

Colorado Secretary of State  
 Elections Division  
 1700 Broadway, Ste. 200  
 Denver, CO 80290  
 Ph: (303) 894-2200 ext. 6383  
 Fax: (303) 869-4861  
 Email: cpfhelp@sos.state.co.us  
 www.sos.state.co.us



Space Below For Office Use Only

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

|  |  |
|--|--|
| <b>Full Name of Committee/Person:</b>            | Friends of Jerry Marks                                     |
| As Shown On Registration                         |  |
| <b>Address of Committee/Person:</b>              | 8250 Garland Dr.   |
| <b>City, State &amp; Zip Code:</b>               | Arvada, CO 80005   |
| <b>Committee Type:</b>                           | Candidate  |
| <b>Name and Address of Financial Institution</b> | Coors Credit Union, 7721A Wadsworth Blvd, Arvada, CO 80003 |

**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)        | \$ 2,188.34                  |
| 2 | Total Monetary Contributions (line 11)                                    | \$ 800.00                    |
| 3 | Total of Monetary Contributions & Beginning Amount (line 1 + line 2)      | \$ 2,988.34                  |
| 4 | Total Monetary Expenditures (line 19)                                     | \$ 1,384.08                  |
| 5 | Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4) | \$ 1,604.26                  |

**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: Jannell E Marks  
 Registered Agent's Signature: Jannell E Marks Date: 10/11/15  
 Print Candidate Name: GERALD J. MARKS  
 Candidates Signature: Gerald J. Marks Date: 10/11/15

**DETAILED SUMMARY**

**Full Name of Committee/Person:** Friends of Jerry Marks

**Current Reporting Period:** 9/15/15 **Through** 10/8/15

|    |  |             |
|----|--|-------------|
|    | <b>Funds on hand at the beginning of reporting period</b> (Monetary Only)                                      | \$ 2,188.34 |
| 6  | <b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)]<br>(Please list on Schedule "A")            | \$ 800.00   |
| 7  | <b>Total of Non-Itemized Contributions</b><br>(Contributions of \$19.99 and Less)                              | \$ 0.00     |
| 8  | <b>Loans Received</b><br>(Please list on Schedule "C")   | \$ 0.00     |
| 9  | <b>Total of Other Receipts</b><br>(Interest, Dividends, etc.)  | \$ 0.00     |
| 10 | <b>Returned Expenditures (from recipient)</b><br>(Please list on Schedule "D")                                 | \$ 0.00     |
| 11 | <b>Total Monetary Contributions</b><br>(Total of lines 6 through 10)   | \$ 800.00   |
| 12 | <b>Total Non-Monetary Contributions</b><br>(From Statement of Non-Monetary Contributions)                      | \$ 39.77    |
| 13 | <b>Total Contributions</b><br>(Line 11 + line 12)  | \$ 839.77   |
| 14 | <b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)]<br>(Please list on Schedule "B")             | \$ 1,384.08 |
| 15 | <b>Total of Non-Itemized Expenditures</b><br>(Expenditures of \$19.99 or Less)                                 | \$ 0.00     |
| 16 | <b>Loan Repayments Made</b><br>(Please list on Schedule "C")   | \$ 0.00     |
| 17 | <b>Returned Contributions (To donor)</b><br>(Please list on Schedule "D")                                      | \$ 0.00     |
| 18 | <b>Total Coordinated Non-Monetary Expenditures</b><br>(Candidate/Candidate Committee & Political Parties only) | \$ 0.00     |
| 19 | <b>Total Monetary Expenditures</b><br>(Total of lines 14 through 17)   | \$ 1,384.08 |
| 20 | <b>Total Spending</b><br>(Line 18 + line 19)   | \$ 1,384.08 |

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

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

Full Name of Committee/Person: Friends of Jerry Marks

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

PLEASE PRINT/TYPE

|  |   |
|--|---|
| 1. Date Accepted<br><u>9/22/15</u>                                 | 4. Name (Last, First): <u>Metro Housing Coalition Political Committee</u> |
| 2. Contribution Amt.<br>\$ <u>500.00</u>                           | 5. Address: <u>9033 E Easter Pl.</u>                                      |
| 3. Aggregate Amt. *<br>\$  | 6. City/State/Zip: <u>Centennial, CO 80112</u>                            |
| <input type="checkbox"/> Check box if Electioneering Communication | 7. Description: _____   |
|  | 8. Employer (if applicable, mandatory): _____                             |
|  | 9. Occupation (if applicable, mandatory): _____                           |

