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Received  
Oct 25 2021  
CITY CLERK

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

Full Name of Committee/Person:	CAROL FEY 4 MAYOR
As Shown On Registration	
Address of Committee/Person:	759 E. PHILLIPS DR. S
City, State & Zip Code:	LITTLETON, CO. 80120
Committee Type:	CANDIDATE
Name and Address of Financial Institution:	BANK OF COLORADO
Email Address:	CAROL@CAROLFEY.COM

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:  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)	\$ - 766.00
2 Total Monetary Contributions (line 11)	\$ 500.00
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ - 260.00
4 Total Monetary Expenditures (line 19)	\$ 2810.46
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ -3070.46

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: PAUL E. BINGHAM

Registered Agent's Signature: Paul E Bingham Date: 10/25/21

Print Candidate Name: CAROL FEY

Candidates Signature: C Fey Date: 10/25/21

**DETAILED SUMMARY**

Full Name of Committee/Person: CAROL FEY 4 MAYOR

Current Reporting Period: OCT 8, 2021 Through OCT 21, 2021

<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>		\$ -700 <sup>00</sup>	-700
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$ 500 <sup>00</sup>	500
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0	0
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ 0	0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0	0
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ 0	0
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 500 <sup>00</sup>	
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 0	0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 500 <sup>00</sup>	<del>2810.46</del> 500
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$ 2810.46	2810.46
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0	0
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ 0	0
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ 0	0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0	0
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 2810.46	2810.46
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 2810.46	1

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

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

**Full Name of Committee/Person:** CAROL FEY & MAYOR

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/11/21</u>	4. Name (Last, First): <u>GOSHORN, MARY</u>
2. Contribution Amt. <u>\$ 100<sup>00</sup></u>	5. Address: <u>6640 FOREHILL ST.</u>
3. Aggregate Amt. * <u>\$ 100</u>	6. City/State/Zip: <u>LITTLETON, CO</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK - ONLINE DONAT'N</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/11/21</u>	4. Name (Last, First): <u>FRANK ATWOOD, FRANK</u>
2. Contribution Amt. <u>\$ 200<sup>00</sup></u>	5. Address: <u>7094 S. COSTILLA ST.</u>
3. Aggregate Amt. * <u>\$ 400<sup>00</sup></u>	6. City/State/Zip: <u>LITTLETON, CO. 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PERSONAL CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/5/21</u>	4. Name (Last, First): <u>DONOVAN, JERRY</u>
2. Contribution Amt. <u>\$ 50<sup>00</sup></u>	5. Address: _____
3. Aggregate Amt. * <u>\$ 50<sup>00</sup></u>	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>ON-LINE DONATIONS</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/15/21</u>	4. Name (Last, First): <u>KERSEY, MARK</u>
2. Contribution Amt. <u>\$ 50<sup>00</sup></u>	5. Address: _____
3. Aggregate Amt. * <u>\$ 50<sup>00</sup></u>	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>ON-LINE DONATION</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

\* 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:** CAROL FEY A MAYOR

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/19/21	4. Name (Last, First): <u>TOUBA, JEMAL</u>
2. <u>Contribution Amt.</u> \$ 100 <sup>00</sup>	5. Address: _____
3. <u>Aggregate Amt. *</u> \$ 100 <sup>00</sup>	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>ON-LINE DONATION</u>
	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> ): _____

\* 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:** CAROL FEY FOR MAYOR

PLEASE PRINT/TYPE

1. Date Expended <u>10/8/21</u>	4. Name: <u>LITTLETON PRINT &amp; COPY</u>
2. Amount <u>\$ 2052<sup>71</sup></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>PRINT &amp; MAIL POSTCARD</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/8/21</u>	4. Name: <u>PHONE-BURNER</u>
2. Amount <u>\$ 149<sup>00</sup></u>	5. Address: <u>ON-LINE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>PHONE COMMUNICATIONS</u>
	7. Purpose of Expenditure: <u>" " "</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>10/12/21</u>	4. Name: <u>MEGAN-ZACHER POST CARD DESIGN</u>
2. Amount <u>\$ 218.75</u>	5. Address: <u>ON-LINE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>POST CARD DESIGN</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended	4. Name: _____
2. Amount \$	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. Date Expended	4. Name: _____
2. Amount \$	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