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 CITY CLERK

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

Full Name of Committee/Person:	HOPPING 4 LITTLETON <small>As Shown On Registration</small>
Address of Committee/Person:	5773 SHASTA CIRCLE
City, State & Zip Code:	LITTLETON, CO 80123
Committee Type:	POLITICAL
Name and Address of Financial Institution:	COL. BUS BANK 2409 W. MAIN ST. LITTLETON CO 80123
Email Address:	BILL @ HOPPING 4 LITTLETON . 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: Date Through 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)	\$ 3881.76
2	Total Monetary Contributions (line 11)	\$ 2190.52
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 6072.28
4	Total Monetary Expenditures (line 19)	\$ 6072.28
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 0

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: _____

Registered Agent's Signature: Bill _____ Date: _____

Print Candidate Name: William Hopping _____

Candidates Signature: [Signature] _____ Date: 12/3/15

DETAILED SUMMARY

Full Name of Committee/Person: _____

Current Reporting Period: 10/22/15

Through 12/1/15

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 3881.76
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 2070.52
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")	\$ /
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 2070.52
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 120.00
13	Total Contributions (Line 11 + line 12)	\$ 2,190.52
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 6,072.28
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)	\$ 6,072.28
20	Total Spending (Line 18 + line 19)	\$ 6,072.28.

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> 10/28/15	4. Name (Last, First): <u>BRIERY, WILLIAM</u>
2. <u>Contribution Amt.</u> \$ <u>48.25</u>	5. Address: <u>5682 MORNING GLORY LANE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAYPAL</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>CH2M</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>attorney</u>

1. <u>Date Accepted</u> 10/28/15	4. Name (Last, First): <u>SEWARD, THOMAS</u>
2. <u>Contribution Amt.</u> \$ <u>96.80</u>	5. Address: <u>5844 SHASTA CIRCLE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAYPAL</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>BRYAN CAVE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>administrator</u>

1. <u>Date Accepted</u> 10/28/15	4. Name (Last, First): <u>MILLER, JOHN & ROBIN</u>
2. <u>Contribution Amt.</u> \$ <u>193.90</u>	5. Address: <u>6367 S. WOLFE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAYPAL</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>WONDHINA CONSULTING</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>attorney</u>

1. <u>Date Accepted</u> 10/28/15	4. Name (Last, First): <u>CONKLIN, AMY</u>
2. <u>Contribution Amt.</u> \$ <u>48.25</u>	5. Address: <u>6795 S. ELATI</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>PAYPAL</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SCIENTIST</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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/28/15	4. Name (Last, First): <u>RICE, JOSEPH</u>
2. <u>Contribution Amt.</u> \$ <u>96.80</u>	5. Address: <u>6165 S. COVENTRY</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAY PAL</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>LOCKHEED MALDEN</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>COMM. RELATIONS</u>

1. <u>Date Accepted</u> 10/30/15	4. Name (Last, First): <u>JONES, NEIL</u>
2. <u>Contribution Amt.</u> \$ <u>200.00</u>	5. Address: <u>3989 S. LIPAN</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ENGLEWOOD, CO. 80120 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</u>

1. <u>Date Accepted</u> 10/30/15	4. Name (Last, First): <u>LAROCK, GREG</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>6117 S. WINDEMERE</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>CHK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>GL DESIGN</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>architect</u>

1. <u>Date Accepted</u> 10/30/15	4. Name (Last, First): <u>CRAVER, JOHN + PATRICIA</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>4481 TULE LAKE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>WHITE & STEELE</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>attorney</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: _____

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/30/15	4. Name (Last, First): <u>LITTLETON CAPITAL PARTNERS</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>5711 S. NEVADA</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>CHK</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>LITTLETON CAP. PARTNERS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>real estate</u>

1. <u>Date Accepted</u> 11/10/15	4. Name (Last, First): <u>OSTERMILLER, TERRY</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>7251 S. HIGHLAND</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>CHK</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>retired</u>

1. <u>Date Accepted</u> 12/1/15	4. Name (Last, First): <u>HOPPING, BILL</u>
2. <u>Contribution Amt.</u> \$ 1086.52	5. Address: <u>5773 SHASTA</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>LITTLETON CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>DEBIT CARD / CASH</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>SELF</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>HOSPITALITY</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)

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

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/22/15	4. Name: <u>ROGERS PROJECT</u>
2. <u>Amount</u> \$ 300.00	5. Address: <u>9454 PALISADE CT</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>LITTLETON CO HIGHLAND RANGET 80130</u>
	7. Purpose of Expenditure: <u>WEBSITE</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/23/15	4. Name: <u>LITTLETON PRINT & COPY</u>
2. <u>Amount</u> \$ 2285.99	5. Address: <u>1449 N. LITTLETON #101</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 FLYERS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: <u>ARAPAHOE COUNTY</u>
2. <u>Amount</u> \$ 25.00	5. Address: <u>5334 PRINCE</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>VOTERS LISTS</u>
	<input type="checkbox"/> Check box if Electioneering Communication <u>VOTERS LISTS</u>

1. <u>Date Expended</u> 11/14/15	4. Name: <u>ABC ENTERPRISE / USAA C.C.</u>
2. <u>Amount</u> \$ 519.72	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>YARD SIGNS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>CC MEDIA / USAA CC</u>
2. <u>Amount</u> \$ 158.6 158.6	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>XXXXXXXXXX ADS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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> 11/14/15	4. Name: <u>FED Ex / USAA CC</u>
2. <u>Amount</u> \$ 71.31	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>HANDOUTS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>FED Ex / USAA CC</u>
2. <u>Amount</u> \$ 15.51	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>HANDOUTS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>R.M. CATERING / USAA / CC</u>
2. <u>Amount</u> \$ 187.62	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>DEPOSIT / MEET & GREET</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>CC MEDIA / USAA CC</u>
2. <u>Amount</u> \$ 158.61	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>AD</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>RM CATERING / USAA CC</u>
2. <u>Amount</u> \$ 237.78	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>MEET & GREET</u>
	<input type="checkbox"/> Check box if Electioneering Communication

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> 11/14/15	4. Name: <u>COLORADA DATA MAIL / USAA CC</u>
2. <u>Amount</u> \$ <u>983.60</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>MAILING COSTS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>CC MEDIA / USAA CC</u>
2. <u>Amount</u> \$ <u>158.61</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>AD</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>OFFICE DEPOT / USAA CC</u>
2. <u>Amount</u> \$ <u>44.68</u>	5. Address: <u>895 W. HAMPDEN</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGLEWOOD CO 80110</u>
	7. Purpose of Expenditure: <u>THANK YOU NOTES</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11/14/15	4. Name: <u>USPO / USAA CC</u>
2. <u>Amount</u> \$ <u>49.00</u>	5. Address: <u>915 W LEHIGH</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
	7. Purpose of Expenditure: <u>STAMPS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 12/1/15	4. Name: <u>BILL HOPPING</u>
2. <u>Amount</u> \$ <u>876.24</u>	5. Address: <u>5773 SHASTA CIRCLE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>LITTLETON CO, 80123</u>
	7. Purpose of Expenditure: <u>Return to Candidate</u>
	<input type="checkbox"/> Check box if Electioneering Communication

Statement of Non-Monetary Contributions
 [Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: _____

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 12/1/15	4. Name (Last, First): <u>Kathy Gross</u>
2. <u>Fair Market Value</u> \$ 120 ⁰⁰	5. Address: <u>9609 Red Oaks PLACE</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>Littleton, CO 80126</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Training Campaign Lit.</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>TYPIST</u>
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "...Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."