Texas Ethics Commission P O Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6352

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: 2

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

MS MRS MR C FIRST Richard MI T

NICKNAME LAST McCain SUFFIX

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS (Change of Address)

ADDRESS PO BOX APT SUITE # CITY STATE ZIP CODE

7100 Grove Crest Dr Austin Tx 78736

5 CANDIDATE/ OFFICEHOLDER PHONE

AREA CODE (512) PHONE NUMBER 294-3421 EXTENSION

6 CAMPAIGN TREASURER NAME

MS MRS MR C FIRST Richard MI T

NICKNAME LAST McCain SUFFIX

7 CAMPAIGN TREASURER ADDRESS (Place of business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE

7100 Grove Crest Dr Austin, Tx. 78736

8 CAMPAIGN TREASURER PHONE

AREA CODE (512) PHONE NUMBER 294-3421 EXTENSION

9 REPORT TYPE

- [ ] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [x] July 15
- [ ] 8th day before election
- [ ] Exceeded $500 limit
- [ ] Final report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year 01 / 16 / 06 THROUGH Month Day Year 06 / 30 / 06

11 ELECTION

ELECTION DATE Month Day Year 11 / 02 / 04

ELECTION TYPE

- [ ] Primary
- [ ] Runoff
- [x] General
- [ ] Special

12 OFFICE

OFFICE HELD (if any) Travis County Constable Pct 3

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

Attach additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME: Richard T McCain

16 ACCOUNT # (Ethics Commission Use)

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 ••

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Attach extra pages

18 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ Ø
	2.	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ Ø
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ Ø
	4.	**TOTAL POLITICAL EXPENDITURES**	$ Ø
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ Ø
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 29,608.41

19 AFFIDAVIT

MARY PHILLIPS
Notary Public State of Texas
My Commission Expires 09-24-2009

AFFIX NOTARY STAMP / SEAL ABOVE

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.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Richard McCain, this the 17 day of July, 20 06, to certify which, witness my hand and seal of office.

Mary Phillips — Signature of officer administering oath

MARY PHILLIPS — Printed name of officer administering oath

Title of officer administering oath