# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## OFFICE USE ONLY

- **Date Received:** APR 6, 2022
- **City Secretary:**
  - *Date Hand-delivered or Date Postmarked:* Jun 3, 2022
  - *Receipt #:* 1
  - *Amount:* $0

## CANDIDATE / OFFICEHOLDER NAME
- **MS / MRS / MR:**
- **FIRST:** MAR
- **MI:**
- **LAST:** LOFFREN
- **NICKNAME:**
- **SUFFIX:**

## CANDIDATE / OFFICEHOLDER MAILING ADDRESS
- **ADDRESS / PO BOX:**
- **APT / SUITE #:**
- **CITY:**
- **STATE:**
- **ZIP CODE:**

## CANDIDATE / OFFICEHOLDER PHONE
- **AREA CODE:**
- **PHONE NUMBER:**
- **EXTENSION:**

## CAMPAIGN TREASURER NAME
- **MS / MRS / MR:**
- **FIRST:** GUSTAF
- **MI:**
- **LAST:** KROOS
- **NICKNAME:**
- **SUFFIX:**

## CAMPAIGN TREASURER ADDRESS
- **STREET ADDRESS (NO PO BOX PLEASE):**
- **APT / SUITE #:**
- **CITY:**
- **STATE:**
- **ZIP CODE:**

## CAMPAIGN TREASURER PHONE
- **AREA CODE:**
- **PHONE NUMBER:**
- **EXTENSION:**

## REPORT TYPE
- **January 15**
- **30th Day before election**
- **Runoff**
- **July 15**
- **8th Day before election**
- **Exceed Modified Reporting Limit**
- **15th Day after campaign treasurer appointment**
- **Final Report (Attach C/OH - FR)**

## PERIOD COVERED
- **Month:** 1
- **Day:** 1
- **Year:** 2022

## ELECTION
- **ELECTION DATE:**
- **Month:**
- **Day:**
- **Year:**
- **ELECTION TYPE:**
- **Primary**
- **Runoff**
- **General**
- **Special**
- **Other Description:**

## OFFICE
- **OFFICE HELD (if any):**
- **SUPER DIST.**
- **CITY COUNCIL #6**
- **OFFICE SOUGHT (if known):**
- **SUPER DIST.**
- **CITY COUNCIL #6**

## NOTICE FROM POLITICAL COMMITTEE(S)
- **COMMITTEE TYPE:**
- **COMMITTEE NAME:**
  - **COMMITTEE ADDRESS:**
  - **COMMITTEE CAMPAIGN TREASURER NAME:**
  - **COMMITTEE CAMPAIGN TREASURER ADDRESS:**

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**GO TO PAGE 2**

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Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 8/17/2020
CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT

17 CONTRIBUTION TOTALS
1. TOTAL UNITIMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) $ 

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) $ 

3. TOTAL UNITIMIZED POLITICAL EXPENDITURE. $ 

4. TOTAL POLITICAL EXPENDITURES $ 

CONTRIBUTION BALANCE
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD $11,676.61 

OUTSTANDING LOAN TOTALS
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD $16,502.10 

18 SIGNATURE
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Please complete either option below:

APRIL HILBRICH
Notary Public, State of Texas
Comm Expires 12-30-2024
Notary ID 126782797

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Mark Laffren, this the 6th day of April

Signature of officer administering oath
Printed name of officer administering oath
Title of officer administering oath

(2) Unsworn Declaration

My name is __________________________, and my date of birth is __________________________.

My address is __________________________, __________________________, __________________________, __________________________, __________________________.

(street) (city) (state) (zip code) (country)

Executed in ____________ County, State of ____________, on the ________ day of ________, 20__.

