

City of Lakewood
City Clerk's Office
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Lakewood, CO 80226
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OFFICE OF THE
CITY CLERK

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

Full Name of Committee/Person:	Friends of Amy Attwood <small>As Shown On Registration</small>
Address of Committee/Person:	2327 S. Deviney St
City, State & Zip Code:	Lakewood CO 80228
Committee Type:	
Name and Address of Financial Institution	1st Bank of Lakewood P.O. Box 260400 80226

SOS ID NUMBER (state committees ONLY):

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: 10/9/09 Through 10/25/09
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)	\$ 7817.33
2	Total Monetary Contributions (line 11)	\$ 800.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 8617.33
4	Total Monetary Expenditures (line 19)	\$ 9088.45
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ < 471.12 >

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: Cyndi Willey
Registered Agent's Signature: Cyndi Willey Date: 10/29/09
Print Candidate Name: Amy Attwood
Candidates Signature: Amy Attwood Date: 10/30/09

DETAILED SUMMARY

Full Name of Committee/Person: Friends of Amy Attwood

Current Reporting Period: 10/9/09 Through 10/25/09

	Funds on hand at the beginning of reporting period (Monetary Only)	\$	7817.33
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$	800.00
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)	\$	800.00
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$	0
13	Total Contributions (Line 11 + line 12)	\$	800.00
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$	9083.45
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$	5.00
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)	\$	9088.45
20	Total Spending (Line 18 + line 19)	\$	9088.45

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

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

Full Name of Committee/Person: Friends of Amy Attwood

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/10/09	4. Name (Last, First): <u>Roberts Carolyn L.</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>7597 S. Parkview Way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Littleton 80127</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Retired</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/10/09	4. Name (Last, First): <u>Schneckenburger Joe</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>PO Box 650</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Golden 80402</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>retired</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/10/09	4. Name (Last, First): <u>Hruska Barbara A</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>15001 Parkside Rd</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Parker 80134</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Retired</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 10/10/09	4. Name (Last, First): <u>Nicholas II Mario D</u>
2. <u>Contribution Amt.</u> \$ 50.00	5. Address: <u>610 S. Yarrow St</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Lakewood 80226</u>
<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 A – Itemized Contributions Statement (\$20 or more)

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

Full Name of Committee/Person: Friends of Amy Attwood

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 10/10/09	4. Name (Last, First): <u>Realtor Candidate Political Action Cmtee</u>
2. <u>Contribution Amt.</u> \$ <u>450.00</u>	5. Address: <u>309 Inverness Way South</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood 80112</u>
<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)
[C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Friends of Amy Attwood

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 10/14/09	4. Name: <u>Fox Point Cleaners Post Office</u>
2. <u>Amount</u> \$ 336.00	5. Address: <u>13701 W. Jewell Ave #102</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Lkwd 80228</u>
	7. Purpose of Expenditure: <u>Stamps / Advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/09/09	4. Name: <u>Ariss Marketing Group Inc *</u>
2. <u>Amount</u> \$ 4095.08	5. Address: <u>3443 S. Galena St #120</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Denver 80231</u>
	7. Purpose of Expenditure: <u>Direct mail / Printed materials</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/20/09	4. Name: <u>Constant Contact</u>
2. <u>Amount</u> \$ 30.00	5. Address: <u>constantcontact.com</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: <u>Advertising / marketing</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 10/21/09	4. Name: <u>Ariss Marketing Group Inc *</u>
2. <u>Amount</u> \$ 872.02	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> 10/25/09	4. Name: <u>Ariss Marketing Group Inc *</u>
2. <u>Amount</u> \$ 3750.35	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

N/A

Schedule C - Loans

Full Name of Committee/Person: Friends of Amy Attwood

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): _____

Address: _____

City/State/Zip: _____

Original Amount of Loan: \$ _____ Interest Rate: _____

Loan Amount Received This Reporting Period: \$ _____

Total of All Loans This Reporting Period: \$ _____
(Place on line 8 of Detailed Summary Report)

Principal Amount Paid This Reporting Period: \$ _____

Interest Amount Paid This Reporting Period: \$ _____

Amount Repaid This Reporting Period: \$ _____
(Amount Repaid is sum of Principal & Interest entered on Detail Summary)

Total Repayments Made: \$ _____
(Sum of Schedule C pages, Place on line 16 of Detailed Summary)

Outstanding Balance: \$ _____

TERMS OF LOAN: _____
Date Loan Received

Due Date for Final Payment

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

NIA

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: Friends of Amy Attwood

Returned Contributions

(Previously reported on Schedule A -- Contributions accepted and then returned to donors)

PLEASE PRINT/TYPE

Form with fields: 1. Date Accepted, 2. Date Returned, 3. Amount, 4. Name (Last, First), 5. Address, 6. City/State/Zip, 7. Purpose.

Form with fields: 1. Date Accepted, 2. Date Returned, 3. Amount, 4. Name (Last, First), 5. Address, 6. City/State/Zip, 7. Purpose.

Returned Expenditures

(Previously reported on Schedule B – Expenditures returned or refunded to the committee)

PLEASE PRINT/TYPE

Form with fields: 1. Date Expended, 2. Date Returned, 3. Amount, 4. Name (Last, First), 5. Address, 6. City/State/Zip, 7. Comment (Optional).

Form with fields: 1. Date Expended, 2. Date Returned, 3. Amount, 4. Name (Last, First), 5. Address, 6. City/State/Zip, 7. Comment (Optional).

N/A

Statement of Non-Monetary Contributions
[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & C.R.S. 1-45-108(1)]

Full Name of Committee/Person: Friends of Amy Attwood

PLEASE PRINT/TYPE

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</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>): _____
	10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "...Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."