

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

7865

**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:** 6

**3 CANDIDATE / OFFICEHOLDER NAME**  
MS / MRS / MR: *0* FIRST: *Richard* MI: *T*  
NICKNAME: LAST: *McLain* SUFFIX:

**4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS**  
ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE  
*7100 Grove Crest Dr. Austin, Tx 78736*  
 change of address

**5 CANDIDATE / OFFICEHOLDER PHONE**  
AREA CODE: PHONE NUMBER: EXTENSION:  
*(512) 294-3421*

**6 CAMPAIGN TREASURER NAME**  
MS / MRS / MR: *0* FIRST: *Richard* MI: *T*  
NICKNAME: LAST: *McLain* SUFFIX:

**7 CAMPAIGN TREASURER ADDRESS (residence or 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: PHONE NUMBER: EXTENSION:  
*(512) 294-3421*

**9 REPORT TYPE**  
 January 15  30th day before election  Runoff  15th day after campaign treasurer appointment (officeholder only)  
 July 15  8th day before election  Exceeded \$500 limit  Final report (Attach C/OH - FR)

**10 PERIOD COVERED**  
Month Day Year THROUGH Month Day Year  
*04 / 20 / 2012 THROUGH 05 / 19 / 2012*

**11 ELECTION**  
ELECTION DATE: Month Day Year: *05 / 29 / 2012*  
ELECTION TYPE:  Primary  Runoff  General  Special

**12 OFFICE**  
OFFICE HELD (if any):  
*Travis County Constable Pot. 3*

**13 OFFICE SOUGHT (if known)**  
*Travis County Constable Pot. 3*

**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Marked

Receipt #

Date Processed

Date Imaged

2012 MAY 22 AM 8:09  
 Dana DeBeauvoir  
 County Clerk  
 Travis County Texas  
 FILED FOR RECORD

**GO TO PAGE 2**

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

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

14 C/OH NAME Richard T McCain 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

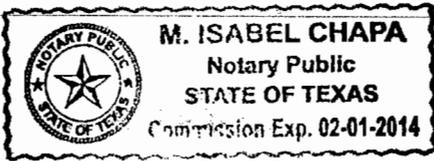
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

additional pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION 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)	\$ 275.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 28,417.64
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 1,075.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 29,608.41

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.

[Signature]  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Richard McCain, this the 21 day of May, 20 12, to certify which, witness my hand and seal of office.

M. Isabel Chapa  
Signature of officer administering oath

M. Isabel Chapa  
Printed name of officer administering oath

Notary  
Title of officer administering oath

**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.

1 Total pages Schedule G: <b>2</b>	2 FILER NAME <b>Richard T M Cain</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>05-11-12</b>	5 Payee name <b>Quik Print</b>	
6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$3,933.42</b>	7 Payee address; City; State; Zip Code <b>8311 Shoal Creek Blvd Austin, TX. 78757</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Postcard mailer &amp; postage</b>
Date <b>05-18-12</b>	Payee name <b>Quik Print</b>	
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$3,944.22</b>	Payee address; City; State; Zip Code <b>8311 Shoal Creek Blvd Austin, TX. 78757</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Postcard mailer &amp; postage</b>
Date <b>05-10-12</b>	Payee name <b>JRB Communication Inc.</b>	
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shank street Austin TX 78748</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/Consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV ADS</b>
Date <b>05-10-12</b>	Payee name <b>JRB Communication Inc.</b>	
Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shank street Austin TX 78748</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/Consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV ADS</b>

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.

1 Total pages Schedule G: <b>2</b>	2 FILER NAME <b>Richard T McCann</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>05-10-12</b>	5 Payee name <b>JRG Communications Inc.</b>
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6 Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$5,000.00</b>	7 Payee address; City; State; Zip Code <b>313 Shant Street Austin TX, 78748</b>
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>TV AD's</b>
--------------------------	---	---

Date <b>05-10-12</b>	Payee name <b>JRG Communication INC</b>
-------------------------	--

Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shant Street Austin TX, 78748</b>
--	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV AD's</b>
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Date <b>04-25-12</b>	Payee name <b>Oak Hill Gazette</b>
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Amount (\$) <input checked="" type="checkbox"/> Reimbursement from political contributions intended <b>\$540.00</b>	Payee address; City; State; Zip Code <b>6705 Hwy 290 West ste. 502 #205 Austin, TX. 78735</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>news paper AD's</b>
------------------------	--	---

Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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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**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: <b>2</b>	2 FILER NAME <b>Richard T McCain</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>05-11-12</b>	5 Payee name <b>Quick Print</b>
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6 Amount (\$) <b>\$3,933.42</b>	7 Payee address; City; State; Zip Code <b>8311 Shoal Creek Blvd Austin, Tx. 78757</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Postcard mailer &amp; Postage</b>
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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 <b>05-18-12</b>	Payee name <b>Quick Print</b>
-------------------------	----------------------------------

Amount (\$) <b>\$3,944.22</b>	Payee address; City; State; Zip Code <b>8311 shoal creek Blvd Austin, Tx. 78757</b>
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>Postcard mailer &amp; Postage</b>
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>05-10-12</b>	Payee name <b>JRG Communications Inc</b>
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Amount (\$) <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shant street Austin, Tx. 78748</b>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV AD'S</b>
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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 <b>05-10-12</b>	Payee name <b>JRG Communications Inc</b>
-------------------------	---

Amount (\$) <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shant street Austin Tx. 78748</b>
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV AD'S</b>
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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)  |

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1 Total pages Schedule F: <b>2</b>	2 FILER NAME <b>Richard T McCain</b>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <b>05-10-12</b>	5 Payee name <b>JRB Communications Inc</b>
---------------------------	---

6 Amount (\$) <b>\$5,000.00</b>	7 Payee address; City; State; Zip Code <b>313 Shant street Austin, TX 78748</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>TV AD's</b>
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>5-10-12</b>	Payee name <b>JRB Communications Inc</b>
------------------------	---

Amount (\$) <b>\$5,000.00</b>	Payee address; City; State; Zip Code <b>313 Shant street Austin TX 78748</b>
----------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising/consulting Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>TV AD's</b>
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>4-25-12</b>	Payee name <b>Oak Hill Gazette</b>
------------------------	---------------------------------------

Amount (\$) <b>\$540.00</b>	Payee address; City; State; Zip Code <b>6705 Hwy 290 West ste 502 #205 Austin TX 78735</b>
--------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description (If travel outside of Texas, complete Schedule T) <b>News Paper AD's</b>
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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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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)
------------------------	--	---

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