

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (of this Commission files)	2 Total pages filed: 20	
3 COMMITTEE NAME On Your Terms			OFFICE USE ONLY Date Received	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS (PO BOX APT./SUITE # CITY STATE ZIP CODE) 1001 Broadway, Apt/Suite A San Antonio TX 78213		Date Hand Delivered or Date Postmarked	
5 ALIEN/IN THEASURER NAME	MS/MRS/MR FIRST MI Ms Betty J	NICKNAME LAST SUFFIX Sutherland	Receipt #	Amount
			Date Processed	
			Date Imaged	
6 ALIEN/IN THEASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE) APT./SUITE # CITY STATE ZIP CODE 1001 Broadway, Apt/Suite A San Antonio TX 78213			
7 ALIEN/IN THEASURER'S MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX APT./SUITE # CITY STATE ZIP CODE 1001 Broadway, Apt/Suite A San Antonio TX 78213			
8 ALIEN/IN THEASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 828-3451			
9 REPORT TYPE	July 15			
10 PERIOD COVERED	Month Day Year 6/24/2008		Month Day Year 6/30/2008	
		THROUGH		
11 ELECTION	ELECTION DATE Month Day Year 11/4/2008	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME <p style="text-align:center">On Your Terms</p>	ACCOUNT # (Ethics Commission filers)
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13 COMMITTEE PURPOSES (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE	CANDIDATE / OFFICEHOLDER NAME <p style="text-align:center">Not Applicable</p>	
	<input type="checkbox"/> OFFICEHOLDER	OFFICE / OFFICE (Candidate) / OFFICE / FIELD (Officeholder) <p style="text-align:center">Not Applicable Not Applicable</p>	
	<input checked="" type="checkbox"/> MEASURE	BALLOT IDENTIFICATION #	
	DESCRIPTION To extend present term limits for municipal office holders to 4, 2-year terms		
		ELECTION DATE Month Day Year <p style="text-align:center">11/4/2008</p>	

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 129950.00	
	EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 0	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0	

15 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.

*** Electronically Certified ***

Signature of campaign treasurer

AFFIX TO CLARY STAMP / SEAL ABOVE

Swear to and subscribed before me, by the said **Ms Betty J Sutherland**, this the **15th** day of **July**, 20**08**, to certify which, witness my hand and seal of office.

