

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

17 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)

\$ - 0 -

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 1,116.06

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 580.31

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

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 FRANCISCO MENA, this the 30 day of July, 20 12, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

DANIEL L. EASTER
Printed name of officer administering oath

P.I.
Title of officer administering oath

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: <i>1</i>	2 FILER NAME <i>FRANCISCO MENA</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>5-11-2012</i>	5 Payee name <i>MORE THAN SIGNS</i>	
6 Amount (\$) <i>\$1,116.06</i>	7 Payee address; City; State; Zip Code <i>1112 AUSTIN STREET HEMPSTEAD, TEXAS 77445</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>ADVERTISING EXPENSES</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Political signs</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name <i>FRANCISCO MENA</i>	
Amount (\$)	Office sought <i>CONSTABLE PCT 3</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	Candidate / Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought
Date	Office held	
Date	Payee name	
Amount (\$)	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)
	Candidate / Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought
Date	Office held	
Date	Payee name	
Amount (\$)	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)
	Candidate / Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Office sought
Date	Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

More Than Signs
1112 Austin St.
Hempstead, TX 77445

Invoice

Date 5/11/2012
Invoice # 9832

Bill To
Frank Mena Campaign

PAID

Ship To

P.O. # Political Signs
Terms Due on receipt

Ship Date 5/11/2012
Due Date
Other

Item	Description	Qty	Price	Amount
Signs	18x24 2 color	100	4.85	485.00T
Signs	32x48 2 color	21	26.00	546.00T

Subtotal \$1,031.00
Sales Tax (8.25%) \$85.06
Total \$1,116.06
Payments/Credits \$-1,116.06
Balance Due \$0.00

dustin@morethansigns.com

More Than Signs

979-921-0200
979-921-0221

PAID 5-11-12
CR # 1002