(month) (year)

Signature of Candidate/Officeholder (Declarant)

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www.ethics.state.tx.us

Revised 8/17/2020
## SUBTOTALS - C/OH

**FORM C/OH**  
**COVER SHEET PG 3**

<table>
<thead>
<tr>
<th>21 SCHEDULE SUBTOTALS NAME OF SCHEDULE</th>
<th>SUBTOTAL AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. □ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>2. □ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>3. □ SCHEDULE B: PLEDGED CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>4. □ SCHEDULE E: LOANS</td>
<td>$</td>
</tr>
<tr>
<td>5. □ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$ 3500</td>
</tr>
<tr>
<td>6. □ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS</td>
<td>$</td>
</tr>
<tr>
<td>7. □ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>8. □ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD</td>
<td>$</td>
</tr>
<tr>
<td>9. □ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS</td>
<td>$</td>
</tr>
<tr>
<td>10. □ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH</td>
<td>$</td>
</tr>
<tr>
<td>11. □ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS</td>
<td>$</td>
</tr>
<tr>
<td>12. □ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER</td>
<td>$</td>
</tr>
</tbody>
</table>
# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

If the requested information is not applicable, **DO NOT** include this page in the report.

<table>
<thead>
<tr>
<th>2</th>
<th>FILER NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Date</td>
<td>5 Full name of contributor</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Principal occupation / Job title (See Instructions)</td>
<td>9 Employer (See Instructions)</td>
</tr>
<tr>
<td>Date</td>
<td>Full name of contributor</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Principal occupation / Job title (See Instructions)</td>
<td>Employer (See Instructions)</td>
</tr>
<tr>
<td>Date</td>
<td>Full name of contributor</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Principal occupation / Job title (See Instructions)</td>
<td>Employer (See Instructions)</td>
</tr>
</tbody>
</table>

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

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.
<table>
<thead>
<tr>
<th>Field</th>
<th>Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total pages Schedule E:</td>
</tr>
<tr>
<td>2</td>
<td>FILER NAME</td>
</tr>
<tr>
<td>3</td>
<td>Filer ID (Ethics Commission Filers)</td>
</tr>
<tr>
<td>4</td>
<td>TOTAL OF UNITEMIZED LOANS</td>
</tr>
<tr>
<td>5</td>
<td>Date of loan</td>
</tr>
<tr>
<td>6</td>
<td>Is lender a financial institution?</td>
</tr>
<tr>
<td>7</td>
<td>Name of lender</td>
</tr>
<tr>
<td>8</td>
<td>Lender address; City; State; Zip Code</td>
</tr>
<tr>
<td>9</td>
<td>Loan Amount ($)</td>
</tr>
<tr>
<td>10</td>
<td>Interest rate</td>
</tr>
<tr>
<td>11</td>
<td>Maturity date</td>
</tr>
<tr>
<td>12</td>
<td>Principal occupation / Job title (See Instructions)</td>
</tr>
<tr>
<td>13</td>
<td>Employer (See Instructions)</td>
</tr>
<tr>
<td>14</td>
<td>Description of Collateral</td>
</tr>
<tr>
<td>15</td>
<td>Check if personal funds were deposited into political account (See Instructions)</td>
</tr>
<tr>
<td>16</td>
<td>GUARANTOR INFORMATION</td>
</tr>
<tr>
<td>17</td>
<td>Name of guarantor</td>
</tr>
<tr>
<td>18</td>
<td>Guarantor address; City; State; Zip Code</td>
</tr>
<tr>
<td>19</td>
<td>Amount Guaranteed ($)</td>
</tr>
<tr>
<td>20</td>
<td>Principal Occupation (See Instructions)</td>
</tr>
<tr>
<td>21</td>
<td>Employer (See Instructions)</td>
</tr>
</tbody>
</table>

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1: 1
2. FILER NAME: MARV LOCHORE
3. Filer ID (Ethics Commission Filers)
4. Date: 3/28/2022
5. Payee name: THE UPS STORE PRINT SERVICES
6. Amount ($) 3500
7. Payee address: 8800 N. NAVARRO
   City: VICTORIA
   State: TX
   Zip Code: 77907
8. PURPOSE OF EXPENDITURE
   (a) Category (See Categories listed at the top of this schedule)
   (b) Description
      ADVERTISING
      HAND OUT CARDS
   (c) □ Check if travel outside of Texas. Complete Schedule T.
      □ Check if Austin, TX, officeholder living expense
9. Complete ONLY if direct expenditure to benefit C/OH
   Candidate / Officeholder name: Office sought
   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
□ Check if travel outside of Texas. Complete Schedule T.
□ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH
Candidate / Officeholder name: Office sought
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
□ Check if travel outside of Texas. Complete Schedule T.
□ Check if Austin, TX, officeholder living expense

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

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