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OCT 13 2015

CITY CLERK

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
Email Address:	5800 S Broadway 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

duge clark for littleton.org

Reporting Period Covered: Through

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)	\$ 1600
2 Total Monetary Contributions (line 11)	\$ 78.87
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1678.87
4 Total Monetary Expenditures (line 19)	\$ 245.00
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1433.87

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: Doug Clark

Registered Agent's Signature: [Signature] Date: 10/13/2015

Print Candidate Name: Doug Clark

Candidates Signature: [Signature] Date: 10/13/2015

DETAILED SUMMARY

Full Name of Committee/Person: _____

Current Reporting Period: Sep 18 2015 **Through** Oct 8 2015

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	1600.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	78.87
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	0
8	Loans Received (Please list on Schedule "C")	\$	0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$	0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	1678.87
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	1678.87
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	245.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	0
16	Loan Repayments Made (Please list on Schedule "C")	\$	0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	245.00
20	Total Spending (Line 18 + line 19)	\$	245.00

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> 9/24/2015 9/25/2015	4. Name: <u>Betty Harris</u>
2. <u>Amount</u> \$ <u>20.00</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>refreshments for gathering</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 9/24/2015	4. Name: <u>Acme Political Solutions</u>
2. <u>Amount</u> \$ <u>225.00</u>	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Centennial CO</u>
	7. Purpose of Expenditure: <u>Signs</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

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> 9/25/2015	4. Name (Last, First): <u>Sullivan Lou</u>
2. <u>Contribution Amt.</u> \$ <u>40⁰⁰</u>	5. Address: <u>5940 S Bemis St</u>
3. <u>Aggregate Amt. *</u> \$ <u>40⁰⁰</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>): _____

1. <u>Date Accepted</u> 9/25/2015	4. Name (Last, First): <u>Clark Day</u>
2. <u>Contribution Amt.</u> \$ <u>20⁰⁰</u>	5. Address: <u>2454 Houston Waring Cir</u>
3. <u>Aggregate Amt. *</u> \$ <u>38.87</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>): _____

1. <u>Date Accepted</u> 9/20/2015	4. Name (Last, First): <u>Day Clark</u>
2. <u>Contribution Amt.</u> \$ <u>18.87</u>	5. Address: <u>2454 Houston Waring Cir</u>
3. <u>Aggregate Amt. *</u> \$ <u>38.87</u>	6. City/State/Zip: <u>Littleton CO 80120</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>in kind contribution - web hosting</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>): _____

* 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).