

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

<b>The C/OH INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 ACCOUNT #</b> (Ethics Commission filers) 00000012	<b>2 PAGE #</b> 1 of 16
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR	FIRST DeWayne	MI
	NICKNAME	LAST Lofton	SUFFIX
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	P.O. Box 14651 Austin, TX 78761		
<input type="checkbox"/> Change of Address		Date Received	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR	FIRST Hoover	MI
	NICKNAME	LAST Alexander	SUFFIX
<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	2002 Manor Rd. Austin, TX 78722		
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	474-5454	
<b>8 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" 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)		
<b>9 PERIOD COVERED</b>	Month    Day    Year		
	05/07/2014    THROUGH    06/30/2014		
<b>10 ELECTION</b>	ELECTION DATE		ELECTION TYPE
	Month    Day    Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	11/04/2014		
<b>11 OFFICE</b>	OFFICE HELD (if any)		
	<b>12 OFFICE SOUGHT (if known)</b> Austin City Council District 1		

2014 JUL 15 PM 4:39 RECEIVED

AUSTIN CITY CLERK

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Lofton, DeWayne

14 ACCOUNT # (Ethics Commission filers)  
00000012

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,235.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,215.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	38.12
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4. TOTAL POLITICAL EXPENDITURES	\$	1,050.60
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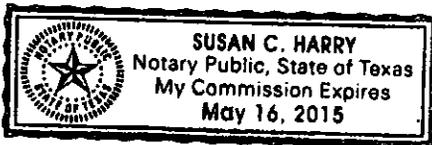
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	20,327.13
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,100.00
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17 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.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said DeWayne Lofton, this the 15<sup>th</sup> day of July, 2014, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Susan Harry  
Print name of officer administering oath

Notary  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/11 Report: 3/16	
2 FILER NAME Lofton, DeWayne		3 ACCOUNT # (Ethics Commission filers) 00000012	
4 Date  06/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adams, Elisabeth  6 Contributor address; City; State; Zip Code 1904 Wayward Sun Dr Austin, TX 78754-5401	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adamson, Reshana  Contributor address; City; State; Zip Code 2801 Beach Plum Cv Pflugerville, TX 78660-7769	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, Hoover Jr.  Contributor address; City; State; Zip Code 1303 Comal St Austin, TX 78702-1109	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) restaurant owner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Hoovers Restaurant	
Date  06/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arambula, Belinda  Contributor address; City; State; Zip Code 1810 Ridgemont Dr Austin, TX 78723-2638	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  05/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong-Ferguson, Pamela  Contributor address; City; State; Zip Code PO Box 188 Hubbard, TX 76648-0188	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/11 Report: 4/16

**2** FILER NAME Lofton, DeWayne

**3** ACCOUNT # (Ethics Commission filers)  
00000012

**4** Date 06/07/2014 **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Arteaga, Annabelle

**7** Amount of contribution (\$) **8** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
PO Box 684976  
Austin, TX 78768-4976

\$250.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)  
Consultant

**10** Employer (See Instructions)  
A3 Consulting

Date 06/07/2014 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Arteaga, Annabelle

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
PO Box 684976  
Austin, TX 78768-4976

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
A3 Consulting

Date 06/23/2014 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Brown, David

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
4601 Bundyhill Dr  
Austin, TX 78723-6111

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date 05/10/2014 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Brown, Matthew

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
4902 Pecan Springs Rd  
Austin, TX 78723-6027

\$200.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Sr HR Business Partner

Employer (See Instructions)  
Emerson Process Management

Date 06/12/2014 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Channer, Delroy

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1212 W Ben White Blvd  
Apt 516  
Austin, TX 78704-7290

