

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7824

## 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: <b>21</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mr.</b>	FIRST <b>Richard</b>	MI
	NICKNAME	LAST <b>Franklin</b>	SUFFIX <b>III</b>
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: <b>3906 Sojourner St</b>	APT / SUITE #:	CITY: STATE: ZIP CODE <b>Austin TX 78725</b>
	AREA CODE <b>(512)</b>	PHONE NUMBER <b>276 - 7581</b>	EXTENSION
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR <b>Mr.</b>	FIRST <b>Thomas</b>	MI
6 CAMPAIGN TREASURER NAME	NICKNAME	LAST <b>Fritzinger</b>	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): <b>4725 Castleman Dr.</b>	APT / SUITE #:	CITY: STATE: ZIP CODE <b>Austin TX 78725</b>
8 CAMPAIGN TREASURER PHONE	AREA CODE <b>(512)</b>	PHONE NUMBER <b>276 - 9959</b>	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year <b>1 / 1 / 12</b>	THROUGH	Month Day Year <b>4 / 19 / 12</b>
11 ELECTION	ELECTION DATE Month Day Year <b>5 / 29 / 12</b>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <b>Del Valle School Board</b>	13 OFFICE SOUGHT (if known) <b>Travis County Commissioner Pet. 1</b>	

## OFFICE USE ONLY

Date Received

Dana DeBeauvoir  
 County Clerk  
 Travis County Texas  
 2012 APR 30 PM 4:00  
 FILED FOR RECORD

Date Hand Delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

GOTO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

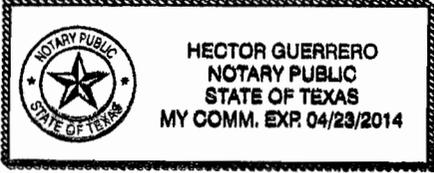
<b>14 C/OH NAME</b>	<b>15 ACCOUNT #</b> (Ethics Commission Filers)
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<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY 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.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
		<b>COMMITTEE ADDRESS</b>
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>17 CONTRIBUTION TOTALS</b>  EXPENDITURE TOTALS  CONTRIBUTION BALANCE  OUTSTANDING LOAN TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ —
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6315.00
	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 160.78
	4. TOTAL POLITICAL EXPENDITURES	\$ 6152.67
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 162.33
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,300.00

**18 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.



AFFIX NOTARY STAMP / SEAL ABOVE

*Richard Franklin III*  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Richard Franklin III, this the 30<sup>th</sup> day of April, 20 12, to certify which, witness my hand and seal of office.

*Hector Guerrero*  
 \_\_\_\_\_  
 Signature of officer administering oath

Hector Guerrero  
 \_\_\_\_\_  
 Printed name of officer administering oath

Notary Public  
 \_\_\_\_\_  
 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: **7**

2 FILER NAME **Richard Franklin III**

3 ACCOUNT # (Ethics Commission Filers)

4 Date  
**1/2/12**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

**James Norley**  
6 Contributor address; City; State; Zip Code  
**4600 Mueller Blvd Apt # 2036  
Austin TX 78723**

7 Amount of contribution (\$) **\$ 500.00**

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  
**1/13/12**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

**Sterling Lands**  
Contributor address; City; State; Zip Code  
**6510 Berkman Dr  
Austin TX 78723**

Amount of contribution (\$) **\$ 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  
**1/19/12**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

**Susan Philips**  
Contributor address; City; State; Zip Code  
**9704 Bal Harbor Rd  
Austin TX 78733**

Amount of contribution (\$) **\$ 1,000.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
**1/25/12**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

**Victoria Hallman**  
Contributor address; City; State; Zip Code  
**4001 Stonecroft Dr  
Austin TX 78749**

Amount of contribution (\$) **\$ 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  
**1/26/12**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

