



City and County of Broomfield, Elections Division  
 One DesCombes Drive  
 Broomfield, CO 80020  
 Ph: (303) 464-5857  
 Fax: (303) 410-3815  
[electionsdivision@broomfield.org](mailto:electionsdivision@broomfield.org)  
[www.votebroomfield.org](http://www.votebroomfield.org)

Space Below For Office Use Only:

**RECEIVED**

**OCT 15 2013**

CITY AND COUNTY OF BROOMFIELD

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

Full Name of Committee (as shown on Committee Registration Form)	Sam Taylor 4 Broomfield
Committee Address (include city, state, and zip code)	275 W. 4th Ave Dr Broomfield CO 80020
Committee Type (Candidate or Issue)	Candidate
Name of Financial Institution	Wells Fargo
Address of Financial Institution	2 Garden Center Broomfield CO 80020

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)	0
2	Total Monetary Contributions (line 11)	2765 <sup>00</sup>
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	2765 <sup>00</sup>
4	Total Monetary Expenditures (line 18)	2016 <sup>14</sup>
5	Monetary Funds on Hand at the End of the Reporting Period (line 3 - line 4)	748 <sup>86</sup>

**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: Sam Taylor

Agent's Signature: \_\_\_\_\_

Candidate's Signature: [Signature]

Date: \_\_\_\_\_

Date: 10/14/13

**DETAILED SUMMARY**

Committee Name: San Taylor 4 Broomfield

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	\$ 0
6	Itemized Contributions \$20 or More (Total from Schedule A)	\$ 2765 <sup>00</sup>
7	Total of Non-Itemized Contributions (\$19.99 or less not included on Schedule A)	\$ 0
8	Total Loans Received (Listed on Schedule C)	\$ 0
9	Total of Other Receipts (interest, dividends, etc.)	\$ 0
10	Returned Expenditures (from recipient) (Listed on Schedule D)	\$ 0
11	<b>Total Monetary Contributions</b> (total lines 6 through 10)	\$ 2765 <sup>00</sup>
12	Total Non-Monetary Contributions (Listed on Statement of Non-Monetary Contributions)	\$ 90 <sup>00</sup>
13	<b>Total Contributions</b> (line 11 + line 12)	\$ 2855 <sup>00</sup>
14	Itemized Expenditures of \$20 or more (Listed on Schedule B)	\$ 2016 <sup>14</sup>
15	Total of Non-Itemized Expenditures (\$19.99 or less and not listed on Schedule B)	\$ 0
16	Loan Repayments Made (Listed on Schedule C)	\$ 0
17	Contributions Returned to Donor (Listed on Schedule D)	\$ 0
18	<b>Total Monetary Expenditures</b> (total lines 14 through 17)	\$ 2016 <sup>14</sup>
19	Total Coordinated Non-Monetary Expenditures	\$
20	<b>Total Spending</b> (line 18 + line 19)	\$ 2016 <sup>14</sup>

**SCHEDULE A - ITEMIZED CONTRIBUTIONS (\$20.00 OR MORE)**  
**[1-45-108(1)(a), C.R.S.]**

Full Name of Committee: Sam Taylor 4 Broomfield

Read Schedule A Instructions before completing. Please print or type. You may use additional sheets as necessary.

Date Accepted 10/4/13	Last Name Revisor Candidate PAC	First Name
Contribution Amount \$ 100 <sup>00</sup>	Address (include city, state, and zip code) 309 Inverness Way South Englewood CO 80112	
Aggregate Amount \$ 2650 <sup>00</sup>	Description check	
	Employer	Occupation

Date Accepted 10/10/13	Last Name Parker	First Name Scott
Contribution Amount \$ 50 <sup>00</sup>	Address (include city, state, and zip code) PO Box 285 Broomfield CO 80513	
Aggregate Amount \$ 2700 <sup>00</sup>	Description Cash	
	Employer Optimum Systems Int.	Occupation Sales

Date Accepted 10/10/13	Last Name Johnson	First Name Jud. 46
Contribution Amount \$ 40 <sup>00</sup>	Address (include city, state, and zip code) 47 Scott Dr S. Broomfield CO 80020	
Aggregate Amount \$ 2740 <sup>00</sup>	Description check	
	Employer N/A	Occupation N/A

Date Accepted 10/10/13	Last Name Belval	First Name Virginia
Contribution Amount \$ 25 <sup>00</sup>	Address (include city, state, and zip code) 1655 Emerald Broomfield CO 80020	
Aggregate Amount \$ 2765 <sup>00</sup>	Description check	
	Employer N/A	Occupation

**SCHEDULE A - ITEMIZED CONTRIBUTIONS (\$20.00 OR MORE)**

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

Full Name of Committee: Sam Taylor 4 Broomfield

Read Schedule A Instructions before completing. Please print or type. You may use additional sheets as necessary.

