

Colorado Secretary of State
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OCT 31 2017

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

Full Name of Committee/Person:	Dot Miller for Anada
As Shown On Registration	
Address of Committee/Person:	7187 W 29th Drive
City, State & Zip Code:	Anada, CO 80003
Committee Type:	Campaign Committee
Name and Address of Financial Institution	First Bank, 6355 Ward Rd, Anada 80004

SOS ID NUMBER (state and county committees): 32-0524611

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: 10/13/2017 Through 10/29/2017
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)	\$ 5505.30
2	Total Monetary Contributions (line 11)	\$ 1600.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 7105.30
4	Total Monetary Expenditures (line 19)	\$ 3691.20
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 3414.10

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: Dot Miller
 Registered Agent's Signature: Dot Miller Date: 10/31/17
 Print Candidate Name: Dot Miller
 Candidates Signature: Dot Miller Date: 10/31/17

DETAILED SUMMARY

Full Name of Committee/Person: Dot Miller for Anwada

Current Reporting Period: 10/13/2017 Through 10/29/2017

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	5505.30
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	1600.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	0
8	Loans Received (Please list on Schedule "C")	\$	0
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)	\$	1600.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	1600.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	3691.20
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	0
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)	\$	3691.20
20	Total Spending (Line 18 + line 19)	\$	3691.20

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

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

Full Name of Committee/Person: Dot Miller for Anada

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/13/17	4. Name (Last, First): <u>Metro Housing Coalition PAC</u>
2. <u>Contribution Amt.</u> \$ <u>750.00</u>	5. Address: <u>9033 E Easter Place</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Centennial, CO 80112</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>PAC</u>
	9. Occupation (if applicable, mandatory):

1. <u>Date Accepted</u> 10/20/17	4. Name (Last, First): <u>Marks, Jannell</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>8250 Garland Dr</u>
3. <u>Aggregate Amt. *</u> \$ <u>500.00</u>	6. City/State/Zip: <u>Anada, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Xcel energy</u>
	9. Occupation (if applicable, mandatory): <u>Director</u>

1. <u>Date Accepted</u> 10/20/17	4. Name (Last, First): <u>Marks, Berald</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>8250 Garland Drive</u>
3. <u>Aggregate Amt. *</u> \$ <u>750.00</u>	6. City/State/Zip: <u>Anada, CO 80005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Custom Environmental Svcs</u>
	9. Occupation (if applicable, mandatory): <u>Owner</u>

1. <u>Date Accepted</u> 10/20/17	4. Name (Last, First): <u>Republic Services</u>
2. <u>Contribution Amt.</u> \$ <u>250.00</u>	5. Address: <u>5075 E 74th Ave</u>
3. <u>Aggregate Amt. *</u> \$ <u>750.00</u>	6. City/State/Zip: <u>Commerce City, CO 80022</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Check</u>
	8. Employer (if applicable, mandatory): <u>Republic Services Inc</u>
	9. Occupation (if applicable, mandatory): <u>Trash Hauler</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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Dot Miller for Ananda

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/13/17	4. Name (Last, First): <u>Thomas, Jodi</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>5 Coyote Lane</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton, CO 80127</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Paypal</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>First Bank</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>President</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: Dot Miller for Anwada

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/13/17</u>	4. Name: <u>Colorado Community Media</u>
2. <u>Amount</u> \$ <u>494.00</u>	5. Address: <u>722 Washington Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Golden, CO 80401</u>
	7. Purpose of Expenditure: <u>Advertisements</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/19/17</u>	4. Name: <u>Colorado Community Media</u>
2. <u>Amount</u> \$ <u>494.00</u>	5. Address: <u>722 Washington Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Golden, CO 80401</u>
	7. Purpose of Expenditure: <u>Advertisements</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/27/17</u>	4. Name: <u>Colorado Community Media</u>
2. <u>Amount</u> \$ <u>2,700.00</u>	5. Address: <u>722 Washington Ave</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Golden, CO 80401</u>
	7. Purpose of Expenditure: <u>Advertisements</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/13/17</u>	4. Name: <u>PayPal</u>
2. <u>Amount</u> \$ <u>3.20</u>	5. Address: <u>www.PayPal.com</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Credit Card Fees</u>
	<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