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: 1 of 7
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2 FILER NAME On Your Terms	3 ACCOUNT # at this Commission (None)
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4 Date 6/24/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC (ID#) Mr Patrick J Kennedy	7 Amount of contribution (US) 25000.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 112 E. Pecan, Apt/Suite: 2810 San Antonio, TX 78205		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
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Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID#) Mr J F CLINGMAN JR	Amount of contribution (US) 1000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 6 MORNING DOWNS SAN ANTONIO, TX 78257		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID#) Mr JAMES D BERG	Amount of contribution (US) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 14607 SAN PEDRO , Apt/Suite: 100 SAN ANTONIO, TX 78232		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID#) Mr GLEN BIGGS	Amount of contribution (US) 500.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2 GLENDOUGH CT SAN ANTONIO, TX 78209		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID#) ALFRED W ROHDE JR	Amount of contribution (US) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 85 NE LOOP 410, Apt/Suite: 100 SAN ANTONIO, TX 78216		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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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: 2 of 7	
2 TITLE NAME On Your Terms		3 ACCOUNT # (Ethics Commission Use)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mr BILL F HURLEY 6 Contributor address: City: State: Zip Code 1819 BABCOCK, Apt/Suite: 205B SAN ANTONIO, TX 78229	7 Amount of contribution (US) 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)	
6/30/2008	Ms JOCELYN L STRAUS 555 ARGYLE AVE SAN ANTONIO, TX 78209	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/30/2008	Mr JOE R STRAUS JR PO Box 47535 SAN ANTONIO, TX 78265	100.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/30/2008	VIJAY N KOLI MD 8603 RAIN VALLEY DR SAN ANTONIO, TX 78255	250.00	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
6/30/2008	R. TERRELL MCCOMBS 37 WESTELM CIRCLE SAN ANTONIO, 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: 3 of 7	
2 TITLE NAME On Your Terms		3 ACCOUNT # (if this commission files)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC (ID#) Mr ARMANDO A ARANDA SR 6 Contributor address: City: State: Zip Code 2222 BEEHAVEN DR SAN ANTONIO, TX 78205	7 Amount of contribution (US) 100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
6/30/2008	Mr STANLEY SCHOENBAUM 112 E. PECAN, Apt/Suite: 3000 SAN ANTONIO, TX 78205	100.00	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
6/30/2008	MORRIS SPECTOR MD PO Box 15273 SAN ANTONIO, TX 78212	100.00	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
6/30/2008	B J MCCOMBS 0 PO BOX BH003 SAN ANTONIO, TX 78201	25000.00	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
6/30/2008	Mr Patrick H Swearingen Jr 310 Argyle San Antonio, TX 78209	500.00	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 4 of 7	
2 FILER NAME On Your Terms		3 ACCOUNT # (if this commission filer)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC filer Mr HOLLIS Q GRIZZARD JR 6 Contributor address: City: State: Zip Code 729 E. WOODLAWN SAN ANTONIO, TX 78212	7 Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC filer Chandu Radia Contributor address: City: State: Zip Code 12 Galleria Dr San Antonio, TX 78257	Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC filer Mr SCOTT L DUFFY Contributor address: City: State: Zip Code 150 PARK HILL DR SAN ANTONIO, TX 78212	Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC filer Mrs MARGARET S TRIESCHMANN Contributor address: City: State: Zip Code 265 GENESEO SAN ANTONIO, TX 78209	Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC filer Albert M McNeel Jr Contributor address: City: State: Zip Code 901 NE Loop 410, Apt/Suite: 909 San Antonio, TX 78209	Amount of contribution (US) 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: 5 of 7	
2 FILER NAME On Your Terms		3 ACCOUNT # (if this Commission files)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC ID# Ralph Brown	7 Amount of contribution (CS) 500.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 2008 NW Military Hwy San Antonio, TX 78213		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# Mr STANLEY L BLEND	Amount of contribution (CS) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 14122 BLUFF MANOR DR SAN ANTONIO, TX 78216		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# Jeffrey R Akins	Amount of contribution (CS) 25.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 13750 San Pedro, Apt/Suite: 600 San Antonio, TX 78232		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# A BAKER DUNCAN	Amount of contribution (CS) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 711 NAVARRO, Apt/Suite: 740 SAN ANTONIO, TX 78205		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# PATRICIA GALT STEVES	Amount of contribution (CS) 1000.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 1866 SAN ANTONIO, TX 78297		(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: 6 of 7	
2 FILER NAME On Your Terms		3 ACCOUNT # (if this Commission files)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC (ID# _____) Mr LLOYD W BOOTH	7 Amount of contribution (S) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 4079 DE ZAVALA ROAD SAN ANTONIO, TX 78249		(If travel outside of Texas, complete schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID# _____) GREGORY A STEVENS	Amount of contribution (S) 100.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 4123 CLIFF OAKS SAN ANTONIO, TX 78229		(If travel outside of Texas, complete schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID# _____) Corbin Snow	Amount of contribution (S) 250.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code PO Box 6965 San Antonio, TX 78209		(If travel outside of Texas, complete schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID# _____) Robert B James	Amount of contribution (S) 25.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 3418 River Path San Antonio, TX 78230		(If travel outside of Texas, complete schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC (ID# _____) Los Patios	Amount of contribution (S) 250.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2015 NE Loop 410 San Antonio, TX 78217-		(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: 7 of 7	
2 FILER NAME On Your Terms		3 ACCOUNT # (if this commission files)	
4 Date 6/30/2008	5 Full name of contributor <input type="checkbox"/> out of state PAC ID# Ruth Lofgren 6 Contributor address: City: State: Zip Code 434 Hermine Blvd San Antonio, TX 78212	7 Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# MICHAEL LAHOOD Contributor address: City: State: Zip Code 112 VILLITA SAN ANTONIO, TX 78205	Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# KATHY M DAVILA Contributor address: City: State: Zip Code 105 W KINGS HWY SAN ANTONIO, TX 78212	Amount of contribution (US) 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 6/30/2008	Full name of contributor <input type="checkbox"/> out of state PAC ID# Jim Reed Contributor address: City: State: Zip Code 7317 Ashton Pl San Antonio, TX 78229	Amount of contribution (US) 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	Full name of contributor <input type="checkbox"/> out of state PAC ID# Contributor address: City: State: Zip Code	Amount of contribution (US)	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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CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE C

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C: 1 of 1	
2 TITLE NAME On Your Terms		3 ACCOUNT # (if this Commission files)	
4 Date 6/30/2008	5 Corporation / Labor Organization name UNITED SERVICES AUTOMOBILE ASSOCIATION 6 Corporation / Labor Organization address: City: State: Zip Code 9800 FREDERICKSBURG RD SAN ANTONIO, TX 78288	7 Amount of contribution (CS) 15000.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete schedule T)	
Date 6/30/2008	Corporation / Labor Organization name CLEAR CHANNEL WORLDWIDE Corporation / Labor Organization address: City: State: Zip Code PO Box 659512 SAN ANTONIO, TX 78265	Amount of contribution (CS) 25000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Date 6/30/2008	Corporation / Labor Organization name ZACHRY GROUP, INC. Corporation / Labor Organization address: City: State: Zip Code PO Box 2311 RENO, NV 89505	Amount of contribution (CS) 25000.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Date 6/30/2008	Corporation / Labor Organization name Frost National Bank Corporation / Labor Organization address: City: State: Zip Code PO Box 1600 San Antonio, TX 78296	Amount of contribution (CS) 7500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Date	Corporation / Labor Organization name Corporation / Labor Organization address: City: State: Zip Code	Amount of contribution (CS)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete schedule T)	
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