuction guide for additional r		

SCHEDULE A1

If the reques	sted information is not applicable,	, DO NOT in	clude this page in the	report.
The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1:
² FILER NAME Thomas "	Tom" N. Thompson			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Freeman Pickett III	out of older the flow		7 Amount of contribution (\$)
04/19/2025	6 Contributor address;	City;	State; Zip Code	2,500.00
	P.O. Box 60245	San An	gelo, TX 76906	_,000.00
8 Principal occu Developer	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	Full name of contributor out-of-state PAC (ID#:) Kevin & Kim Collins		Amount of contribution (\$)	
04/22/2025	Contributor address;	City;	State; Zip Code	500.00
	5610 Grey Charles Ct.	San An	gelo, TX 76904	000.00
Principal occup Developer	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
Date 04/24/2025	Full name of contributor Mort Mertz	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
0-1/2-1/2023	Contributor address; 2618 Parkview Dr. Sar	City; State; Zip Code San Angelo, TX 76904		500.00
Principal occup Rancher - ret	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date Full name of contributor o		out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occupation / Job title (See Instructions) Employer (See Instructions)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.				

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

			The second secon	
EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Thomas "Tom" N. Thompson		3 Filer ID (Ethics Commission Filers)	
4 Date 04/08/2025	5 Payee name McLaughlin Advertising			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
10,828.99	115 Park St.	San Ang	elo, TX 76901	
8	(a) Category (See Categories listed at the top of this so	hedule) (b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Political Adver	tising	
	(c) Check if travel outside of Texas. Complete Scho	edule T. Check if Austi	in, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
04/14/2025	Shotgun Willy Enterprises, LLC			
Amount (\$)	Payee address;	City;	State; Zip Code	
4,431.76	3602 High Meadow Dr.	San Ange	elo, TX 76904	
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertising Expense Signs				
	Check if travel outside of Texas. Complete Sche	ule T. Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this school	edule) Description		
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEE	DED	