

Colorado Secretary of State
 Elections Division
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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:	Saf-Sprints Anode
As Shown On Registration	
Address of Committee/Person:	8531 W 71st Cir
City, State & Zip Code:	Anode CO 80004
Committee Type:	ISSIC
Name and Address of Financial Institution	First Bank 6355 Ward Rd Anode CO

COMMITTEE ID NUMBER

81-3751190

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: Oct 13 2018 Date Through Oct 28 2018 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)	\$ 7710.48
2	Total Monetary Contributions (line 11)	\$ 6400.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 14110.48
4	Total Monetary Expenditures (line 19)	\$ _____
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 14110.48

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: Vince Owens
 Registered Agent's Signature: _____ Date: 10/31/18

Print Candidate Name: _____
 Candidates Signature: _____ Date: _____

DETAILED SUMMARY

Full Name of Committee/Person: Safe Streets Actdc

Current Reporting Period: 10/13/18 Through 10/28/18

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	7 710.48
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$	6400.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$	—
8	Loans Received (From Schedule "C")	\$	—
9	Total of Other Receipts (Interest, Dividends, etc.)	\$	—
10	Returned Expenditures (from recipient) (From Schedule "D")	\$	—
11	Total Monetary Contributions (Total of lines 6 through 10)	\$	6400.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	—
13	Total Contributions (Line 11 + line 12)	\$	6400.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$	0
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	—
16	Loan Repayments Made (From Schedule "C")	\$	—
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$	0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$	0
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$	0
20	Total Spending (Line 18 + line 19)	\$	0

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

1

Full Name of Committee/Person: Safe Streets Ahead

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

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: _____
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1. <u>Date Accepted</u>	4. Name (Last, First): _____
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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).

Contributer	Address	Employer	Occupation	Amount	Date
David Doherty	15029 W 77th DR Arvada CO 80007	Piper Electric	Owner	300	10/20/2018
Dee Wisor	Box 9737 Aurora CO 81620	Self	Attorney	500	10/22/2018
Cimarron Development	20009 State Highway 72 Arvada CO 80007			2000	10/13/2018
Paul Duncan	7980 Noble CT Arvada CO 80007	Pie Consulting	Owner	500	10/22/2018
Pie Consulting	6275 Joyve Drive STE 200 Arvada CO 80403			1000	10/22/2018
W.L. Contractors	5920 Lamar ST Arvada CO 80003			1000	10/15/2018
Dot Miller	7187 W 79th DR Arvada CO 80003	The Solution	Owner	100	10/25/2018
Edgemark Development LLC	410 17th Street, Suite 1705 Denver, Colorado 80202			1000	10/22/2018