

Colorado Secretary of State  
 Elections Division  
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Space Below For Office Use Only

**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:	Kathy Oruland for Arvada City Council
Address of Committee/Person:	10452 W. 117th Place
City, State & Zip Code:	Arvada CO 80005
Committee Type:	Election Committee
Name and Address of Financial Institution:	Chase Bank, 8015 Kipling, Arvada, CO

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:  Through   
Date 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)	\$ 2032.00
2 Total Monetary Contributions (line 11)	\$ 0
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 2032.00
4 Total Monetary Expenditures (line 19)	\$ 2032.00 (loan)
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 0

**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 Oruland

Candidates Signature: [Signature] Date: 9/20/2016

**DETAILED SUMMARY**

**Full Name of Committee/Person:** Kathy Ireland for Arapahoe City Council

**Current Reporting Period:** 11-29-15 **Through** Oct-27-2016

<b>Funds on hand at the beginning of reporting period</b> (Monetary Only)		\$ 2032 <sup>60</sup>
6	<b>Itemized Contributions \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 0
7	<b>Total of Non-Itemized Contributions</b> (Contributions of \$19.99 and Less)	\$ 0
8	<b>Loans Received</b> (Please list on Schedule "C")	\$ 0
9	<b>Total of Other Receipts</b> (Interest, Dividends, etc.)	\$ 0
10	<b>Returned Expenditures (from recipient)</b> (Please list on Schedule "D")	\$ 0
11	<b>Total Monetary Contributions</b> (Total of lines 6 through 10)	\$ 0
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$ 0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$ 0
14	<b>Itemized Expenditures \$20 or More</b> [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 0
15	<b>Total of Non-Itemized Expenditures</b> (Expenditures of \$19.99 or Less)	\$ 0
16	<b>Loan Repayments Made</b> (Please list on Schedule "C")	\$ 2032 <sup>60</sup>
17	<b>Returned Contributions (To donor)</b> (Please list on Schedule "D")	\$ 0
18	<b>Total Coordinated Non-Monetary Expenditures</b> (Candidate/Candidate Committee & Political Parties only)	\$ 0
19	<b>Total Monetary Expenditures</b> (Total of lines 14 through 17)	\$ 2032 <sup>60</sup>
20	<b>Total Spending</b> (Line 18 + line 19)	\$ 2032 <sup>60</sup>

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

1

Full Name of Committee/Person:

Kathy Drulard for Arjuna City Council

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

"01"

PLEASE PRINT/TYPE

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> ): _____

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).

**Schedule B – Itemized Expenditures Statement (\$20 or more)**

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

Full Name of Committee/Person: Patrick Drulard for Arvada City Council

PLEASE PRINT/TYPE

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

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

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

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

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

**Schedule C - Loans**

Full Name of Committee/Person: Kathy Drueland 1st 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): Kathy Drueland  
 Address: 10452 W 77th Pl  
 City/State/Zip: Arvada Colo 80005  
 Original Amount of Loan: \$ 4000 Interest Rate: 0

Loan Amount Received This Reporting Period: \$ 0 Total of All Loans This Reporting Period: \$ 000  
 (Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ 2032<sup>62</sup>

Interest Amount Paid This Reporting Period: \$ 0

Amount Repaid This Reporting Period: \$ 2032<sup>60</sup> Total Repayments Made: \$ 2032<sup>60</sup>  
 (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: \$ 1967<sup>40</sup> amount now forgiven

TERMS OF LOAN: 9-1-15 Ballona Forgiven  
 Date Loan Received Due Date for Final Payment

**LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN**

Full Name	Address, City, State, Zip	Amount Guaranteed
<u>Kathy Drueland</u>	<u>10452 W 77th Pl Arvada CO 80005</u>	