**Nat Bradford**  
Contributor address; City; State; Zip Code  
**5507 Basswood Ln  
Austin TX 78723**

Amount of contribution (\$) **\$ 125.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>7</b>	
2 FILER NAME <b>Richard Franklin</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>1/28/12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patricia Olivera</b>	7 Amount of contribution (\$) <b>\$ 50.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>15909 m.10 Rd Austin TX 78725</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>1/30/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Brian Rodgers</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1112 West 9th St. Austin TX 78703</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>1/31/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joyce Basciano</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1907 W 34th St. Austin TX 78703</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2/2/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lionel Bess</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4713 Fort Moultrie Austin TX 78703</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>2/3/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Patrick Patterson</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>14746 Single Trace Austin TX 78726</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 3/29/12	<b>5</b> Payee name Home Depot
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<b>6</b> Amount (\$) \$56.52	<b>7</b> Payee address; City: State: Zip Code 1517 Town Center Dr. Pflugerville TX 78660
---------------------------------	------------------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Advertising	<b>(b)</b> Description (if travel outside of Texas, complete Schedule T) Yard Signs Hardware
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 3/29/12	<b>Payee name</b> Harbor Freight
------------------------	-------------------------------------

<b>Amount (\$)</b> \$21.64	<b>Payee address; City: State: Zip Code</b> 2506 W. Parmer Austin TX 78660
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Advertising	<b>Description</b> (if travel outside of Texas, complete Schedule T) Yard Signs Hardware
-------------------------------	------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

<b>Date</b> 3/29/12	<b>Payee name</b> Richard Franklin
------------------------	---------------------------------------

<b>Amount (\$)</b> \$300.00	<b>Payee address; City: State: Zip Code</b> 3906 Sojourner St Austin TX 78725
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Loan Repayment	<b>Description</b> (if travel outside of Texas, complete Schedule T) Loan Repayment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 3/30/12	<b>Payee name</b> TA Unlimited
------------------------	-----------------------------------

<b>Amount (\$)</b> \$84.00	<b>Payee address; City: State: Zip Code</b> 3613 Bloestein Austin
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Advertising	<b>Description</b> (if travel outside of Texas, complete Schedule T) T-Shirts
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |                     |                               |                                  |                                            |
|---------------------|-------------------------------|----------------------------------|--------------------------------------------|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Richard Franklin	<b>3</b> ACCOUNT # (Ethics Commission Filers)
----------------------------------------	-----------------------------------------	-----------------------------------------------

<b>4</b> Date 3/30/12	<b>5</b> Payee name Home Depot
--------------------------	-----------------------------------

<b>6</b> Amount (\$) \$63.38	<b>7</b> Payee address; City: State: Zip Code 3600 South IH 35 Austin
---------------------------------	-----------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (if travel outside of Texas, complete Schedule T) Yard Signs Hardware
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

Date 4/3/12	Payee name Home Depot
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Amount (\$) \$22.95	Payee address; City: State: Zip Code 3600 South IH 35 Austin TX
------------------------	-----------------------------------------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (if travel outside of Texas, complete Schedule T) Road Signs Hardware
------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

Date 4/6/12	Payee name Staples
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Amount (\$) \$69.24	Payee address; City: State: Zip Code 1201 Barbara Jordan Austin TX 78723
------------------------	--------------------------------------------------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (if travel outside of Texas, complete Schedule T) Printing Supplies
------------------------	---------------------------------------------------------------------------------	------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City: State: Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (if travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME: Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date: 4/7/12	<b>5</b> Payee name: Wal-Mart
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<b>6</b> Amount (\$): \$27.07	<b>7</b> Payee address; City: State: Zip Code: 1030 Norwood Park Austin TX 78753
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule): Event Expense	<b>(b)</b> Description (if travel outside of Texas, complete Schedule T): Fundraiser Supplies
---------------------------------	-------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

<b>Date</b> 4/10/12	<b>Payee name</b> USPS Stamp Com
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<b>Amount (\$)</b> \$15.99	<b>Payee address; City: State: Zip Code</b> 12959 Coral Tree Los Angeles CA
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule): Other	<b>Description</b> (if travel outside of Texas, complete Schedule T): Postage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 4/13/12	<b>Payee name</b> Sam's Club
------------------------	---------------------------------

<b>Amount (\$)</b> \$105.85	<b>Payee address; City: State: Zip Code</b> 4970 W. Hwy 290 Austin TX
--------------------------------	-----------------------------------------------------------------------------

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule): Event Expense	<b>Description</b> (if travel outside of Texas, complete Schedule T): Fundraiser Food
-------------------------------	---------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

<b>Date</b> 4/13/12	<b>Payee name</b> Wal-Mart
------------------------	-------------------------------

