

Space Below For Office Use Only

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

Full Name of Committee/Person:	Kathy Druelard for Arvada city council <small>As Shown On Registration</small>
Address of Committee/Person:	10452 W 77 PL
City, State & Zip Code:	Arvada CO 80005
Committee Type:	election committee
Name and Address of Financial Institution:	Chase Bank 8015 Kipling ARVADA CO 80005

SOS ID NUMBER (state and county committees):

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)	\$ 000 0.00
2	Total Monetary Contributions (line 11)	\$ 6323.26
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 6323.26
4	Total Monetary Expenditures (line 19)	\$ 3065.76
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 3257.50

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: _____

Registered Agent's Signature: _____ Date: _____

Print Candidate Name: Kathy Druelard

Candidates Signature: [Signature] Date: 9/15/2015

DETAILED SUMMARY

Full Name of Committee/Person: _____

Current Reporting Period:

04-28-15

Through

9-14-15

	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)] (Please list on Schedule "A")	\$	1075 ²⁰
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	600 ⁰⁰
8	Loans Received (Please list on Schedule "C")	\$	5188 ²⁴
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)	\$	6323 ²⁶
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	14 ⁹⁹
13	Total Contributions (Line 11 + line 12)	\$	6338 ²⁵
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	2957 ²⁰
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	108 ⁵⁶
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)	\$	3065 ⁷⁶
20	Total Spending (Line 18 + line 19)	\$	3065 ⁷⁶

Committee, Kathy Drulard for Arvada City Council Schedule A - Itemized donations

donations received

date received or check date	first	middle	last	address	occupation employer	Contribution/loan amount	aggregate amount total
5/11/15	Frank	F	Atwood	7094 S Costilla st. Littleton 80120		25	
5/28/15	Dana		West	12040 Colorado Blvd Thornton Colo 80241		100	
6/4/15	Hale		Davis	7500 E Dartmouth #20 Denver 80231	Pharmacist Health one	100	
6/4/15	Elaine		Mongeau	Evergreen, CO 80439-3709	Pharmacist SCLHS	25	
5/11/15	Frank	F	Atwood	7094 S Costilla st. Littleton 80120		50	75
7/23/15	Tina		Olson	1209 Richardson ct. CHEYENNE WY 82001	Attorney/ State of Wyoming	25	
8/8/15	Dorinda		Casavecchia	4302 N PINE BROOK WAY HOUSTON TX 77059	Houston Methodist St. John Hospital	500	
8/28/15	Susan		Shirley	6173 Allison st. Arvada co 80004	self employed	50	
9/1/15	Thomas		Graham	6080 Routt Arvada Colorado 80004	retired	100	
9/4/15	Thomas		Graham	6080 Routt Arvada Colorado 80004	retired	100	200

Committee Kathy Druilard for Arvada City Council Schedule B - Itemized Expenditures

expenditures paid out						
date	name/business	product or service	proprietor name	address	amount	Electioneering expense "X"
5/1/15	Kevin Brownlow	Web site/fb development	Kevin Brownlow	1309 Warren Ave, Jackson, MI 49203	514.95	X
5/7/15	Creative advertising and printing	name badge and magnetic car sign	Creative advertising and printing	5840 Olde Wadsworth Blvd.	106.32	X
5/18/15	Arvada printery	2 Coroplast signs	Keith Herron	5735 independence St. Arvada co 80002	198.71	X
5/29/15	Lamar center	rental of kickoff location		5889 Lamar St	300	
5/29/15	Vista print (online)	business cards	vista print	internet company	28.97	X
5/30/15	Wal-Mart	office supplies	Wal-Mart	7715 Sheridan Blvd.	102.77	X
7/15/15	signsonthecheap.com	yard signs	signsonthe cheap.com	internet company	768.41	X
6/4/15	King soopers	refreshments for kick off	King soopers	8031 Wadsworth	41.82	
7/29/15	Jefferson County Clerk	Cd rom with election data	Jefferson County Clerk and recorder	3500 Illinois st Golden Colorado	55	
8/4/15	Teresa Frazio photography	campaign candidate portraits	Teresa Frazio photography	photographer	125	X
8/24/15	Teresa Frazio photography	campaign candidate portraits	Teresa Frazio photography	photographer	55	X
8/24/15	Arvada Harvest festival parade	parade entry fee	Arvada Harvest festival parade	6736 w 79th ave 80003	300	
8/26/15	Vista print (online)	campaign flyer	vista print	internet company printing	297	X
9/7/05	Lowes home center	harvest festival for giveaway	Lowes hone center	5405 Wadsworth	23.75	
9/10/15	FACEBOOK	Facebook page	Facebook	internet company	140	X

Schedule C - Loans

Full Name of Committee/Person: Kathy Drulard For Arvada city council

LOANS - Loans Owed by the Committee

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)
 [No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

LOAN SOURCE

Name (Last, First or Institution): Drulard, Kathy
 Address: 10452 W 77 PL
 City/State/Zip: Arvada Colo 80005
 Original Amount of Loan: \$ 5188.26 Interest Rate: 0

Loan Amount Received This Reporting Period: \$ 5188.26 Total of All Loans This Reporting Period: \$ 5188.26
 (Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ 0

Interest Amount Paid This Reporting Period: \$ 0

Amount Repaid This Reporting Period: \$ 0 Total Repayments Made: \$ 0
 (Amount Repaid is sum of Principal & Interest entered on Detail Summary) (Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ 5188.26

TERMS OF LOAN: 4-28-15 11-30-15
 Date Loan Received Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Kathy Diroland for Arvada city council

Returned Contributions

(Previously reported on Schedule A - Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

1. <u>Date Accepted</u>	4. Name (Last, First): <u>N/A</u>
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

Returned Expenditures

(Previously reported on Schedule B - Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): <u>N/A</u>
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

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: Kathy Druland For Arvada city council

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 5-26-15	4. Name (Last, First): <u>Kreutzer, Cynthia</u>
2. <u>Fair Market Value</u> \$ <u>14 99</u>	5. Address: <u>9200 Grandview</u>
3. <u>Aggregate Amt.</u> \$ <u>14 99</u>	6. City/State/Zip: <u>Arvada Colo 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Journal Book</u>
	8. Employer (if applicable, mandatory): <u>self employed</u>
	9. Occupation (if applicable, mandatory): <u>Self employed</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, mandatory):
	9. Occupation (if applicable, mandatory):
	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, mandatory):
	9. Occupation (if applicable, mandatory):
	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."