

REPORT OF CONTRIBUTIONS & EXPENDITURES

Full Name of Committee / Person:	Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer
Address of Committee / Person:	576 E. Hinsdale Ave.
City, State & Zip Code:	Littleton, Colorado 80122
Committee Type:	Candidate Committee
Name & Address of Financial Institution:	Colorado Business Bank, 1600 W. Mineral, Littleton, Colorado 80120

SOS ID Number:

Type of Report

<input checked="" type="checkbox"/>	Regularly Scheduled Filing	
<input type="checkbox"/>	Amended Filing - This amends Previous report filed on:	<input style="width: 300px;" type="text"/>
<input checked="" type="checkbox"/>	Termination Report	
<input type="checkbox"/>	Check this box if this report contains electioneering communications information.	

Reporting Period Covered: Through


Declared Total Spending:

		Totals Detailed Summary Page	
1	Funds on Hand at the Beginning of Reporting Period	✓	\$ 861.87
2	Total Monetary Contributions		\$ -
3	Total of Monetary Contributions & Beginning Amount		\$ 861.87
4	Total Monetary Expenditures		\$ 861.87
5	Funds on Hand at the End of Reporting Period	✓	\$ -

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: Bruce Stahlman

Registered Agent's Signature:  Date: 7 DEC. 2017

Print Candidate's Name: Phil Cemanec

Candidate's Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

Current Reporting Period: Through

Funds on Hand at the Beginning of Reporting Period (Monetary Only)		\$ 861.87
6	Itemized Contributions \$20 or More (See Schedule A)	\$ -
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ -
8	Loans Received (See Schedule C)	\$ -
9	Total of Other Receipts	\$ -
10	Returned Expenditures (from Recipient) (See Schedule D)	\$ -
11	Total Monetary Contributions (Total of Lines 6 - 10)	\$ -
12	Total Non-Monetary Contributions (From Stmt. of Non-Monetary Contrib.)	\$ -
13	Total Contributions (Line 11 + Line 12)	\$ -
14	Itemized Expenditures \$20 or More (See Schedule B)	\$ 152.78
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ -
16	Loan Repayments made (See Schedule C)	\$ 709.09
17	Returned Contributions (To Donor) (See Schedule D)	\$ -
18	Total Coordinated Non-Monetary Expenditures (Cand/CandCom/PolPty)	\$ -
19	Total Monetary Expenditures (Total of Lines 14 - 17)	\$ 861.87
20	Total Spending (Line 18 + Line 19)	\$ 861.87

SCHEDULE A - ITEMIZED CONTRIBUTIONS STATEMENT (\$20 or MORE)

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

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

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

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

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

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

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

SCHEDULE A - ITEMIZED CONTRIBUTIONS STATEMENT (\$20 or MORE)

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

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

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

<u>Total Contributions</u>				
\$ -				

SCHEDULE B - ITEMIZED EXPENDITURES STATEMENT (\$20 or MORE)

Full Name of Committee / Person:

Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

1	<u>Date Expended</u>	4	Name:	<u>Signs on the Cheap.com</u>
	<u>13-Oct-17</u>	5	Address:	<u>11525A Stonehollow Dr., Ste. 100</u>
2	<u>Amount</u>	6	City/State/Zip:	<u>Austin, TX 78758</u>
	<u>\$ 152.78</u>	7	Description:	<u>Check</u>
3	Recipient is:	8	Purpose:	<u>Yard Signs</u>
<input type="checkbox"/>	Committee			
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication	

1	<u>Date Expended</u>	4	Name:	
		5	Address:	
2	<u>Amount</u>	6	City/State/Zip:	
	<u>\$ -</u>	7	Description:	
3	Recipient is:	8	Purpose:	
<input type="checkbox"/>	Committee			
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication	

1	<u>Date Expended</u>	4	Name:	
		5	Address:	
2	<u>Amount</u>	6	City/State/Zip:	
	<u>\$ -</u>	7	Description:	
3	Recipient is:	8	Purpose:	
<input type="checkbox"/>	Committee			
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication	

1	<u>Date Expended</u>	4	Name:	
		5	Address:	
2	<u>Amount</u>	6	City/State/Zip:	
	<u>\$ -</u>	7	Description:	
3	Recipient is:	8	Purpose:	
<input type="checkbox"/>	Committee			
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication	

SCHEDULE B - ITEMIZED EXPENDITURES STATEMENT (\$20 or MORE)

Full Name of Committee / Person:

Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

1	<u>Date Expended</u>	4	Name: _____
		5	Address: _____
2	<u>Amount</u>	6	City/State/Zip: _____
	\$ -	7	Description: _____
3	Recipient is:	8	Purpose: _____
<input type="checkbox"/>	Committee		
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication

