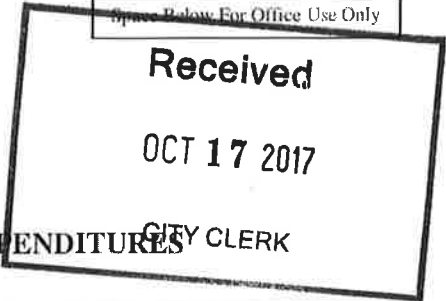


Colorado Secretary of State
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 www.sos.state.co.us



Space Below For Office Use Only



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

Full Name of Committee/Person:	Clark for Council
As Shown On Registration	
Address of Committee/Person:	2454 Houston Waring Cir
City, State & Zip Code:	Littleton, CO 80120
Committee Type:	Candidate
Name and Address of Financial Institution:	Public Service Credit Union

SOS ID NUMBER (state and county committees):

Type of Report

email doug@clarkforCouncil.org

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: Through
Date 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)	\$ 2371.63
2	Total Monetary Contributions (line 11)	\$ 2250.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 4621.63
4	Total Monetary Expenditures (line 19)	\$ 1286.59
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 3335.04

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
 [Art. XXVIII Sec. 10(2)(a)]

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: Doug Clark
 Registered Agent's Signature: [Signature] Date: 10/17/2017
 Print Candidate Name: Doug Clark
 Candidates Signature: [Signature] Date: 10/17/2017

DETAILED SUMMARY

Full Name of Committee/Person: Clark for Council

Current Reporting Period: Sep 22 2017 Through Oct 12 2017

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	2371.63
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	2250 ⁰⁰
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	ϕ
8	Loans Received (Please list on Schedule "C")	\$	ϕ
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	ϕ
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	ϕ
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	2250 ⁰⁰
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	ϕ
13	Total Contributions (Line 11 + line 12)	\$	2250 ⁰⁰
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	1286.59
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	ϕ
16	Loan Repayments Made (Please list on Schedule "C")	\$	ϕ
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	ϕ
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	ϕ
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	1286.59
20	Total Spending (Line 18 + line 19)	\$	1286.59

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

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

Full Name of Committee/Person: Clark for Council

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Watson John</u>
2. <u>Contribution Amt.</u> \$ 100 ⁰⁰	5. Address: <u>4500 W Hinsdale ave</u>
3. <u>Aggregate Amt.</u> * \$	6. City/State/Zip: <u>Littleton CO 80128</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</u>

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Dunahay Pat</u>
2. <u>Contribution Amt.</u> \$ 500 ⁰⁰	5. Address: <u>1600 W 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: _____
	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> 9/29/2017	4. Name (Last, First): <u>Trujillo Jose</u>
2. <u>Contribution Amt.</u> \$ 100 ⁰⁰	5. Address: <u>5574 S Huron St</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: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</u>

1. <u>Date Accepted</u> 9/29/2017	4. Name (Last, First): <u>Trujillo Phyllis</u>
2. <u>Contribution Amt.</u> \$ 100 ⁰⁰	5. Address: <u>5574 S Huron St</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: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Clark for Council

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Sacry Leisa</u>
2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u>	5. Address: <u>PO Box 1057</u>
3. <u>Aggregate Amt.</u> * \$	6. City/State/Zip: <u>Englewood CO 80150</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Colorado Association School Execs</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>Admin Assistant</u>

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Bolt Martin</u>
2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u>	5. Address: <u>6187 S Windermere 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: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</u>

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Munib, Khaled</u>
2. <u>Contribution Amt.</u> \$ <u>500⁰⁰</u>	5. Address: <u>7600 Landmark way unit 504</u>
3. <u>Aggregate Amt.</u> * \$	6. City/State/Zip: <u>Greenwood Village</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>business owner</u>

1. <u>Date Accepted</u> 30 10/12/2017	4. Name (Last, First): <u>Szilard Paula</u>
2. <u>Contribution Amt.</u> \$ <u>50⁰⁰</u>	5. Address: <u>6217 S Hill St</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: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

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

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

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 9/28/2017	4. Name: <u>Arapahoe County</u>
2. <u>Amount</u> \$ <u>50⁰⁰</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</u>
	7. Purpose of Expenditure: <u>water data</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/2/2017	4. Name: <u>Littleton Print & Copy</u>
2. <u>Amount</u> \$ <u>84²³</u>	5. Address: <u>1449 W Littleton Blvd</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>printing</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/6/2017	4. Name: <u>Littleton Print & Copy</u>
2. <u>Amount</u> \$ <u>286⁹⁹</u>	5. Address: <u>1449 W Littleton Blvd</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>printing</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/29/2017	4. Name: <u>Brenda Stokes</u>
2. <u>Amount</u> \$ <u>864⁰⁰</u>	5. Address: <u>5949 S Bemis 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>printing</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

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> 10/12/2017	4. Name (Last, First): <u>Wood Clinton</u>
2. <u>Contribution Amt.</u> \$ <u>500⁰⁹</u>	5. Address: <u>6562 E Cornell ave</u>
3. <u>Aggregate Amt.</u> * \$	6. City/State/Zip: <u>Denver CO 80224</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>Self</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>insurance agent</u>

1. <u>Date Accepted</u> 10/12/2017	4. Name (Last, First): <u>Rolling John</u>
2. <u>Contribution Amt.</u> \$ <u>200⁰⁹</u>	5. Address: <u>Po Box 250</u>
3. <u>Aggregate Amt.</u> * \$	6. City/State/Zip: <u>Littleton CO 80160</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>retired</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</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>): _____

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