\$320.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Porter

Employer (See Instructions)  
Enterprise Rent a Car



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 4/11 Report: 6/16	
<b>2</b> FILER NAME Lofton, DeWayne		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000012	
<b>4</b> Date  06/28/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easley, Larry  <b>6</b> Contributor address; City; State; Zip Code 9418 Stockton Drive College Station, TX 77845	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  06/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easley, Mark  Contributor address; City; State; Zip Code 808 Evergreen Farm Dr Temple, TX 76502-5357	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easley, Ruth Ann  Contributor address; City; State; Zip Code 6600 Ed Bluestein Blvd Apt 314 Austin, TX 78723-3973	Amount of contribution (\$)  \$225.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) City of Austin	
Date  06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis, Luke  Contributor address; City; State; Zip Code 1303 Lorrain St Austin, TX 78703-4020	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Johns Marrs Ellis Hodge LLP	
Date  06/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellis, Penni  Contributor address; City; State; Zip Code 1303 Lorrain St Austin, TX 78703-4020	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/11 Report: 7/16	
2 FILER NAME Lofton, DeWayne		3 ACCOUNT # (Ethics Commission filers) 00000012	
4 Date  06/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Escabano, Joe  6 Contributor address; City; State; Zip Code 1509 Windsong Trl Round Rock, TX 78664-7045	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Govea, JoAnn  Contributor address; City; State; Zip Code 333 E Slaughter Ln 333 E. Slaughter Ln Austin, TX 78744-2200	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Joseph  Contributor address; City; State; Zip Code 1135 Gunter St Austin, TX 78702-3169	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Driver		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Austin Cab	
Date  06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Mary  Contributor address; City; State; Zip Code 2520 26th Ave North Birmingham, AL 35234-1219	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Moses  Contributor address; City; State; Zip Code 2520 26th Ave North Birmingham, AL 35234-1219	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/11 Report: 8/16	
2 FILER NAME Lofton, DeWayne		3 ACCOUNT # (Ethics Commission filers) 00000012	
4 Date  06/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holcomb, Amy  6 Contributor address; City; State; Zip Code 12005 Pecan Gate Way Manor, TX 78653-3976	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  05/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jordan, Dirk  Contributor address; City; State; Zip Code 1702 Hartford Rd Austin, TX 78703-3316	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jordan Law Firm	
Date  06/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Karin B Photography  Contributor address; City; State; Zip Code 7704 Huddleston Lane Austin, TX 78745	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable) photography    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lee, Wan-Chien  Contributor address; City; State; Zip Code 3202 Mossrock Dr Apt 102 Austin, TX 78757-6826	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) reporter/translator/writer		Employer (See Instructions) Epoch Times	
Date  06/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Willie  Contributor address; City; State; Zip Code 5708 Springdale Rd Austin, TX 78723-3661	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Former Council Memeber		Employer (See Instructions) City of Austin	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 7/11 Report: 9/16	
<b>2</b> FILER NAME Lofton, DeWayne		<b>3</b> ACCOUNT # (Ethics Commission filers) 00000012	
<b>4</b> Date  06/01/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lofton, Daniel  <b>6</b> Contributor address; City; State; Zip Code 8007 Forbsdale Dr Austin, TX 78747-4014	<b>7</b> Amount of contribution (\$)  \$350.00	<b>8</b> In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions) Project Coordinator		<b>10</b> Employer (See Instructions) COA	
Date  06/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lofton, Erica  Contributor address; City; State; Zip Code 8007 Forbsdale Dr Austin, TX 78747-4014	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Proposal Manager		Employer (See Instructions) FNC Research	
Date  06/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lofton, Michael  Contributor address; City; State; Zip Code 10119 Willfield Dr Austin, TX 78753-4043	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lofton, Michael  Contributor address; City; State; Zip Code 10119 Willfield Dr Austin, TX 78753-4043	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lucio, Tonia  Contributor address; City; State; Zip Code 1909 Canterbury St Austin, TX 78702-5506	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 9/11 Report: 11/16	
<b>2</b> FILER NAME    Lofton, DeWayne		<b>3</b> ACCOUNT #    (Ethics Commission filers) 00000012	
<b>4</b> Date  06/30/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moseley, William  <b>6</b> Contributor address;    City; State; Zip Code PO Box 6474 Austin, TX 78762-6474	<b>7</b> Amount of contribution (\$)  \$50.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  06/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orozco, Sylvia  Contributor address;    City; State; Zip Code PO Box 2273 Austin, TX 78768-2273	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Owens, Ronald  Contributor address;    City; State; Zip Code 3401 Norwood Hill Rd Austin, TX 78723-5433	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Adjuster		Employer (See Instructions) State Farm	
Date  06/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perrault, Bryan  Contributor address;    City; State; Zip Code 507 Sabine St Apt 806 Austin, TX 78701-4185	Amount of contribution (\$)  \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pleasant, Rae Lynn  Contributor address;    City; State; Zip Code 8532 N Lamar Blvd Apt 5138 Austin, TX 78753-5551	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 10/11 Report: 12/16	
<b>2</b> FILER NAME    Lofton, DeWayne		<b>3</b> ACCOUNT #    (Ethics Commission filers) 00000012	
<b>4</b> Date  05/20/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Brian Jr.  ..... <b>6</b> Contributor address;    City; State; Zip Code 1620 Pavelich Pass Austin, TX 78748-3055	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)           (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
Date  06/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robinson, Brian Jr.  ..... Contributor address;    City; State; Zip Code 1620 Pavelich Pass Austin, TX 78748-3055	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)           (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Stephen  ..... Contributor address;    City; State; Zip Code 4111 Tablerock Dr Austin, TX 78731-1339	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)           (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  06/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sampson, Arthur  ..... Contributor address;    City; State; Zip Code 5710 Sandhurst Cir Austin, TX 78723-3532	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)           (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Inspector		Employer (See Instructions) City of Austin	
Date  06/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sweet, Christopher  ..... Contributor address;    City; State; Zip Code 1310 Karen Ave Austin, TX 78757-3018	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)           (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Oxford Commercial	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 11/11 Report: 13/16