<b>Amount (\$)</b> \$54.00	<b>Payee address; City: State: Zip Code</b> 1030 Norwood Park Austin TX 78753
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule): Event Expense	<b>Description</b> (if travel outside of Texas, complete Schedule T): Fundraiser Equipment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 4/14/12	<b>5</b> Payee name Sam's Club
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<b>6</b> Amount (\$) \$223.74	<b>7</b> Payee address; City: State; Zip Code 4970 W Hwy 290 Austin TX
----------------------------------	------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Fundraiser Food
---------------------------------	------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

<b>Date</b> 4/16/12	<b>Payee name</b> Exxon
------------------------	----------------------------

<b>Amount (\$)</b> \$30.00	<b>Payee address; City: State; Zip Code</b> Manor TX
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Travel In District	<b>Description</b> (If travel outside of Texas, complete Schedule T) Travel Gas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
------------------------------------------------------------	-------------------------------	---------------	-------------

<b>Date</b> 4/16/12	<b>Payee name</b> Richard Franklin
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<b>Amount (\$)</b> \$400.00	<b>Payee address; City: State; Zip Code</b> 3906 Sojourner St Austin TX 78725
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Loan Repayment	<b>Description</b> (If travel outside of Texas, complete Schedule T) Loan Repayment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b>	<b>Payee name</b>
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<b>Amount (\$)</b>	<b>Payee address; City: State; Zip Code</b>
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule)	<b>Description</b> (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |                     |                               |                                  |                                            |
|---------------------|-------------------------------|----------------------------------|--------------------------------------------|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: 1	<b>2</b> FILER NAME Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
---------------------------------------	---------------------------------------------	-----------------------------------------------

<b>4</b> Date 1/13/12	<b>5</b> Payee name TA Unlimited
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<b>6</b> Amount (\$) \$ 28.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City: State: Zip Code 3613 Bluestein Dr Austin TX 78721
-----------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Advertising	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) T-Shirts
---------------------------------	----------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Date 1/13/12	Payee name TA Unlimited
-----------------	----------------------------

Amount (\$) \$ 35.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code 3613 Bluestein Dr Austin TX 78721
--------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) T-Shirts
------------------------	-----------------------------------------------------------------------------	---------------------------------------------------------------------------

Date 1/18/12	Payee name TA Unlimited
-----------------	----------------------------

Amount (\$) \$ 42.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code 3613 Bluestein Dr Austin TX 78721
--------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--------------------------------------------------------------	---------------------------------------------------------------

Date	Payee name
------	------------

Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City: State: Zip Code
---------------------------------------------------------------------------------------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--------------------------------------------------------------	---------------------------------------------------------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **7**

2 FILER NAME

*Richard Franklin*

3 ACCOUNT # (Ethics Commission Filers)

4 Date

*2/13/12*

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Rebecca Birch*

7 Amount of contribution (\$)

*\$ 25.00*

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

*3906 Sojourner St  
Austin TX 78725*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

*2/14/12*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Charles Jackson*

Amount of contribution (\$)

*\$ 100.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*11900 Metric Blvd J163  
Austin TX 78744*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/17/12*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Susanna Woody*

Amount of contribution (\$)

*\$ 50.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*7433 Montezuma St  
Austin TX 78757*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*2/25/12*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Leonard N. Moore*

Amount of contribution (\$)

*\$ 75.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*3105 Pecan Crest Cove  
Round Rock TX 78681*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

*3/5/12*

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)

*Clint Smith*

Amount of contribution (\$)

