

Colorado Secretary of State
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REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Arvada Supports Free Markets <small>As Shown On Registration</small>
Address of Committee/Person:	12559 PO Box 746344
City, State & Zip Code:	Arvada, CO 80006
Committee Type:	issue
Name and Address of Financial Institution	FirstBank, 6355 Ward Rd

COMMITTEE ID NUMBER

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: July 17th, 2020 Through Aug 23, 2020
Date Date

Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)] \$ 0

	Totals Detailed Summary Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2 Total Monetary Contributions (line 11)	\$ 1,762
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 1,762
4 Total Monetary Expenditures (line 19)	\$ 0
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 1,762

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

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: Jonah Hearne

Registered Agent's Signature: [Signature] Date: 8/23/2020

Print Candidate Name: _____

Candidates Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: Arvada Supports Free Markets

Current Reporting Period: 7/17/2020 Through 8/23/2020

Funds on hand at the beginning of reporting period (Monetary Only)		\$	0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$	745.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	998
8	Loans Received (From Schedule "C")	\$	0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	0
10	Returned Expenditures (from recipient) (From Schedule "D")	\$	0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	1743.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	1743.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$	0
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	0
16	Loan Repayments Made (From Schedule "C")	\$	0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	0
20	Total Spending (Line 18 + line 19)	\$	0

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

Full Name of Committee/Person:

Arvada Supports Free Markets

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 7/12/2020	4. Name (Last, First): <u>Virginia Arner</u>
2. <u>Contribution Amt.</u> \$ <u>25⁰⁰</u>	5. Address: <u>7534 Reed St</u>
3. <u>Aggregate Amt. *</u> \$ <u>25⁰⁰</u>	6. City/State/Zip: <u>Arvada, CO 80003</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> 7/28	4. Name (Last, First): <u>James Morgan</u>
2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u>	5. Address: <u>7551 Oak St</u>
3. <u>Aggregate Amt. *</u> \$ <u>100⁰⁰</u>	6. City/State/Zip: <u>Arvada, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>check</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>virtus consulting, Inc</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>consultant</u>

1. <u>Date Accepted</u> 7/28	4. Name (Last, First): <u>Fred Clarke</u>
2. <u>Contribution Amt.</u> \$ <u>100⁰⁰</u>	5. Address: <u>70885 W 69th Ave</u>
3. <u>Aggregate Amt. *</u> \$ <u>100⁰⁰</u>	6. City/State/Zip: <u>Arvada, CO 80004</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> 7/28	4. Name (Last, First): <u>Jahnke, Marlin</u>
2. <u>Contribution Amt.</u> \$ <u>500⁰⁰</u>	5. Address: <u>12254 W 61st Ave</u>
3. <u>Aggregate Amt. *</u> \$ <u>500⁰⁰</u>	6. City/State/Zip: <u>Arvada, CO 80004</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)

1

Full Name of Committee/Person:

Arvada Supports Free Markets

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/1	4. Name (Last, First): <u>McDowell, C.L.</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: <u>8343 Chase Way</u>
3. <u>Aggregate Amt. *</u> \$ <u>20.00</u>	6. City/State/Zip: <u>Arvada, CO 80003</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): _____
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>): _____

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