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SEP 25 2017
CITY CLERK

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

Full Name of Committee/Person: Patrick Driscoll
As Shown On Registration

Address of Committee/Person: 5836 S. Lupine Dr

City, State & Zip Code: Littleton, CO 80123

Committee Type:

Name and Address of Financial Institution: Wells Fargo 5050 S. Federal Blvd

Email Address: Englewood, CO 80110

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: Date Through 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)	\$ <u>2,275.00</u>
2	Total Monetary Contributions (line 11)	\$ <u>2,275.00</u>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ <u>4,550.00</u>
4	Total Monetary Expenditures (line 19)	\$ <u>35.00</u>
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ <u>4,515.00</u>

The appropriate officer (city clerk) shall impose a penalty of \$50 per day for each day that a report is filed late. (Littleton Municipal Code 1-7-7)

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: _____

Registered Agent's Signature: Patrick Driscoll Date: _____

Print Candidate Name: _____

Candidates Signature: Patrick Driscoll Date: 9/25/17

DETAILED SUMMARY

Full Name of Committee/Person: Patrick Driscoll

Current Reporting Period: 9/21/17

Through 9/26/17

	Funds on hand at the beginning of reporting period (Monetary Only)	\$
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 2,275.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$
8	Loans Received (Please list on Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 2,275
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	\$ 2,275
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 35.00
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 & Political Parties only)	\$ 115.00 PD
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 35.00
20	Total Spending (Line 18 + line 19)	\$ 35.00

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

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

Full Name of Committee/Person: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/21/17	4. Name (Last, First): <u>Murib, Khaled</u>
2. <u>Contribution Amt.</u> \$ <u>750.00</u>	5. Address: <u>7600 Landmark Way #504</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Greenwood Village, CO 80111</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check #1106</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>Self Employed</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Business owner</u>

1. <u>Date Accepted</u> 9/21/17	4. Name (Last, First): <u>Pat Donahay, Pat</u>
2. <u>Contribution Amt.</u> \$ <u>750.00</u>	5. Address: <u>1600 West Mineral Ave</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check #2829</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>PDA Audio</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>owner.</u>

1. <u>Date Accepted</u> 9-21-17	4. Name (Last, First): <u>Renner, Lee</u>
2. <u>Contribution Amt.</u> \$ <u>750.00</u>	5. Address: <u>6623 S. Prescott Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check #276</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 8-16-17	4. Name (Last, First): <u>Driscoll, Patrick</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: <u>5836 S. Lupine Dr</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

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

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

Full Name of Committee/Person: Patrick Driscoll

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 9/15/17	4. Name: <u>marissa</u> <u>a Littleton Votes Registration</u>
2. <u>Amount</u> \$ <u>35⁰⁰</u>	5. Address: <u>5334 S. Prince ST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Littleton, CO 80120</u>
	7. Purpose of Expenditure: <u>Voter Registration Records</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