

RECEIVED

OCT 16 2018

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COMMITTEE REPORT OF CONTRIBUTIONS AND EXPENDITURES

A Committee Registration form must be filed with the Town Clerk prior to taking any contributions for a candidate or an issue, or making any expenditures on behalf of a candidate or an issue. Formation of a Committee requires that a separate bank account be opened in the name of the Committee, and that all contributions, contributions in kind, loans, and expenditures be reported on the forms provided by the Town Clerk.

NAME OF COMMITTEE: Committee to Elect Kathy Redmond

Registered Agent: Sarah K Redmond

Phone Number: 720-841-0078

Email Address: KRedmondBrown@gmail.com

Committee Type: Candidate Committee Issue Committee

Name of Committee's Bank: Guaranty Bank and Trust

Regularly Scheduled Filing

Amended Filing. This amends previous report filed on _____

Termination Report (Termination Reports **MUST** Have a Zero Balance)

REPORTING PERIOD - Beginning Date: Oct 1, 2018 Ending Date: Oct 11, 2018

BEGINNING BALANCE	\$ <u>650.00</u>
Contributions (+)	\$ <u>1300.00</u>
Contributions In Kind (+)	\$ _____
Loans (+)	\$ <u>138.90</u>
Expenditures/Expenditures In-Kind (-)	\$ <u>138.90</u>
ENDING BALANCE	\$ <u>1,950.00</u>

I hereby certify that to the best of my knowledge and belief all contributions received and all expenditures made during this reporting period are accurately reflected in this report.

Registered Agent's Name: Sarah K Redmond

Registered Agent's Signature: *Sarah K Redmond* Date: 10/16/18

If Applicable

Candidate Name: Kathy Redmond

Candidates Signature: *Sarah K Redmond* Date: 10/16/18

Detailed Report of CONTRIBUTIONS

(Includes funds spent by the Candidate for Expenditures – list as a Contribution and as an Expenditure)

Name of Committee: Committee To Elect Kathy Redmond

<u>Date Accepted:</u> <u>10/2/18</u> _____ Amount: <u>50.00</u> \$ _____	<u>Patrick Neville</u> NAME (First, Last): _____ <u>200 E Colfax Ave</u> Address: _____ <u>Denver, CO 80202</u> City/State/Zip: _____
<u>Date Accepted:</u> <u>10/3/18</u> _____ Amount: <u>1000.00</u> \$ _____	<u>Metro Denver Housing Coalition</u> NAME (First, Last): _____ <u>9033 E. Easter Place Suite 200</u> Address: _____ <u>Centennial, CO 80112</u> City/State/Zip: _____
<u>Date Accepted:</u> <u>10/9/18</u> \$ _____ Amount: <u>250.00</u> \$ _____	<u>Matt Knoedler</u> NAME (First, Last): _____ <u>1801 California Street, Suite 4900</u> Address: _____ <u>Denver, CO 80202</u> City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____

Detailed Report of EXPENDITURES

(Include Value of Expenditure made from In-Kind Contributions or money spent by the Candidate)

Committee To Elect Kathy Redmond

Name of Committee: _____

<u>Date Expended:</u> 10/3/18 _____ Amount: 138.90 \$ _____	Vistaprint PAYABLE TO: _____ Address: Hudsonweg 8 Venlo, _____ City/State/Zip: The Netherlands 5928LW _____ Purpose/Description: Door Hangers _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____ _____

Detailed Report of CONTRIBUTIONS IN KIND
 (Value of an In-Kind Contribution is also recorded under Expenditures)

Name of Committee: _____

<u>Date Accepted:</u> _____ Estimated Value: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____ Estimated Value: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____ Estimated Value: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____ Estimated Value: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____

Detailed Report of LOANS

Name of Committee: Committee To Elect Kathy Redmond

<u>Date Received:</u> 10/3/18 _____ Amount: 138.90 \$ _____	FROM: Kathy Redmond _____ Address: 4527 N Foxtail Dr _____ City/State/Zip: Castle Rock, CO 80109 _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____