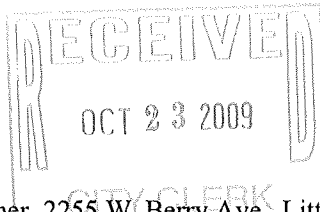


City of Littleton

WEN



Space Below For Office Use Only

➤ Candidates file this form with City Clerk Wendy Heffner, 2255 W. Berry Ave., Littleton, CO 80165

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

Full Name of Committee/Person:	Advertisement 2009 <small>As Shown On Registration</small>
Address of Committee/Person:	7094 S. Costilla St
City, State & Zip Code:	Littleton CO 80120
Committee Type:	Political
Name and Address of Financial Institution:	Public Service Credit Union 5800 S Broadway Littleton CO 80121

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. This amends previous report filed on (date)
Submit changes or new information ONLY
- Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 10/19/09 Date Through 10/23/09 Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ -0-
2	Total Monetary Contributions (line 11)	\$ 1400.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1400.00
4	Total Monetary Expenditures (line 19)	\$ 1400.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ -0-

The City Clerk shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)] [City of Littleton Ordinance 7, Series 2007]

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.

Print Registered Agent's Name: Frank F. Atwood
 Registered Agent's Signature: *Frank F. Atwood* Date: 10/23/09
 Print Candidate Name: _____

DETAILED SUMMARY

Candidates

Signature

Date:

10/23/09

Full Name of Committee/Person:

Advertisement 2009

Current Reporting Period:

10/19/09

Through

10/23/09

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	<u>0-</u>
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	<u>1,400⁰⁰</u>
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	<u>0-</u>
8	Loans Received (Please list on Schedule "C")	\$	<u>0-</u>
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	<u>0-</u>
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	<u>300⁰⁰ - 0-</u>
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	<u>1,100⁰⁰</u>
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	<u>0-</u>
13	Total Contributions (Line 11 + line 12)	\$	<u>1,100⁰⁰</u>
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	<u>1,100⁰⁰</u>
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	<u>0-</u>
16	Loan Repayments Made (Please list on Schedule "C")	\$	<u>0-</u>
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	<u>300⁰⁰</u>
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	<u>0-</u>
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	<u>1,400⁰⁰</u>
20	Total Spending (Line 18 + line 19)	\$	<u>1,400⁰⁰</u>

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Advertisement 2009

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Atwood, Frank</u>
2. Contribution Amt. \$ <u>200.00</u>	5. Address: <u>7094 S. Castilla St</u>
3. Aggregate Amt. * \$ <u>200.00</u>	6. City/State/Zip: <u>Littleton CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Shwan David</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>8025 S. Logan Pl</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Littleton, CO 80122</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Mitchell, David</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>1800 W Ridge Rd</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Fraser Charles</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6757 Southridge Ln</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Littleton CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Advertisement 2009

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Lamb Gery</u>
2. Contribution Amt. \$ <u>400</u>	5. Address: <u>2784 W Peakview Ct</u>
3. Aggregate Amt. * \$ <u>400</u>	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired.</u>
	9. Occupation (if applicable, mandatory): <u>N/A.</u>

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Du Bose Jim</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>6877 S. Prince Cir</u>
3. Aggregate Amt. * \$ <u>100</u>	6. City/State/Zip: <u>Littleton CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired.</u>
	9. Occupation (if applicable, mandatory): <u>N/A</u>

1. Date Accepted <u>10/19/09</u>	4. Name (Last, First): <u>Tucker Terresa</u>
2. Contribution Amt. \$ <u>100</u>	5. Address: <u>18 Bradbury Ln</u>
3. Aggregate Amt. * \$ <u>100</u>	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>House wife</u>
	9. Occupation (if applicable, mandatory): <u>N/A</u>

1. Date Accepted <u>10/20/09</u>	4. Name (Last, First): <u>Atwood Frank</u>
2. Contribution Amt. \$ <u>3600</u>	5. Address: <u>7094 S Castilla St</u>
3. Aggregate Amt. * \$ <u>5600</u>	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>retired</u>
	9. Occupation (if applicable, mandatory): <u>N/A.</u>

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Advertisement 2009

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted <u>10/23/09</u>	4. Name (Last, First): <u>Grogan Matt</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>5224 Camargo Rd</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Littleton CO 80123</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired</u>

1. Date Accepted <u>10/23/09</u>	4. Name (Last, First): <u>Brazeczek Carol</u>
2. Contribution Amt. \$ <u>60.00</u>	5. Address: <u>2000 W Acapahoe Rd</u>
3. Aggregate Amt. * \$ <u>60.00</u>	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired.</u>

1. Date Accepted <u>10/23/09</u>	4. Name (Last, First): <u>Bolt Marty</u>
2. Contribution Amt. \$ <u>100.00</u>	5. Address: <u>6187 S Windermere Way</u>
3. Aggregate Amt. * \$ <u>100.00</u>	6. City/State/Zip: <u>Littleton CO 80120</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired.</u>

1. Date Accepted <u>10/23/09</u>	4. Name (Last, First): <u>Schields, Dave</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>5635 S Crocker St</u>
3. Aggregate Amt. * \$ <u>20.00</u>	6. City/State/Zip: <u>Littleton CO</u>
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): <u>retired.</u>

Schedule A – Itemized Contributions Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Advertisement 2009

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/23/09	4. Name (Last, First): Johnson, E Wood
2. <u>Contribution Amt.</u> \$ 20 ⁰⁰	5. Address: 231 W. Fremont Ave
3. <u>Aggregate Amt. *</u> \$ 20 ⁰⁰	6. City/State/Zip: Littleton, CO 80120
<input checked="" type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

Schedule B – Itemized Expenditures Statement (\$20 or more)

[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Advertisement 2009

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/20/09</u>	4. Name: <u>Litteton Evansner</u>
2. <u>Amount</u> \$ <u>1100</u>	5. Address: <u>Post Office Box 777</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Litteton, CO 80160</u>
	7. Purpose of Expenditure: <u>Advertisement 2009</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____
	<input type="checkbox"/> Check box if Electioneering Communication

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Advertisement 2009

Returned Contributions

(Previously reported on Schedule A – Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/20/09</u>	4. Name (Last, First): <u>Atwood Frank</u>
2. <u>Date Returned</u> <u>10/23/09</u>	5. Address: <u>7094'S. Costello St</u>
3. <u>Amount</u> <u>\$ 3000</u>	6. City/State/Zip: <u>Littleton CO</u>
	7. Purpose: <u>Close out committee.</u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$ _____	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$ _____	7. Comment (Optional): _____

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$ _____	7. Comment (Optional): _____