

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

5

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Marie

NICKNAME

LAST

SUFFIX

Bloemer

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

708 Huff St, Taylor, TX 76574

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(737)

216-3376

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Todd

NICKNAME

LAST

SUFFIX

Rugeroni

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

1307 Thompson St, Taylor, TX 76574

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

468-5534

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 Modified
Reporting Limit

☐

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

4

/

25

/

25

THROUGH

Month

Day

Year

05

/

28

/

25

11 ELECTION

ELECTION DATE

Month

Day

Year

06

/

07

/

25

ELECTION TYPE

☐

Primary

☒

Runoff

☐

Other
Description

☐

General

☐

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Taylor City Council District 4

14 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

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Bloemer, Marie

16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION
TOTALS

1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)

\$ 170

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

\$ 1206.96

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE

\$ 184.43

4. TOTAL POLITICAL EXPENDITURES

\$ 184.43

CONTRIBUTION
BALANCE

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

\$ 1400.47

OUTSTANDING
LOAN TOTALS

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

\$

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.

Marie Bloemer

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____,
20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Marie Bloemer, and my date of birth is [REDACTED]

My address is 708 Huff St, Taylor, TX, 76574, United States.

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

Executed in Williamson County, State of Texas, on the 28th day of April, 2025.

(month) (year)

Marie Bloemer

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Marie Bloemer

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 1036.96

2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. SCHEDULE E: LOANS

\$

5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED
TO FILER

\$

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 2
2 FILER NAME Bloemer, Marie			3 Filer ID (Ethics Commission Filers)
4 Date 05/05/2025	5 Full name of contributor out-of-state PAC (ID#:) Edgar Mitchell 6 Contributor address; City; State; Zip Code Taylor, TX 76574		7 Amount of contribution (\$) 245.15
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date 05/05/2025	Full name of contributor out-of-state PAC (ID#:) Dan Cabaniss Contributor address; City; State; Zip Code Austin, TX 78704		Amount of contribution (\$) 147.05
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/13/2025	Full name of contributor out-of-state PAC (ID#:) Mark Nibbelink Contributor address; City; State; Zip Code Austin, TX 78703		Amount of contribution (\$) 400
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/19/2025	Full name of contributor out-of-state PAC (ID#:) Robert Hensley Contributor address; City; State; Zip Code Taylor, TX 76574		Amount of contribution (\$) 24.43
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The instruction Guide explains how to complete this form.				1 Total pages Schedule A1: 2	
2 FILER NAME Bloemer, Marie				3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/2025	5 Full name of contributor Louise McGinley			7 Amount of contribution (\$) 24.43	
		out-of-state PAC (ID#: _____)			
		6 Contributor address; City; State; Zip Code [REDACTED] Taylor 76574			
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
Date 05/05/2025	Full name of contributor Paul Lee			Amount of contribution (\$) 48.95	
		out-of-state PAC (ID#: _____)			
		Contributor address; City; State; Zip Code [REDACTED] Taylor, TX 76574			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/08/2025	Full name of contributor Mia Johns			Amount of contribution (\$) 98	
		out-of-state PAC (ID#: _____)			
		Contributor address; City; State; Zip Code [REDACTED] Taylor, TX 76574			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 05/17/2025	Full name of contributor Christina Lewis			Amount of contribution (\$) 48.95	
		out-of-state PAC (ID#: _____)			
		Contributor address; City; State; Zip Code [REDACTED] Taylor, TX 76574			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.					