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SEP 18 2014

City and County of Broomfield
 Elections

REPORT OF CONTRIBUTIONS AND EXPENDITURES
 [1-45-108, C.R.S.]

Full Name of Committee (as shown on Committee Registration Form)	BILL BATES for WARD 5
Committee Address (include city, state, and zip code)	3377 W 151ST CT BROOMFIELD CO 80023
Committee Type (Candidate or Issue)	CANDIDATE
Name of Financial Institution	BELLCO
Address of Financial Institution	POB 17000 DENVER CO 80217

Type of Report (check one):

- Regularly Scheduled Filing
- Amended Filing for Reporting Period _____
- Termination Report (must indicate a zero balance in line 5 below)

Reporting Period (check one):

- All dates prior to Oct. 10, 2013
- Oct. 11 to Oct. 27, 2013
- Oct. 28 to Nov. 30, 2013

		From Total Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	846.10
2	Total Monetary Contributions (line 11)	-0-
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	846.10
4	Total Monetary Expenditures (line 18)	846.10
5	Monetary Funds on Hand at the End of the Reporting Period (line 3 - line 4)	-0-

This report is due no later than 5:00pm, 5 days after the end of the reporting period. There is a \$50 per day penalty for each day the report is late. [Art. XXVIII, Sec. 10(2)(a), CO Const.]

Authorization (must be completed by the candidate or registered agent): *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 are from permissible sources.*

Print Agent's Name: _____

Print Candidate's Name: BILL BATES

Agent's Signature: _____

Candidate's Signature: Bill Bates

Date: _____

Date: 17 SEP 14

DETAILED SUMMARY

Committee Name: BILL BATES for WARD 5

Reporting Period (check one):

All dates prior to Oct. 10, 2013

Oct. 11 to Oct. 27, 2013

Oct. 28 to Nov. 30, 2013

	Monetary funds on hand at the beginning of the reporting period	\$	
6	Itemized Contributions \$20 or More (Total from Schedule A)	\$	
7	Total of Non-Itemized Contributions (\$19.99 or less not included on Schedule A)	\$	
8	Total Loans Received (Listed on Schedule C)	\$	
9	Total of Other Receipts (interest, dividends, etc.)	\$	
10	Returned Expenditures (from recipient) (Listed on Schedule D)	\$	
11	Total Monetary Contributions (total lines 6 through 10)	\$	-0-
12	Total Non-Monetary Contributions (Listed on Statement of Non-Monetary Contributions)	\$	-0-
13	Total Contributions (line 11 + line 12)	\$	-0-
14	Itemized Expenditures of \$20 or more (Listed on Schedule B)	\$	546.10
15	Total of Non-Itemized Expenditures (\$19.99 or less and not listed on Schedule B)	\$	
16	Loan Repayments Made (Listed on Schedule C)	\$	
17	Contributions Returned to Donor (Listed on Schedule D)	\$	300.00
18	Total Monetary Expenditures (total lines 14 through 17)	\$	846.10
19	Total Coordinated Non-Monetary Expenditures	\$	-0-
20	Total Spending (line 18 + line 19)	\$	846.10

SCHEDULE B - ITEMIZED EXPENDITURES (\$20.00 OR MORE)

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

Full Name of Committee: BILL BATES for WARD 5

Please print or type. You may use additional sheets as necessary.

Date Expended 9/15/14	Recipient/Vendor Name The Wild Life Sanctuary
Amount \$ 546.10	Recipient Address (include city, state, and zip code) 1946 CR30 Keensburg CO 80643
	Description of Expenditure (e.g. campaign signs) Donation to non-profit to close out campaign

Date Expended	Recipient/Vendor Name
Amount \$	Recipient Address (include city, state, and zip code)
	Description of Expenditure (e.g. campaign signs)

Date Expended	Recipient/Vendor Name
Amount \$	Recipient Address (include city, state, and zip code)
	Description of Expenditure (e.g. campaign signs)

Date Expended	Recipient/Vendor Name
Amount \$	Recipient Address (include city, state, and zip code)
	Description of Expenditure (e.g. campaign signs)

Schedule D – Returned Contributions & Expenditures

Full Name of Committee/Person: BILL BATES for WARD 5

Returned Contributions

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

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 6/16/09	4. Name (Last, First): <u>BATES, BILL</u>
2. <u>Date Returned</u> 9/15/14	5. Address: <u>3377 W 151st CT</u>
3. <u>Amount</u> \$ <u>300⁰⁰</u>	6. City/State/Zip: <u>BROOMFIELD CO 80023</u>
	7. Purpose: <u>De-fund committee</u>

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Purpose: _____

Returned Expenditures

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

PLEASE PRINT/TYPE

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

1. <u>Date Expended</u>	4. Name (Last, First): _____
2. <u>Date Returned</u>	5. Address: _____
3. <u>Amount</u>	6. City/State/Zip: _____
\$	7. Comment (Optional): _____

