

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

Full Name of Committee/Person:	<u>PALM FOR CITY COUNCIL</u> <small>As Shown On Registration</small>
Address of Committee/Person:	<u>7029 UPHAM ST.</u>
City, State & Zip Code:	<u>ARVADA, CO 80004</u>
Committee Type:	<u>CANDIDATE COMMITTEE</u>
Name and Address of Financial Institution	<u>U.S. BANK 58TH / INDEPENDENCE ARVADA</u>

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)	\$ 0.00
2	Total Monetary Contributions (line 11)	\$ 90.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 90.00
4	Total Monetary Expenditures (line 19)	\$ 0.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 90.00

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 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: DAVID A. PALM

Registered Agent's Signature: *David A. Palm* Date: 10/12/15

Print Candidate Name: DAVE PALM

Candidates Signature: *David A. Palm* Date: 10/12/15

DETAILED SUMMARY

Full Name of Committee/Person: PALM FOR CITY COUNCIL

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

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	0.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	90.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	0.00
8	Loans Received (Please list on Schedule "C")	\$	0.00
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)	\$	90.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	97.00
13	Total Contributions (Line 11 + line 12)	\$	187.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	0.00
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)	\$	0.00
20	Total Spending (Line 18 + line 19)	\$	0.00

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

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

Full Name of Committee/Person: PALM FOR CITY COUNCIL

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/16/15	4. Name (Last, First): <u>BACON, KELLY</u>
2. <u>Contribution Amt.</u> \$ 40.00	5. Address: <u>7760 W. 62ND AVE</u>
3. <u>Aggregate Amt. *</u> \$ 40.00	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>SELF EMPLOYED</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>CONTRACTOR</u>

1. <u>Date Accepted</u> 9/22/15	4. Name (Last, First): <u>YOUNG, NANCY L.</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>7706 ROBINSON WAY</u>
3. <u>Aggregate Amt. *</u> \$ 50.00	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>): _____
	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>): _____

* 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).

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: PALM FOR CITY COUNCIL

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 9/16/15	4. Name (Last, First): <u>HEARNE, JONAH</u>
2. <u>Fair Market Value</u> \$ 97.00	5. Address: <u>12559 W. 77TH PL.</u>
3. <u>Aggregate Amt.</u> \$ 97.00	6. City/State/Zip: <u>ARVADA, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>ROBO CALLS</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>BALL CORPORATION</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>DIRECTOR</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."

Dialing Services, LLC

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(575)623-3660x238
christa@dialingservices.com

INVOICE

BILL TO
Jonah Hearne
Jefferson County Republicans
12559 W 77th Pl
Arvada, CO 80005

INVOICE # 43457
DATE 09/16/2015
TERMS Paid

ACTIVITY	QTY	RATE	AMOUNT
Automated Calls	2,510	0.039	97.89
Automated calls: Dave Palm for Arvada Intro			

Your credit card has been charged for the balance of this invoice.

PAYMENT	97.89
BALANCE DUE	\$0.00