

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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:

4

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS (MR) FIRST MI
 NICKNAME LAST SUFFIX
 GARY E.
 BURNS

OFFICE USE ONLY

Date Received
 RECEIVED
 OCT - 9 2012
 Margaret Hill
 Date Delivered or Postmarked

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX: APT / SUITE # CITY STATE ZIP CODE
 Box 3021
 Victoria, TX 77903

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION
 (361) 220-2284

6 CAMPAIGN TREASURER NAME

MS / MRS (MR) FIRST MI
 NICKNAME LAST SUFFIX
 John M.
 MINTS

7 CAMPAIGN TREASURER ADDRESS (residence or business)

STREET ADDRESS (NO PO BOX PLEASE) APT / SUITE # CITY STATE ZIP CODE
 77 Joe Beaver Ln.
 Victoria, TX 77905

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
 (361) 573-5855

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
 7 / 1 / 12 THROUGH 10 / 9 / 12

11 ELECTION

ELECTION DATE ELECTION TYPE
 Month Day Year Primary Runoff General Special

12 OFFICE

OFFICE HELD (if any)
 Co. Com. #3

13 OFFICE SOUGHT (if known)

Co. Com. #3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME GARY BURNS **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.

GENERAL

SPECIFIC

additional pages

COMMITTEE TYPE

COMMITTEE NAME

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)	\$ —
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,940 ²²
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 28,500

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.

Gary Burns
Signature of Candidate or Officeholder

AFFIX NOTARY SEAL ABOVE



Sworn to and subscribed before me, by the said GARY BURNS, this the 9 day of Oct., 20 12, to certify which, witness my hand and seal of office.

Anna M. Longoria Anna M. Longoria Notary Public
Signature of officer administering oath Printed name of officer administering oath 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: 2	2 FILER NAME GARY BURNS	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-19-12	5 Payee name Allied Advertising
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6 Amount (\$) \$1987.22	7 Payee address, City, State, Zip Code 3700 Blanco Rd San Antonio, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Exp.	(b) Description (If travel outside of Texas, complete Schedule T) Signs
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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 9-10-12	Payee name St. Joe / TC
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Amount (\$) \$138.00	Payee address, City, State, Zip Code Victoria, TX
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Exp.	Description (If travel outside of Texas, complete Schedule T) Program Ad
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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 9-12-12	Payee name Lamar
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Amount (\$) \$500	Payee address, City, State, Zip Code 4704 N. Mann Victoria, TX 77901
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Exp.	Description (If travel outside of Texas, complete Schedule T) Billboard
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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 9-20-12	Payee name Revista
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Amount (\$) \$317.00	Payee address, City, State, Zip Code Box 1412 Victoria TX 77902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Exp.	Description (If travel outside of Texas, complete Schedule T) Ad
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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: 2	2 FILER NAME GARY BURNS	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7-23-12	5 Payee name 1st Victoria
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6 Amount (\$) \$ 2.00	7 Payee address: City: State: Zip Code Box 1338 Victoria, TX 77902
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Banking	(b) Description (If travel outside of Texas, complete Schedule T) S.C.
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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 8-23	Payee name 1st Victoria
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Amount (\$) \$ 2.00	Payee address: City: State: Zip Code Box 1338 Victoria, TX 77902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) S.C.
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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 9-24-12	Payee name
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Amount (\$) \$ 2.00	Payee address: City: State: Zip Code Box 1338 Victoria, TX 77902
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) S.C.
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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	Payee name
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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