



City Clerk's Office Lakewood Civic Center 480 S Allison Parkway Lakewood, CO 80226-3127

> Phone: 303-987-7080 Fax: 303-987-7088 TDD: 303-987-7057

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee	Leadership Lakewood
Address of Committee	7830 W. Alameda Ave, Suite 103-173
City, State & Zip Code	Lakewood, CO 80226
Committee Type	Independent Expenditure Committee
Name and Address of	US Bank, 2701 Welton Street, Denver, CO 80205
Financial Institution	
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 E)
Report Period Covered	from December 2, 2017 through September 6, 2019

	Name of C		Leadership Lak	kewood nrough 09/06/2019							
то	TAL CONTRI	BUTIONS	\$ - (total amount is calculated based on the entries below)								
#	Date: Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)			
1											
2											
3											
4											
5											
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7											
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9											
10											
11											
12											
13											
14											

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
20								
21					_			
22								
23								
24								
25								
26								
27								
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35								
36								
37								
38								
39								
40								
41								

_					(more than \$20.00)			I
#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
42								
43								
44								
45								
46								
47								
48								
49								
50								
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60								
61								
62								
63								

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
64								
65								
66								
67								
68								
69								
70								
71								
72								
73								
74								
75								
76								
77								
78								
79								
80								
81								
82				6	(9)		3.52	
83								
84								
85								

_					(more than \$20.00)			T
#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
86								
87								
88								
89								
90								
91								
92								
93								
94								
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96								
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98								
99								
100								
101								
102								
103								
104								
105								
106								
107								

					(more than \$20.00)			
#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
108								
109								
110								
111								
112								
113								
114								
115								
116								
117								
118								
119			,					
120			-					
121								
122								
123								
124				4				
125								
126								
127								
128								
129								

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
130								
131								
132								
133								
134								
135								
136								
137					.=			
138								
139								
140				12				
141								
142								
143								
144								
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146								
147								
148								
149								
150								
151								

#	Date Accepted	Amount	Name	Address	Employer (if applicable, mandatory)	(if applicable mandatory)	Electioneering Communication (Y/N)
152							
153							
154							
155							

STATEMENT OF NON-MONETARY CONTRIBUTIONS

Full Name of Committee Leadership Lakewood Reporting Period 12/02/2017 through 09/06/2019 TOTAL CONTRIBUTIONS (total value is calculated based on the entries below) Employer (if applicable, mandatory) Occupation Electioneering Fair Market Address City/State/Zip Description (if applicable, Communication Name Accepted Value mandatory) (Y/N) 10 11 12

STATEMENT OF NON-MONETARY CONTRIBUTIONS

#	Date Accepted	Fair Market Value	Name	Address	City/State/Zip	Description	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
13									
14									
15									
16									
17				_					
18									
19								_	
20			-						
21,						÷-			
22									
23									
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25								.2	
26									

STATEMENT OF NON-MONETARY CONTRIBUTIONS

#	Date Accepted	Fair Market Value	Name	Address	City/State/Zip	Description	(If applicable,	Occupation (If applicable, mandatory)	Electioneering Communication (Y/N)
27									
28									
29									
30									
31									
32									
33									
34									13
35									
36									
37									
38									
39									
40									

				(more	than \$20.00)					
Full	Name of Cor	nmittee	Leadership Lakewood	i						
Repo	orting Period	l	12/02/2017 through	09/06/2019						
тот	AL EXPENDIT	TURES	\$ -	\$ - (total amount is calculated based on the entries below)						
#	Date of Expense		Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)			
1										
2										
3										
4							Ó			
5										
6										
7										
8										
9										
10										
11										

ITEMIZED EXPENDITURES STATEMENT (more than \$20.00)

				(more	than \$20.00)		
#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
12							
13							
14							
15						V	
16							
17							
18							
19							
20							
21							
22				. 1			
23							
24							

					(more than \$20.00)		
#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
25						1	
26							
27							
28							
29							
30							
31			H				
32							
33							
34							
35							
36							
37							

#	Date of Expense	Amount	Name	Address	city/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
38			-				
39							
40						*.	
41							
42			9				
43							
44							
45							
46							
47							
48					=		
49							
50							

				(more	than \$20.00)		
#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
51							
52							
53							
54							
55							
56							
57							
58							
59			jij				
60					×		
61							
62							
63							

#	Date of Expense	Amount	Name		than \$20.00) City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
64							
65							
66							
67							
68							
69							
70							
71							
72							
73							
74							
75							
76				II.			
77							

LOANS

Full Name of Committee Leadership Lakewood

Reporting Period 12/02/2017 through 09/06/2019

TOTAL OUTSTANDING LOANS \$ - (total amount is calculated based on the entries below)

	LOAN SOU	JRCE	LOAN AMOUNT					
Name	Address	City/State/Zip	Loan amount at the beginning of the reporting period	Amount received this reporting period	Amount repaid this reporting period	Loan balance at the end of the reporting period		
						\$ -		
						\$ =		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
						\$ -		
						\$		
						\$		
						\$ -		
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						\$ -		
						s -		
	-							
						\$ -		
						\$ -		
						\$ =		
						\$ -		

CANDIDATE COMMITTEE FUNDS TRANSFER FORM

This form is used by candidate committees established by the same committee for a different public office intending to transfer existing funds from an existing committee as defined by the Lakewood Municipal Code.