1	<u>Date Expended</u>	4	Name: _____
		5	Address: _____
2	<u>Amount</u>	6	City/State/Zip: _____
	\$ -	7	Description: _____
3	Recipient is:	8	Purpose: _____
<input type="checkbox"/>	Committee		
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication

1	<u>Date Expended</u>	4	Name: _____
		5	Address: _____
2	<u>Amount</u>	6	City/State/Zip: _____
	\$ -	7	Description: _____
3	Recipient is:	8	Purpose: _____
<input type="checkbox"/>	Committee		
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication

1	<u>Date Expended</u>	4	Name: _____
		5	Address: _____
2	<u>Amount</u>	6	City/State/Zip: _____
	\$ -	7	Description: _____
3	Recipient is:	8	Purpose: _____
<input type="checkbox"/>	Committee		
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication

SCHEDULE B - ITEMIZED EXPENDITURES STATEMENT (\$20 or MORE)

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

1	<u>Date Expended</u>	4	Name:	_____
-		5	Address:	_____
2	<u>Amount</u>	6	City/State/Zip:	_____
	\$ -	7	Description:	_____
3	Recipient is:	8	Purpose:	_____
<input type="checkbox"/>	Committee			
<input checked="" type="checkbox"/>	Non-Committee	<input type="checkbox"/>	Ck. Box if Electioneering Communication	

<u>Total Expenditures</u>	
\$	152.78

SCHEDULE C - LOANS

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

LOAN SOURCE

Name (Last, First or Institution): Phil Cemanec

Address: 576 E. Hinsdale Ave.

City / State / Zip: Littleton, Colorado 80122

Original Amount of Loan: \$ 952.37 Interest Rate: 0.00%

Loan Amount Received this Reporting Period: \$ - Total of All Loans This Reporting Period: \$ -
Detailed Summary Report, Line 8

Principal Amount Paid This Reporting Period: \$ 709.09

Interest Amount Paid This Reporting Period: \$ -

Amount Repaid This Reporting Period (P + I) \$ 709.09 Total Repayments Made \$ 709.09
Detailed Summary Report, Line 16

Outstanding Balance: \$ 243.28

Terms of Loan: Various TBD
Date Loan Received Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address	City / State	Zip	Amount Guaranteed
None				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -

SCHEDULE D - RETURNED CONTRIBUTIONS & EXPENDITURES

Full Name of Committee / Person: Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

Returned Contributions

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

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

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

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

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

<u>Total Returned Contributions</u>				
	\$			-

SCHEDULE D - RETURNED CONTRIBUTIONS & EXPENDITURES

Full Name of Committee / Person:

Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

Returned Expenditures

(Previously reported on Schedule B - Expenditures returned or refunded to the Committee)

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

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

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

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

<u>Total Returned Expenditures</u>				
	\$			-

STATEMENT OF NON-MONETARY CONTRIBUTIONS

Full Name of Committee / Person:

Phil for Littleton Campaign Fund, Bruce Stahlman, Treasurer

1	<u>Date Provided</u>	4	Name, (Last, First):
		5	Address:
2	<u>Fair Market Value</u>	6	City/State/Zip:
	\$ -	7	Description:
3	<u>Aggregate Amt.</u>	8	Employer:
	\$ -	9	Occupation:
		<input type="checkbox"/>	10 Ck. Box if Coordinated with a Candidate / Candidate Committee or Political Party
<input type="checkbox"/>	Ck. Box if Electioneering Communication		

1	<u>Date Provided</u>	4	Name, (Last, First):
		5	Address:
2	<u>Fair Market Value</u>	6	City/State/Zip:
	\$ -	7	Description:
3	<u>Aggregate Amt.</u>	8	Employer:
	\$ -	9	Occupation:
		<input type="checkbox"/>	10 Ck. Box if Coordinated with a Candidate / Candidate Committee or Political Party
<input type="checkbox"/>	Ck. Box if Electioneering Communication		

1	<u>Date Provided</u>	4	Name, (Last, First):
		5	Address:
2	<u>Fair Market Value</u>	6	City/State/Zip:
	\$ -	7	Description:
3	<u>Aggregate Amt.</u>	8	Employer:
	\$ -	9	Occupation:
		<input type="checkbox"/>	10 Ck. Box if Coordinated with a Candidate / Candidate Committee or Political Party
<input type="checkbox"/>	Ck. Box if Electioneering Communication		

<u>Total Non-Monetary Contributions</u>	\$ -
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