

Space Below For Office Use Only

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:	MARC WILLIAMS FOR MAYOR
As Shown On Registration	
Address of Committee/Person:	6781 LUPINE CIR
City, State & Zip Code:	ARVADA, CO 80007
Committee Type:	CANDIDATE
Name and Address of Financial Institution:	WELLS FARGO P.O. Box 6995 PORTLAND OR

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:  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)	\$ 26,318.98
2	Total Monetary Contributions (line 11)	\$ 9,135.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 35,453.98
4	Total Monetary Expenditures (line 19)	\$ 11,574.22
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 23,879.76

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: MARC WILLIAMS

Candidates Signature: Date: 10/14/19

**DETAILED SUMMARY**

Full Name of Committee/Person: MARC WILLIAMS for Mayor

Current Reporting Period: 9/19/19 Through 10/10/19

	<b>Funds on hand at the beginning of reporting period (Monetary Only)</b>	\$	26,318.98
6	<b>Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "A")	\$	9,135.00
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)	\$	9,135.00
12	<b>Total Non-Monetary Contributions</b> (From Statement of Non-Monetary Contributions)	\$	0
13	<b>Total Contributions</b> (Line 11 + line 12)	\$	9,135.00
14	<b>Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)]</b> (Please list on Schedule "B")	\$	11,574.22
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")	\$	0
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)	\$	11,574.22
20	<b>Total Spending</b> (Line 18 + line 19)	\$	11,574.22

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

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

Full Name of Committee/Person: MARC WILLIAMS FOR MAYOR

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9.20.</u>	4. Name (Last, First): <u>COLORADO ASSOC OF MECHANICAL &amp; PLUMBING CONTRACTORS</u>
2. Contribution Amt. \$ <u>750-</u>	5. Address: <u>1391 SPARK BLVD SUITE 450</u>
3. Aggregate Amt. * \$ <u>750-</u>	6. City/State/Zip: <u>DENVER, CO 80204</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAY PAY</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>9.20</u>	4. Name (Last, First): <u>PYNE, VICKI</u>
2. Contribution Amt. \$ <u>400-</u>	5. Address: <u>7330 ROUTE ST</u>
3. Aggregate Amt. * \$ <u>400-</u>	6. City/State/Zip: <u>ARAPAHO, CO</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SELF</u>
	9. Occupation (if applicable, mandatory): <u>NON-PROFIT CONSULTANT</u>

1. Date Accepted <u>9.20</u>	4. Name (Last, First): <u><del>PAUL</del> HAUPTMAN, PAUL</u>
2. Contribution Amt. \$ <u>750-</u>	5. Address: <u>5831 DEER MEADOW TRAIL</u>
3. Aggregate Amt. * \$ <u>750-</u>	6. City/State/Zip: <u>GOLDEN, CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>9.20</u>	4. Name (Last, First): <u>LORENE HAUPTMAN</u>
2. Contribution Amt. \$ <u>750.</u>	5. Address: <u>5831 DEER MEADOW TRAIL</u>
3. Aggregate Amt. * \$ <u>750</u>	6. City/State/Zip: <u>GOLDEN, CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	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 A – Itemized Contributions Statement (\$20 or more)**

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

Full Name of Committee/Person: MARC WILLIAMS FOR MAYOR

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9.17	4. Name (Last, First): <u>RIES, KARLA S. MILLER</u>
2. <u>Contribution Amt.</u> \$ 250-	5. Address: <u>609 N. ALLEN ST</u>
3. <u>Aggregate Amt. *</u> \$ 250-	6. City/State/Zip: <u>ROBINSON IL 62454</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>SALES FORCE</u>
	9. Occupation (if applicable, mandatory): <u>SALES REPRESENTATIVE</u>

1. <u>Date Accepted</u> 9.24	4. Name (Last, First): <u>HESHELD, BARRY</u>
2. <u>Contribution Amt.</u> \$ 750-	5. Address: <u>150 S. BELMONT ST</u>
3. <u>Aggregate Amt. *</u> \$ 750-	6. City/State/Zip: <u>DENVER, CO 80246</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory):