|  |   |
|--|---|
| 1. Date Accepted<br><u>9/22/15</u>                                 | 4. Name (Last, First): <u>Fifer, Bob</u>                    |
| 2. Contribution Amt.<br>\$ <u>200.00</u>                           | 5. Address: <u>11762 W 56<sup>th</sup> Cir.</u>             |
| 3. Aggregate Amt. *<br>\$  | 6. City/State/Zip: <u>Arvada, CO 80002</u>                  |
| <input type="checkbox"/> Check box if Electioneering Communication | 7. Description: _____                                       |
|  | 8. Employer (if applicable, mandatory): <u>Sungard</u>      |
|  | 9. Occupation (if applicable, mandatory): <u>Management</u> |

|  |  |
|--|--|
| 1. Date Accepted<br><u>9/22/15</u>                                 | 4. Name (Last, First): <u>Laidig, Eldon</u>              |
| 2. Contribution Amt.<br>\$ <u>100.00</u>                           | 5. Address: <u>6392 Coors Lane</u>                       |
| 3. Aggregate Amt. *<br>\$  | 6. City/State/Zip: <u>Arvada, CO 80004</u>               |
| <input type="checkbox"/> Check box if Electioneering Communication | 7. Description: _____                                    |
|  | 8. Employer (if applicable, mandatory): _____            |
|  | 9. Occupation (if applicable, mandatory): <u>retired</u> |

|  |   |
|--|---|
| 1. Date Accepted   | 4. Name (Last, First): _____                    |
| 2. Contribution Amt.<br>\$   | 5. Address: _____                               |
| 3. Aggregate Amt. *<br>\$  | 6. City/State/Zip: _____                        |
| <input type="checkbox"/> Check box if Electioneering Communication | 7. Description: _____                           |
|  | 8. Employer (if applicable, mandatory): _____   |
|  | 9. Occupation (if applicable, mandatory): _____ |

\* 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:** Friends of Jerry Marks

**PLEASE PRINT/TYPE**

|   |  |
|---|--|
| 1. <u>Date Expended</u><br>9/15/15  | 4. Name: <u>C &amp; D Printing</u>   |
| 2. <u>Amount</u><br>\$ 184.08   | 5. Address: <u>5351 Tennyson St.</u>   |
| 3. Recipient is (optional):<br><input type="checkbox"/> Committee<br><input type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>Denver, CO 80212</u>   |
|   | 7. Purpose of Expenditure: <u>post cards</u><br><input type="checkbox"/> Check box if Electioneering Communication |

|   |  |
|---|--|
| 1. <u>Date Expended</u><br>10/8/15  | 4. Name: <u>Colorado Community Media - North Metro</u>   |
| 2. <u>Amount</u><br>\$ 1,200.00   | 5. Address: <u>8703 Yates Dr. #210</u>   |
| 3. Recipient is (optional):<br><input type="checkbox"/> Committee<br><input type="checkbox"/> Non-Committee | 6. City/State/Zip: <u>Westminster, CO 80031</u>  |
|   | 7. Purpose of Expenditure: <u>Arvada Press Ads</u><br><input type="checkbox"/> Check box if Electioneering Communication |

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

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

|   |  |
|---|--|
| 1. <u>Date Expended</u>   | 4. Name: _____   |
| 2. <u>Amount</u><br>\$  | 5. Address: _____  |
| 3. Recipient is (optional):<br><input type="checkbox"/> Committee<br><input type="checkbox"/> Non-Committee | 6. City/State/Zip: _____   |
|   | 7. Purpose of Expenditure: _____<br><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:** Friends of Jerry Marks

**PLEASE PRINT/TYPE**

|  |   |
|--|---|
| 1. <u>Date Provided</u><br>9/23/15   | 4. Name (Last, First): <u>Custom Environmental Services</u> |
| 2. <u>Fair Market Value</u><br>\$ 39.77  | 5. Address: <u>8041 N. I-70 Frontage Road #11</u>           |
| 3. <u>Aggregate Amt.</u><br>\$   | 6. City/State/Zip: <u>Arvada, CO 80002</u>                  |
| <input type="checkbox"/> Check box if Electioneering Communication   | 7. Description: <u>Postage</u>                              |
|  | 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><br>\$  | 5. Address: _____                                       |
| 3. <u>Aggregate Amt.</u><br>\$   | 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><br>\$  | 5. Address: _____                                       |
| 3. <u>Aggregate Amt.</u><br>\$   | 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."