*\$ 25.00*

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

*2720 Lyons Rd  
Austin TX 78702*

(If travel outside of Texas, complete Schedule T)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>7</b>	
2 FILER NAME <b>Richard Franklin</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/5/12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Vicente Chung</b>	7 Amount of contribution (\$) <b>\$1500.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>10108 Spicewood Mesa Austin TX 78702</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/8/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Dan Llanes</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2907 Red Bluff Rd. Austin TX 78702</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/15/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kristian Taylor Chambers</b>	Amount of contribution (\$) <b>\$40.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1702 East 17th St. Austin TX 78702</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/18/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joyce McCarth</b>	Amount of contribution (\$) <b>\$50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5210 Fossil Rim Austin TX 78746</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/18/12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Llanes</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4907 Red Bluff Rd. Austin TX 78702</b>		(If travel outside of Texas, complete Schedule T)	
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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>7</u>	
2 FILER NAME <u>Richard Franklin</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>3/20/12</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Susanna Woody</u>	7 Amount of contribution (\$) <u>\$ 50.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>7433 Montezuma St Austin TX 78757</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>3/29/12</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Bishop R. I. Barnes</u>	Amount of contribution (\$) <u>\$ 25.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>11816 Barker Hills Dr. Manor TX 78653</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>3/30/12</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Susanna Woody</u>	Amount of contribution (\$) <u>\$ 50.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>7433 Montezuma St. Austin TX 78757</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>4/2/12</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Ora Houston</u>	Amount of contribution (\$) <u>\$ 100.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>2207 E 22nd St Austin TX 78722</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>4/3/12</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <u>Katy Manninen</u>	Amount of contribution (\$) <u>\$ 25.00</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>3302 Stardust Dr. Austin TX 78759</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <span style="font-size: 2em;">7</span>	
2 FILER NAME <span style="font-size: 1.2em;">Richard Franklin</span>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <span style="font-size: 1.2em;">4/14/12</span>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Leonard N. Moore</span>	7 Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 100.00</span>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">3105 Pecan Crest Cove Round Rock TX 78681</span>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <span style="font-size: 1.2em;">4/17/12</span>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <span style="font-size: 1.2em;">Patty Smelser</span>	Amount of contribution (\$) <span style="font-size: 1.2em;">\$ 25.00</span>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <span style="font-size: 1.2em;">3500 A Victorine Ln Austin TX 78617</span>		(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# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(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# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(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# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
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****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11		2 FILER NAME Richard Franklin III		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1/3/12		5 Payee name Political Lawn Signs			
6 Amount (\$) \$ 609.89		7 Payee address; City; State; Zip Code 916 Byrd Neenah Ave Neenah WI 54956			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising		(b) Description (If travel outside of Texas, complete Schedule T) Road Signs Printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/6/12		Payee name Signazon.com			
Amount (\$) \$ 104.28		Payee address; City; State; Zip Code 11969 Plano Rd Suite 190 Dallas TX 75243			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) Yard Signs Printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/10/12		Payee name USPS Stamps. Com			
Amount (\$) \$ 15.99		Payee address; City; State; Zip Code 12959 Coral Tree Pl Los Angeles CA			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Postage	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/11/12		Payee name Staples			
Amount (\$) \$ 37.88		Payee address; City; State; Zip Code 1201 Barbara Jordan Austin TX 78703			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office		Description (If travel outside of Texas, complete Schedule T) Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11	2 FILER NAME Richard Franklin III	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1/11/12	5 Payee name TA Unlimited
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6 Amount (\$) \$ 210.00	7 Payee address; City; State; Zip Code 3613 Bluestein Austin TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) T-Shirts
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/13/12	Payee name Political Lawn Signs
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Amount (\$) \$ 513.77	Payee address; City; State; Zip Code 916 Bryd Ave Neenah WI 54956
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Road Signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/20/12	Payee name Target
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Amount (\$) \$ 32.46	Payee address; City; State; Zip Code 18700 Limestone Commercial Dr PPL/ervelle TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office	Description (If travel outside of Texas, complete Schedule T) Office Supplies/Toner
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/21/12	Payee name Home Depot
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Amount (\$) \$ 17.76	Payee address; City; State; Zip Code 1200 Barbara Jordan Austin TX 78723
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Road Signs Hardware
------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11	2 FILER NAME Richard Franklin III	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2/3/12	5 Payee name TA Unlimited
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6 Amount (\$) \$ 70.00	7 Payee address; City; State; Zip Code 3613 Bluestein Austin TX
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) T-Shirts
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/6/12	Payee name Political Lawn Signs
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Amount (\$) \$ 361.04	Payee address; City; State; Zip Code 916 Bryd Ave Neenah WI 54956
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Road Signs Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/10/12	Payee name TA Unlimited
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Amount (\$) \$ 49.00	Payee address; City; State; Zip Code <del>3613 Bluestein</del> <del>3613 Bryd Ave</del> <del>Neenah WI 54956</del> 3613 Bluestein Austin TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) T-Shirts
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/14/12	Payee name Home Depot
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Amount (\$) \$ 27.28	Payee address; City; State; Zip Code 1200 Barbara Jordan Austin TX 78723
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Road Signs Hardware
------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11		2 FILER NAME Richard Franklin III		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/17/12		5 Payee name Political Lawn Signs			
6 Amount (\$) \$513.77		7 Payee address; City: State: Zip Code 916 Byrd Ave Neenah WI 54956			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising		(b) Description (If travel outside of Texas, complete Schedule T) Road Signs Printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/17/12		Payee name TA Unlimited			
Amount (\$) \$49.00		Payee address; City: State: Zip Code 3613 Bluestein Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) T-Shirts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/17/12		Payee name Wal-Mart			
Amount (\$) \$69.77		Payee address; City: State: Zip Code 1030 Norwood Park Austin TX 78753			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office		Description (If travel outside of Texas, complete Schedule T) Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/19/12		Payee name Home Depot			
Amount (\$) \$38.86		Payee address; City: State: Zip Code 3600 South IH 35 Austin TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other		Description (If travel outside of Texas, complete Schedule T) Supplies/misc	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 11	2 FILER NAME Richard Franklin III	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2/19/12	5 Payee name Valero
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6 Amount (\$) \$ 42.28	7 Payee address; City: State: Zip Code 4311 Springdale Austin
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Travel In District	(b) Description (If travel outside of Texas, complete Schedule T) Travel
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/19/12	Payee name Auto Zone
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Amount (\$) \$ 19.25	Payee address; City: State: Zip Code 6500 Springdale Austin TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Transportation Equip	Description (If travel outside of Texas, complete Schedule T) Transportation Misc
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/22/12	Payee name mi Madres
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Amount (\$) \$ 32.00	Payee address; City: State: Zip Code Manor Blvd Austin TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food & Beverage	Description (If travel outside of Texas, complete Schedule T) Campaign Lunch
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/23/12	Payee name Home Depot
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Amount (\$) \$ 13.44	Payee address; City: State: Zip Code 3600 South IH 35 Austin TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Yard Signs Hardware
------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 2/24/12	<b>5</b> Payee name TA Unlimited
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<b>6</b> Amount (\$) \$ 56.00	<b>7</b> Payee address; City: State: Zip Code 3613 Blue Stein Austin TX
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) T-Shirts
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/25/12	Payee name Home Depot
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Amount (\$) \$ 45.90	Payee address; City: State: Zip Code 3600 South IH 35 Austin TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Road Signs Hardware
------------------------	-----------------------------------------------------------------------------	--------------------------------------------------------------------------------------