1. <u>Date Accepted</u> 9.25	4. Name (Last, First): <u>WHITE, CAROLYNNE</u>
2. <u>Contribution Amt.</u> \$ 50-	5. Address: <u>410 1755 ST</u>
3. <u>Aggregate Amt. *</u> \$ 50-	6. City/State/Zip: <u>DENVER, CO 80202</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PAY PAL</u>
	8. Employer (if applicable, mandatory): <u>BROWNSTEIN HARRIS</u>
	9. Occupation (if applicable, mandatory): <u>ATTORNEY</u>

1. <u>Date Accepted</u> 9.25	4. Name (Last, First): <u>HANEY, DR. MICHELE</u>
2. <u>Contribution Amt.</u> \$ 100-	5. Address: <u>2760 W. 116 CT</u>
3. <u>Aggregate Amt. *</u> \$ 100-	6. City/State/Zip: <u>WESTMINSTER, CO 80234</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RED ROCKS COMMUNITY COLLEGE</u>
	9. Occupation (if applicable, mandatory): <u>PRESIDENT</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: MARC WILLIAMS FOR MAYOR

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

PLEASE PRINT/TYPE

1. Date Accepted <u>9.25</u>	4. Name (Last, First): <u>WAPENSKY, LAWRENCE + BARBARA</u>
2. Contribution Amt. \$ <u>20-</u>	5. Address: <u>6685 KENDRICK DR.</u>
3. Aggregate Amt. * \$ <u>20-</u>	6. City/State/Zip: <u>ARUNDA, CA 90007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIROD</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>9.27</u>	4. Name (Last, First): <u>COLORADO GAMING ASSOCIATION</u>
2. Contribution Amt. \$ <u>250-</u>	5. Address: <u>1009 GRANT ST, SUITE 806</u>
3. Aggregate Amt. * \$ <u>250-</u>	6. City/State/Zip: <u>DENVER, CO 80003</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10.2</u>	4. Name (Last, First): <u>GARCIA BERRY, MARIA</u>
2. Contribution Amt. \$ <u>750-</u>	5. Address: <u>P.O. Box 460747</u>
3. Aggregate Amt. * \$ <u>750-</u>	6. City/State/Zip: <u>GLENDALE, CO 80246</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>CRL 3 ASSOC</u>
	9. Occupation (if applicable, mandatory): <u>GOVERNMENT RELATIONS</u>

1. Date Accepted <u>10.2</u>	4. Name (Last, First): <u>PIZ WILSON, MONIKA + RAJONI WILSON</u>
2. Contribution Amt. \$ <u>750</u>	5. Address: <u>17534 W. 53rd Dr.</u>
3. Aggregate Amt. * \$ <u>750</u>	6. City/State/Zip: <u>GOLDEN, CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>GRAMMI Noodles</u>
	9. Occupation (if applicable, mandatory): <u>OWNER</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: MARCE WILLIAMS FOR MAYOR

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 1/5/12	4. Name (Last, First): <u>PTG ADVENTURES LLC</u>
2. <u>Contribution Amt.</u> \$ 750	5. Address: <u>17534 W. 83<sup>RD</sup> DR</u>
3. <u>Aggregate Amt. *</u> \$ 750	6. City/State/Zip: <u>GOLDEN, CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. <u>Date Accepted</u> 10/13	4. Name (Last, First): <u>MARMIFF, MELISSA</u>
2. <u>Contribution Amt.</u> \$ 50-	5. Address: <u>16572 W. 65<sup>TH</sup> CIR</u>
3. <u>Aggregate Amt. *</u> \$ 50-	6. City/State/Zip: <u>ARUNDA, CO 80007</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Pay Inv</u>
	8. Employer (if applicable, mandatory): <u>CITY OF ARUNDA</u>
	9. Occupation (if applicable, mandatory): <u>Economic Development</u>

1. <u>Date Accepted</u> 10.7	4. Name (Last, First): <u>INDUSTRIAL CHEMICAL CORPORATION</u>
2. <u>Contribution Amt.</u> \$ 50-	5. Address: <u>4631 W. 58<sup>TH</sup> AVE</u>
3. <u>Aggregate Amt. *</u> \$ 500-	6. City/State/Zip: <u>ARUNDA, CO 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. <u>Date Accepted</u> 12.8	4. Name (Last, First): <u>Hauptman, Patricia</u>
2. <u>Contribution Amt.</u> \$ 750-	5. Address: <u>1501 WAZEE #4C</u>
3. <u>Aggregate Amt. *</u> \$ 750-	6. City/State/Zip: <u>DENVER, CO 80202</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIRED</u>
	9. Occupation (if applicable, mandatory): _____