Committee Address (physical) different from physical) Phone Num Fax Num Email Address Transf TRANSFER TO Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transf TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transf TRANSFER TO TRANSFER TO Full Name of Address (physical) Mailing Address (if Phone Num Fax Num Email Address Total Amore Transf	me of Committee Lead	Leadership Lakewood						
Full Name of Committee Address (physical) Mailing Address (if different from physical) TRANSFER TO TRANSFER TO TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) TRANSFER FROM Full Name of Committee TRANSFER TO TOTAL Amount of Committee	ing Period 12/0	12/02/2017 through 09/06/2019						
Committee Address (physical) different from physical) Phone Num Fax Num Email Address Transf TRANSFER TO Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transf TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transf TRANSFER TO TRANSFER TO Full Name of Address (physical) Mailing Address (if Phone Num Fax Num Email Address Total Amore Transf		TRANSFER FROM						
Full Name of Committee Address (physical) Address (physical) Mailing Address (if different from physical) TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amo Transi Transi			Fax Num	Email Address	Total Amount of Transfer			
Full Name of Committee Address (physical) Address (physical) Mailing Address (if different from physical) TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amo Transi Transi								
Committee Address (physical) different from physical) Phone Num Fax Num Email Address Transi TRANSFER FROM Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transi TRANSFER TO Full Name of Address (physical) Mailing Address (if Phone Num Fax Num Email Address Total Amore Transi		TRANSFER TO						
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Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transfer Total Amore Total A								
Full Name of Committee Address (physical) Mailing Address (if different from physical) Phone Num Fax Num Email Address Total Amore Transfer Total Amore Total A	"							
Committee Address (physical) different from physical) Phone Num Fax Num Email Address Transf TRANSFER TO Full Name of Address (physical) Mailing Address (if Phone Num Fax N		TRANSFER FROM			r			
Full Name of Address (physical) Mailing Address (if Phone Num Fax Num Fmail Address Total Amo			Fax Num	Email Address	Total Amount of Transfer			
Full Name of Address (physical) Mailing Address (if Phone Num Fax Num Fmail Address Total Amo								
Address (physical) Phone Num Fax Num Fmail Address		TRANSFER TO	г т					
Trans	INDUTORS (DRIVEICALL	g Address (if Phone Num nt from physical)	Fax Num	Email Address	Total Amount of Transfer			
TRANSFER FROM		TRANSFER FROM	т т					
Address (physical) Phone Num Fax Num Fmail Address	IAddross inhysicall I	- I Phane Nilm	Fax Num	Email Address	Total Amount of Transfer			
TRANSFER TO		TRANSFER TO						
Addroce (physical) The Dhone Num Fav Num Fmail Addroce			Fax Num	Email Address	Total Amount of Transfer			
					-			

DETAILED SUMMARY

Full Name of Committee

Leadership Lakewood

Reporting Period

12/02/2017 through 09/06/2019

Loans - Outstanding Balance, \$ 0.00

	Funds on hand at the beginning of reporting period (Includes Candidate Contribution Funds Transferred)	\$ 876.64
1	Itemized Contributions more than \$20.00	\$ 2003
2	Total of Non-Itemized Contributions (Contributions of \$20.00 or less)	\$ (*)
3	Total Monetary Contributions (Total of lines 1 & 2)	\$ 2 3 7
4	Total Non-Monetary Contributions	\$ ¥.
5	Itemized Expenditures more than \$20.00	\$ (2)
6	Total of Non-Itemized Expenditures (Expenditures of \$20.00 or less)	
7	Total Expenditures (Total of lines 7 & 8)	\$ æ:

TOTALS DETAILED SUMMARY

Α	Funds on Hand at the Beginning of Reporting Period	s	876.64
	(Includes Committee Funds Transferred)	~	0,5.01
В	Total Monetary Contributions (line 3)	\$	
С	Total Contributions & Beginning Amount (line A + line B)	\$	876.64
D	Total Expenditures (line 7)	\$	*
E	Funds on Hand at the End of Reporting Period (line C - line D)	\$	876.64

Print Registered Agent's Name
OR

Print Candidate's Name

Katie Kennedy - Designated Filing Agent

I understand that campaign finance activities are governed by Chapter 2.54 Campaign and Political Finance in Municipal Elections of the Lakewood Municipal Code and the Lakewood City Clerk Rules and Regulations regarding campaign finance.

I further certify that I have read and understand the provisions of Chapter 2.54 Campaign and Political Finance in Municipal Elections of the Lakewood Municipal Code and the Lakewood City Clerk Rules and Regulations regarding campaign finance.

The City Clerk shall impose a penalty for each day a report is filed late per Chapter 2.54.050 (C) Campaign and Political Finance in Municipal Elections of the Lakewood Municipal Code and Rule #13 of the City Clerk Rules and Regulations.

By submitting this form, you are signing this Contributions and Expenditures electronically and certifying the above information to be true and correct, to the best of your knowledge.