**2** FILER NAME Lofton, DeWayne

**3** ACCOUNT # (Ethics Commission filers)  
00000012

**4** Date **5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
06/28/2014 Williams, Charles

**7** Amount of contribution (\$) **8** In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
8700 Brodie Ln  
Apt 727  
Austin, TX 78745-7934

\$60.00

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
06/30/2014 Wilson, Mike

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
10810 Spicewood Pkwy  
Austin, TX 78750-3310

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Land Planner

Employer (See Instructions)  
Garrett-Ihnen Civil Engineers

Date Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
06/30/2014 Yarbrough, Monroe Jr.

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1156 Nickols Ave  
Austin, TX 78721-2051

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

- |                     |                               |                                  |  |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gifts/Awards/Memorial 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> PAGE # Schedule: 1/1 Report: 15/16		<b>2</b> FILER NAME Lofton, DeWayne		<b>3</b> ACCOUNT # (TEC filers) 00000012	
<b>4</b> Date 06/25/2014		<b>5</b> Payee name YStrategy, Inc.			
<b>6</b> Amount (\$) \$700.00		<b>7</b> Payee address City: State: Zip Code 603 W 13th Street Sute 2G Austin, TX 78701			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website and graphic design services	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/1 Report: 16/16		<b>2 FILER NAME</b> Lofton, DeWayne		<b>3 ACCOUNT # (TEC filers)</b> 00000012	
<b>4 Date</b> 06/24/2014		<b>5 Payee name</b> FedEx Office			
<b>6 Amount (\$)</b> \$192.41 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>7 Payee address</b> City; State; Zip Code 327 Congress Ave. Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(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> <input type="checkbox"/> printing	
<b>Date</b> 06/30/2014		<b>Payee name</b> MiJo's Tex-Mex & Cantina			
<b>Amount (\$)</b> \$94.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 1000 East 11th St. Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Food for event	
<b>Date</b> 06/21/2014		<b>Payee name</b> Postmaster			
<b>Amount (\$)</b> \$15.28 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 8225 Cross Park Dr. Austin, TX 78710			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> postage	
<b>Date</b> 06/05/2014		<b>Payee name</b> Walmart			
<b>Amount (\$)</b> \$10.79 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>Payee address</b> City; State; Zip Code 1030 Norwood Park Blvd. Austin, TX 78753			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> office supplies	