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

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

Full Name of Committee/Person: MARC WILLIAMS FOR MAYOR

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

PLEASE PRINT/TYPE

1. Date Accepted <u>10/8</u>	4. Name (Last, First): <u>HALDTMAN, JEROLD</u>
2. Contribution Amt. \$ <u>750-</u>	5. Address: <u>1501 WAZEE ST APT 4C</u>
3. Aggregate Amt. * \$ <u>750-</u>	6. City/State/Zip: <u>DENVER, CO 80202</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): <u>RETIROD</u>
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/9</u>	4. Name (Last, First): <u>MILS, TONY</u>
2. Contribution Amt. \$ <u>500-</u>	5. Address: <u>6880 S. YOSEMITE CT.</u>
3. Aggregate Amt. * \$ <u>500-</u>	6. City/State/Zip: <u>CENTENNIAL, CO 80112</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PMY PM</u>
	8. Employer (if applicable, mandatory): <u>COLORADO CONTRACTORS ASSOC</u>
	9. Occupation (if applicable, mandatory): <u>EXECUTIVE DIRECTOR</u>

1. Date Accepted <u>10/9</u>	4. Name (Last, First): <u>KWM VENTURES, INC</u>
2. Contribution Amt. \$ <u>250-</u>	5. Address: <u>17834 W. 53RD DRIVE</u>
3. Aggregate Amt. * \$ <u>250-</u>	6. City/State/Zip: <u>GOLDEN CO 80403</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>CHECK</u>
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>9.30</u>	4. Name (Last, First): <u>HATCHER, NATHAN</u>
2. Contribution Amt. \$ <u>15-</u>	5. Address: <u>9028 W. 57TH PLACE</u>
3. Aggregate Amt. * \$ <u>15-</u>	6. City/State/Zip: <u>ARANDA, CA 90005</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>PMY PM</u>
	8. Employer (if applicable, mandatory): <u>N/A</u>
	9. Occupation (if applicable, mandatory): _____

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

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

Full Name of Committee/Person: MARC WILLIAMS FOR MAYOR

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10.3	4. Name: <u>MARKEY DIRECT POSTAGE ACCT</u>
2. <u>Amount</u> \$ 6814.15	5. Address: <u>6494 W. 91ST AVE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WATKINSVILLE, CO 80231</u>
	7. Purpose of Expenditure: <u>MAILING EXPENSE</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10.3	4. Name: <u>COLORADO LITTO</u>
2. <u>Amount</u> \$ 2509.48	5. Address: <u>6494 W. 91ST AVE</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>WATKINSVILLE, CO 80231</u>
	7. Purpose of Expenditure: <u>PRINTING</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10.5	4. Name: <u>COSTCO</u>
2. <u>Amount</u> \$ 109.50	5. Address: <u>5195 WASHINGTON BLVD</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARUNDALE, CO 80002</u>
	7. Purpose of Expenditure: <u>STAMPS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10.8	4. Name: <u>WIC COMMUNICATIONS</u>
2. <u>Amount</u> \$ 1800.00	5. Address: <u>1752 LOCUS ST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80220</u>
	7. Purpose of Expenditure: <u>ARUNDALE PRESS ADS</u>
	<input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/8	4. Name: <u>WIC COMMUNICATIONS</u>
2. <u>Amount</u> \$ 300.00	5. Address: <u>1752 LOCUS ST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>DENVER, CO 80220</u>
	7. Purpose of Expenditure: <u>CANVASSING ADS</u>
	<input type="checkbox"/> Check box if Electioneering Communication



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

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

Full Name of Committee/Person: MARC WILLIAMS FOR MAYOR

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <b>9/19 - 10/9</b>	4. Name: <u>PAUL PAUL</u>
2. <u>Amount</u> \$ <b>41.09</b>	5. Address: <u>2211 N. 1<sup>ST</sup> ST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>SAN JOSE, CA 95131</u>
	7. Purpose of Expenditure: <u>SERVICES 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

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