Date Accepted 8/26/13	Last Name Taylor	First Name Sam
Contribution Amount \$ 800 <sup>00</sup>	Address (include city, state, and zip code) 275 W. 4 <sup>th</sup> Ave Dr Broomfield CO 80020	
Aggregate Amount \$ 800 <sup>00</sup>	Description Check	
	Employer Source Communications	Occupation/ Sales Manager

Date Accepted	Last Name Quinn	First Name Pat
Contribution Amount \$ 100 <sup>00</sup>	Address (include city, state, and zip code) 14051 Cortez Ct Broomfield CO 80020	
Aggregate Amount \$ 900 <sup>00</sup>	Description Check	
	Employer Loja Group LLC	Occupation CPA

Date Accepted 9/29/13	Last Name D. Tges	First Name Jeff
Contribution Amount \$ 100 <sup>00</sup>	Address (include city, state, and zip code) 13960 Cortez Ct Broomfield CO 80020	
Aggregate Amount \$ 1000 <sup>00</sup>	Description Check	
	Employer Source Communications	Occupation President

Date Accepted 9/29/13	Last Name Jacobs	First Name Kevin
Contribution Amount \$ 100 <sup>00</sup>	Address (include city, state, and zip code) 295 W. 4 <sup>th</sup> Ave Dr Broomfield CO 80020	
Aggregate Amount \$ 1100 <sup>00</sup>	Description Check	
	Employer University of Colorado	Occupation H. R.

**SCHEDULE A - ITEMIZED CONTRIBUTIONS (\$20.00 OR MORE)**

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

Full Name of Committee: Sam Taylor 4 Broomfield

Read Schedule A Instructions before completing. Please print or type. You may use additional sheets as necessary.

Date Accepted 9/29/13	Last Name Stokes	First Name Greg
Contribution Amount \$ 100 <sup>00</sup>	Address (include city, state, and zip code) 14140 Fairway Lane Broomfield CO 80020	
Aggregate Amount \$ 1200 <sup>00</sup>	Description Check	
	Employer Self employed	Occupation Investor

Date Accepted 10/2/13	Last Name Taylor	First Name Sam
Contribution Amount \$ 1000 <sup>00</sup>	Address (include city, state, and zip code) 275 W. 4 <sup>th</sup> Ave Dr Broomfield CO 80020	
Aggregate Amount \$ 2200 <sup>00</sup>	Description check	
	Employer Source Communications	Occupation Sales Manager

Date Accepted 10/2/13	Last Name McCloskey	First Name Dennis
Contribution Amount \$ 50 <sup>00</sup>	Address (include city, state, and zip code) 436 Hickory St. Broomfield CO 80020	
Aggregate Amount \$ 2250 <sup>00</sup>	Description check	
	Employer	Occupation Real Estate

Date Accepted 10/4/13	Last Name Polis	First Name Jarod
Contribution Amount \$ 300 <sup>00</sup>	Address (include city, state, and zip code) PO Box 24749 Denver CO 80224	
Aggregate Amount \$ 2550	Description check	
	Employer US Government	Occupation Congressman

**STATEMENT OF NON-MONETARY CONTRIBUTIONS**  
 [Art. XXVIII, Sec. 2 (5)(a)(II)(III) and Sec. 5 (3) CO Const. and 1-45-108(1), C.R.S.]

Full Name of Committee: Sam Taylor 4 Broomfield

Date Provided 9/3/13	Last Name D. Tsed	First Name Laura
Fair Market Value \$ 90 <sup>00</sup>	Address (include city, state, and zip code) 13960 Cortez Ct Broomfield CO 80020	
Aggregate Amount \$ 90 <sup>00</sup>	Description Printing of Flyers	
	Employer Source Communications	Occupation CFO
<input type="checkbox"/> Check box if coordinated with a candidate/committee or political party.		

Date Provided	Last Name	First Name
Fair Market Value \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation
<input type="checkbox"/> Check box if coordinated with a candidate/committee or political party.		

Date Provided	Last Name	First Name
Fair Market Value \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation
<input type="checkbox"/> Check box if coordinated with a 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."

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

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

Full Name of Committee:

*Sam Taylor 4 Broomfield*

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

Date Expended <i>9/10/13</i>	Recipient/Vendor Name <i>Sign Depot</i>
Amount \$ <i>385<sup>00</sup></i>	Recipient Address (include city, state, and zip code) <i>1813 E Colonial Dr Orlando FL 32803</i>
	Description of Expenditure (e.g. campaign signs) <i>Yard Signs</i>

Date Expended <i>9/22/13</i>	Recipient/Vendor Name <i>City &amp; County of Broomfield</i>
Amount \$ <i>50<sup>00</sup></i>	Recipient Address (include city, state, and zip code) <i>Broomfield CO 80020</i>
	Description of Expenditure (e.g. campaign signs) <i>Mailing list</i>

Date Expended <i>10/4/13</i>	Recipient/Vendor Name <i>Uprinting</i>
Amount \$ <i>1581<sup>14</sup></i>	Recipient Address (include city, state, and zip code) <i>10932 Santa Monica Blvd</i>
	Description of Expenditure (e.g. campaign signs) <i>Post Card Mailer</i>

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