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/28/12	Payee name Houston Campaigns
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Amount (\$) \$ 431.69	Payee address; City: State: Zip Code 1415 S. Voss St. Houston TX 77057
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Push Cards Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/19/12	Payee name Political Lawn Signs
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Amount (\$) \$ 557.25	Payee address; City: State: Zip Code 916 Byrd Ave Neenah WI 54956
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Yard Signs Printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F: 11	<b>2</b> FILER NAME Richard Franklin III	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 3/23/12	<b>5</b> Payee name Richard Franklin
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<b>6</b> Amount (\$) \$ 200.00	<b>7</b> Payee address; City: State: Zip Code 3906 Sojourner St Austin TX 78725
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Loan Repayment	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Loan Repayment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 3/25/12	<b>Payee name</b> Mets #1
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<b>Amount (\$)</b> \$ 25.10	<b>Payee address; City: State: Zip Code</b> 3926 Ed Bluestein Austin TX 78725
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Travel In District	<b>Description</b> (If travel outside of Texas, complete Schedule T) Gas / Travel
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 3/26/12	<b>Payee name</b> Home Depot
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<b>Amount (\$)</b> \$ 68.85	<b>Payee address; City: State: Zip Code</b> 3600 South IH 35 Austin 78704
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) <del>Advertising</del> Event Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) Hardware
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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<b>Date</b> 3/27/12	<b>Payee name</b> Richard Franklin
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<b>Amount (\$)</b> \$ 200.00	<b>Payee address; City: State: Zip Code</b> 3906 Sojourner St Austin TX 78725
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See categories listed at the top of this schedule) Loan Repayment	<b>Description</b> (If travel outside of Texas, complete Schedule T) Loan Repayment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**