

Colorado Secretary of State
 Elections Division
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Space this box for office use only



REPORT OF CONTRIBUTIONS AND EXPENDITURES
 (1-45-198, C.R.S.)

Full Name of Committee/Person: Nancy Ford For Arvada City Council
or Show Our Registration
 Address of Committee/Person: 8404 Everett Way Unit C
 City, State & Zip Code: Arvada, CO 81005
 Committee Type: Candidate Committee - local
 Name and Address of Financial Institution: Bank of the West 5805 Carr St 80004
 SOS ID NUMBER (state and county committee): 47-4579495

Type of Report

- Regularly Scheduled Filing.
- Amended Filing. (This amends previous report filed on (Date) _____
to add changes or new information (C.R.S.))
- Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero on Line 5)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: 7-21-2015 Through 9-14-2015
Date Date

Declared Total Spending (if applicable) \$ _____
(C.R.S. Sec. 1-45-111)

	Totals	Detailed Summary	Page
1 Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 250.00	0	717
2 Total Monetary Contributions (line 11)	\$ 200.00	150.00	717
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 450.00		
4 Total Monetary Expenditures (line 19)	\$ 70.00		
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 380.00		

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 to law, and in
 vicinity of memory, 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

Candidate's Signature:

Nancy Ford
Nancy Ford

Date: 9-21-2015

DETAILED SUMMARY

Full Name of Committee/Person: Nancy Ford for Arvada City Council

Current Reporting Period: 7-21-2015 Through 9-14-2015

	Funds on hand at the beginning of reporting period (Monetary Only)	\$ 250.00	TH
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 200.00	
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 0.00	
8	Loans Received (Please list on Schedule "C")	\$ 0.00 250.00	TH
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0.00	
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$ 0.00	
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 200.00 450.00	TH
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 0.00	
13	Total Contributions (Line 11 + line 12)	\$ 450.00	
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 70.00	
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 0.00	
16	Loan Repayments Made (Please list on Schedule "C")	\$ 0.00	
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0.00	
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$ 0.00	
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 70.00	
20	Total Spending (Line 18 + line 19)	\$ 70.00	

Schedule A - Itemized Contributions Statement (S20 or more)

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

Full Name of Committee/Person: Nancy Ford for Arvada City Council

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

PLEASE PRINT TYPE

1. Date Accepted: 8-20-2015

2. Contribution Amt.: \$ 100.00

3. Aggregate Amt. * \$

4. Name (Last, First): Hendricks, Betty Ann

5. Address: 8250 W 81st Drive

6. City/State/Zip: Arvada, CO 80005

7. Description: Check - Contribution

8. Employer (if applicable, mandatory):

9. Occupation (if applicable, mandatory): Retired

Check box if Electioneering Communication

1. Date Accepted: 8-20-2015

2. Contribution Amt.: \$ 100.00

3. Aggregate Amt. * \$

4. Name (Last, First): Tomer, Dorine

5. Address: 8406 Everett Way Unit C

6. City/State/Zip: Arvada, CO 80005

7. Description: Check - Contribution

8. Employer (if applicable, mandatory):

9. Occupation (if applicable, mandatory): Retired

Check box if Electioneering Communication

1. Date Accepted:

2. Contribution Amt.: \$

3. Aggregate Amt. * \$

4. Name (Last, First):

5. Address:

6. City/State/Zip:

7. Description:

8. Employer (if applicable, mandatory):

9. Occupation (if applicable, mandatory):

Check box if Electioneering Communication

1. Date Accepted:

2. Contribution Amt.: \$

3. Aggregate Amt. * \$

4. Name (Last, First):

5. Address:

6. City/State/Zip:

7. Description:

8. Employer (if applicable, mandatory):

9. Occupation (if applicable, mandatory):

Check box if Electioneering Communication

* For contribution limits within a committee's election cycle or a non/submit cycle, please refer to the following Colorado Constitutional, Candidates 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)

[1-15-1081 (10/14) C.R.S.]

Full Name of Committee/Person: Nancy Ford for Arvada City Council

PLEASE PRINT TYPE

1. Date Expended:
8-19-2015

2. Amount:

\$ 50.00

3. Recipient is optional:

Committee

Non-Committee

4. Name: Jefferson County Clerk & Recorder's Office

5. Address: 100 Jefferson County Pkwy #2560

6. City/State/Zip: Golden, CO 80419

7. Purpose of Expenditure: E'LDPMI

Check box if Electioneering Communication

1. Date Expended:
8-20-2015

2. Amount:

\$ 20.00

3. Recipient is optional:

Committee

Non-Committee

4. Name: City of Arvada Office of the City Clerk

5. Address: PO Box 8101 8101 Ralston Rd

6. City/State/Zip: Arvada, CO 80001-8101

7. Purpose of Expenditure: City of Arvada district map

Check box if Electioneering Communication

1. Date Expended:

2. Amount:

\$

3. Recipient is optional:

Committee

Non-Committee

4. Name:

5. Address:

6. City/State/Zip:

7. Purpose of Expenditure:

Check box if Electioneering Communication

1. Date Expended:

2. Amount:

\$

3. Recipient is optional:

Committee

Non-Committee

4. Name:

5. Address:

6. City/State/Zip:

7. Purpose of Expenditure:

Check box if Electioneering Communication

1. Date Expended:

2. Amount:

\$

3. Recipient is optional:

Committee

Non-Committee

4. Name:

5. Address:

6. City/State/Zip:

7. Purpose of Expenditure:

Check box if Electioneering Communication

Schedule C - Loans

Name of Committee: Nancy Ford For Arvada City Council

LOANS - Loans Owed by the Committee

This schedule should be completed if the committee has any loans. This form is for the committee to file. Complete this form for each loan. If the committee has no loans, this form should not be filed. The committee should file this form with the committee's financial report. The committee should file this form with the committee's financial report. The committee should file this form with the committee's financial report.

LOAN SOURCE

Ford, Nancy
8404 Everett Way Unit C
Arvada, CO 80005

Amount of Loan: \$ 250 Interest Rate: 0

Loan Amount Received This Reporting Period: \$ 250

Total for Loans This Reporting Period: 250

Balance Amount Paid This Reporting Period: 0

Amount of Loan Owed at Reporting Period: 0

Amount of Loan Owed at End of Reporting Period: 0

Total Balance Owed at End of Reporting Period: 0

Outstanding Balance: \$

DATE OF REPORT: 7-21-2015

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed
<u>Nancy Ford</u>	<u>8404 Everett Way Unit C</u> <u>Arvada, CO 80005</u>	<u>\$250</u>