



Space Below For Office Use Only

Received

OCT 13 2015

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

Full Name of Committee/Person: Carol A Brzezczek
Address of Committee/Person: 2000 W Arapahoe Rd
City, State & Zip Code: Littleton CO 80120
Committee Type: candidate
Name and Address of Financial Institution: COLO Business Bank
Email Address: carolforcouncil@comcast.net

Type of Report

- Regularly Scheduled Filing.
Amended Filing. This amends previous report filed on (date)
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: 9/10/15 Through 10/08/2015

Declared Total Spending (if applicable) \$

Table with 2 columns: Line Item, Amount. Totals Detailed Summary Page. 1 Funds on Hand at the Beginning of Reporting Period (monetary only) \$ 1300.00

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: Carol A Brzezczek
Registered Agent's Signature: Carol A Brzezczek Date: 10/08/15
Print Candidate Name: Carol A Brzezczek
Candidates Signature: Carol A Brzezczek Date: 10/08/15

DETAILED SUMMARY

Full Name of Committee/Person: Carol A Brzezick

Current Reporting Period: 09/18/15 Through 10/08/2015

| | | | |
|----|--|----|---------|
| | Funds on hand at the beginning of reporting period (Monetary Only) | \$ | 1300.00 |
| 6 | Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A") | \$ | 1615.00 |
| 7 | Total of Non-Itemized Contributions (Contributions of \$19.99 and Less) | \$ | 29.99 |
| 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) | \$ | 1644.99 |
| 12 | Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions) | \$ | — |
| 13 | Total Contributions (Line 11 + line 12) | \$ | 1644.99 |
| 14 | Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B") | \$ | 1730.47 |
| 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) | \$ | |
| 19 | Total Monetary Expenditures (Total of lines 14 through 17) | \$ | 1730.47 |
| 20 | Total Spending (Line 18 + line 19) | \$ | 1730.47 |

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

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

Full Name of Committee/Person: Carol A Brzezczek

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

PLEASE PRINT/TYPE

| | |
|--|--|
| 1. <u>Date Accepted</u> 9/2/15 | 4. Name (Last, First): <u>Erickson Jeanie</u> |
| 2. <u>Contribution Amt.</u> \$ 50 ⁰⁰ | 5. Address: <u>5567 S King 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: <u>cash</u> |
| | 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> 10/07/15 | 4. Name (Last, First): <u>Trujillo Jose</u> |
| 2. <u>Contribution Amt.</u> \$ 200 ⁻ | 5. Address: <u>5574 So 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: <u>ck</u> |
| | 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> 9/18/15 | 4. Name (Last, First): <u>Atwood Frank</u> |
| 2. <u>Contribution Amt.</u> \$ 100 ⁻ | 5. Address: <u>7094 So Costilla 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: <u>check</u> |
| | 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/ | 4. Name (Last, First): <u>Jim Cole</u> |
| 2. <u>Contribution Amt.</u> \$ 750 ⁰⁰ | 5. Address: <u>2008 W Caley Pl</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>cash</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): <u>retired</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Carol A Brzeczek

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

PLEASE PRINT/TYPE

| | |
|--|---|
| 1. <u>Date Accepted</u> | 4. Name (Last, First): <u>Nies Susan</u> |
| 2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u> | 5. Address: <u>7301 S Highland Drive</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</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): |
| | 9. Occupation (if applicable, <u>mandatory</u>): |

| | |
|--|--|
| 1. <u>Date Accepted</u> | 4. Name (Last, First): <u>Szilard Paula</u> |
| 2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</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: <u>check</u> |
| | 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): <u>Dannelley Jim</u> |
| 2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u> | 5. Address: <u>5810 S Santa Fe Dr</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</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): <u>Self employed</u> |
| | 9. Occupation (if applicable, <u>mandatory</u>): <u>Various</u> |

| | |
|--|--|
| 1. <u>Date Accepted</u> <u>10/02</u> | 4. Name (Last, First): <u>Bolt Martin</u> |
| 2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u> | 5. Address: <u>6187 S W.ndermere Wy</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</u> |
| | 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: Carol A Brzezczek

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

PLEASE PRINT/TYPE

| | |
|--|---|
| 1. <u>Date Accepted</u> 9/18/15 | 4. Name (Last, First): <u>Brown Norman</u> |
| 2. <u>Contribution Amt.</u> \$ 500 ⁰⁰ | 5. Address: <u>5705 S Clarkson</u> |
| 3. <u>Aggregate Amt. *</u> \$ | 6. City/State/Zip: <u>Greenwood Village CO 80121</u> |
| <input type="checkbox"/> Check box if Electioneering Communication | 7. Description: <u>check</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): <u>Anadarko retired</u> |
| | 9. Occupation (if applicable, <u>mandatory</u>): |

| | |
|--|---|
| 1. <u>Date Accepted</u> 9/25/15 | 4. Name (Last, First): <u>Shone Gloria</u> |
| 2. <u>Contribution Amt.</u> \$ 100 ⁰⁰ | 5. Address: <u>7975 S Datura Cir W</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>ck</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): <u>Anadarko</u> |
| | 9. Occupation (if applicable, <u>mandatory</u>): |

| | |
|--|--|
| 1. <u>Date Accepted</u> 9/25/15 | 4. Name (Last, First): <u>Sullivan Louise</u> |
| 2. <u>Contribution Amt.</u> \$ 400 ⁰⁰ | 5. Address: <u>5940 S Bemis 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: <u>cash</u> |
| | 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> 9/25/15 | 4. Name (Last, First): <u>Metcalf David</u> |
| 2. <u>Contribution Amt.</u> \$ 150 ⁰⁰ | 5. Address: <u>7870 S Hill Dr</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</u> |
| | 8. Employer (if applicable, <u>mandatory</u>): <u>consequences consult LLC</u> |
| | 9. Occupation (if applicable, <u>mandatory</u>): <u>planning consultant</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 A Brzeczek

PLEASE PRINT/TYPE

| | |
|---|--|
| 1. <u>Date Expended</u> 9/10/15 | 4. Name: <u>Hansen Brothers</u> |
| 2. <u>Amount</u> \$ <u>1421.07</u> | 5. Address: <u>2439 W Main</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> 9/22/15 | 4. Name: <u>Super Cheap Signs</u> |
| 2. <u>Amount</u> \$ <u>309.40</u> | 5. Address: <u>9200 Waterford Centre Blvd #100</u> |
| 3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>Austin TX 78758</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 |