

City Clerk's Office
749 Main Street, Louisville, CO 80027
303.335.4574
GKline@LouisvilleCO.gov

REPORT OF CONTRIBUTIONS AND EXPENDITURES
(§1-45-108, C.R.S.)

Full Name of Committee/Person: _____
As shown on Registration

Full Address of Committee/Person: _____

Name/Address of Financial Institution: _____

Type of Report

- ☐ Regularly Scheduled Filing ☐ Amended Filing for report filed on: _____
☐ Termination Report (Termination Report Must Have a Monetary Balance of Zero in Line 5)

Reporting Period Covered: _____ through: _____

Declared Total Spending (if applicable): \$ _____

TOTALS DETAILED SUMMARY PAGE

- | | |
|---|----------|
| 1. Funds on Hand at the Beginning of Reporting Period (monetary only) | \$ _____ |
| 2. Total Monetary Contributions (line 11) | \$ _____ |
| 3. Total Monetary Contributions & Beginning Amount (line 1 + line 2) | \$ _____ |
| 4. Total Monetary Expenditure (line 19) | \$ _____ |
| 5. Funds on Hand at the End of Reporting Period (monetary) (line 3 –line 4) | \$ _____ |

Authorization (must be completed by either the Registered Agent or the Candidate). *I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.*

The City's Election Official may impose a penalty of \$50.00 per day for each day that a report is filed late.

Print Registered Agent's Name: _____

☐ By checking this box, I am confirming that my typed name below is my legal name and serves as my electronic signature. I agree that my electronic signature is the legal equivalent of my manual signature on this document.

Signature: _____ Date: _____

Print Candidate Name: _____

☐ By checking this box, I am confirming that my typed name below is my legal name and serves as my electronic signature. I agree that my electronic signature is the legal equivalent of my manual signature on this document.

Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: _____

Current Reporting Period: _____ through _____

Funds on hand at the beginning of reporting period (Monetary Only)	\$ _____
6. Itemized Contributions \$20 or More (Please list on Schedule "A")	\$ _____
7. Total of Non-Itemized Contributions (\$19.99 or less)	\$ _____
8. Loans Received (Please list on Schedule "C")	\$ _____
9. Total of Other Receipts (Interest, etc.)	\$ _____
10. Returned Expenditures (From recipient) (Please list on Schedule "D")	\$ _____
11. Total Monetary Contributions (Total of lines 6 – 10)	\$ _____
12. Total Non-Monetary Contributions (Statement of Non-Monetary Contributions)	\$ _____
13. Total Contributions (Line 11 + line 12)	\$ _____
14. Itemized Expenditures \$20 or More (Please list on Schedule "B")	\$ _____
15. Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ _____
16. Loan Repayments Made (Please list on Schedule "C")	\$ _____
17. Returned Contributions (To donor) (Please list on Schedule "D")	\$ _____
18. Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee)	\$ _____

19. Total Monetary Expenditures (Total of Lines 14 -17)	\$ _____
20. Total Spending (Line 18 + line 19)	\$ _____