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DEC 04 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)	BROOMFIELD BALANCED ENERGY COALITION
Committee Address (include city, state, and zip code)	2698 CREEKSIDE DR BROOMFIELD CO 80023
Committee Type (Candidate or Issue)	ISSUE
Name of Financial Institution	1ST BANK
Address of Financial Institution	1190 HWY 287 BROOMFIELD CO

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)	75,516.72
2 Total Monetary Contributions (line 11)	- 0 -
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	75,516.72
4 Total Monetary Expenditures (line 18)	75,516.72
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: DON BEEZLEY

Print Candidate's Name: _____

Agent's Signature: *Don Beezley*

Candidate's Signature: _____

Date: 12/4/2013

Date: _____

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

Full Name of Committee: **BRANFIELD BALANCED ENERGY COALITION**

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

Date Accepted	Last Name N/A	First Name
Contribution Amount \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation

Date Accepted	Last Name	First Name
Contribution Amount \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation

Date Accepted	Last Name	First Name
Contribution Amount \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation

Date Accepted	Last Name	First Name
Contribution Amount \$	Address (include city, state, and zip code)	
Aggregate Amount \$	Description	
	Employer	Occupation

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

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

Full Name of Committee: Bronfield Balanced Energy Coalition

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

Date Expended	Recipient/Vendor Name
10/28/13	EIS SOLUTIONS
Amount	Recipient Address (include city, state, and zip code)
\$ 35,589.97	PO BOX 5352, FRISCO, CO 80443
	Description of Expenditure (e.g. campaign signs)
	CANVASSING

Date Expended	Recipient/Vendor Name
10/29/2013	SWS POLITI LLC
Amount	Recipient Address (include city, state, and zip code)
\$ 1000.00	PO BOX 931 LAFAYETTE, CO 80026
	Description of Expenditure (e.g. campaign signs)
	OCT. ACCOUNTING

Date Expended	Recipient/Vendor Name
10/30/2013	JOHN WIGHT
Amount	Recipient Address (include city, state, and zip code)
\$ 175.00	7281 KENTUCKY LAKEWOOD, CO 80726
	Description of Expenditure (e.g. campaign signs)
	DOOR HANGERS

Date Expended	Recipient/Vendor Name
10/31/2013	1ST BANK
Amount	Recipient Address (include city, state, and zip code)
\$ 1.00	1190 US HWY 287 BRONFIELD CO 80020
	Description of Expenditure (e.g. campaign signs)
	BANK CHARGE

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

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

Full Name of Committee: BROOMFIELD BALANCED ENERGY COALITION

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

Date Expended	Recipient/Vendor Name
11/5/2013	IKUE STRATEGIES
Amount	Recipient Address (include city, state, and zip code)
\$ 31,000.00	837 SHERMAN ST. STE 2D DENVER CO 80203
	Description of Expenditure (e.g. campaign signs)
	OCT CONSULTING, MAIL

Date Expended	Recipient/Vendor Name
11/21/2013	SWS POLIFI LLC
Amount	Recipient Address (include city, state, and zip code)
\$ 1000.00	PO BOX 931 LAFAYETTE CO 80026
	Description of Expenditure (e.g. campaign signs)
	NOV. ACCOUNTING

Date Expended	Recipient/Vendor Name
11/26/2013	LEE KEALP
Amount	Recipient Address (include city, state, and zip code)
\$ 3750.00	12745 WINDONA CIR BROOMFIELD, CO 80020
	Description of Expenditure (e.g. campaign signs)
	OCT & NOV CONSULTING

Date Expended	Recipient/Vendor Name
11/29/2013	IKUE STRATEGIES
Amount	Recipient Address (include city, state, and zip code)
\$ 3000.75	837 SHERMAN ST STE 2D DENVER CO 80203
	Description of Expenditure (e.g. campaign signs)
	NOV. CONSULTING

SCHEDULE C - LOANS

Full Name of Committee: BROOMFIELD BALANCED ENERGY COALITION

N/A

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 (Financial Institution or Full Name of Individual): _____

Address (include city, state and zip code): _____

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

Loan Amount Received This Reporting Period: \$ _____ Total of All Loans

Principal Amount Paid This Reporting Period: \$ _____ This Reporting Period: \$ _____
 (Enter onto line 8 of Detailed Summary)

Interest Amount Paid This Reporting Period: \$ _____

Amount Repaid This Reporting Period: \$ _____ Total Repayments: \$ _____
 (Sum of principal and interest entered on Detailed Summary) (Sum of all Schedule C pages; enter into line 16 of Detailed Summary)

Outstanding Balance: \$ _____

Date Loan Received: _____ Due Date for Final Payment: _____

List all endorsers or guarantors of this loan:

Full Name	Address, City, State, Zip Code	Amount Guaranteed
		\$
		\$
		\$
		\$

SCHEDULE D - RETURNED CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee: **Broomfield Balanced Energy Coalition**
N/A

Returned Contributions
(Previously reported on Schedule A and later returned to the donor)

Date Accepted	Recipient/Vendor Name
Date Returned	Recipient Address (include city, state, and zip code)
Amount Returned	Purpose

Date Accepted	Recipient/Vendor Name
Date Returned	Recipient Address (include city, state, and zip code)
Amount Returned	Purpose

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

Date Expended	Original Recipient/Vendor Name
Date Returned	Recipient Address (include city, state, and zip code)
Amount Returned	Comments

Date Expended	Original Recipient/Vendor Name
Date Returned	Recipient Address (include city, state, and zip code)
Amount Returned	Comments

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: **BROOMFIELD BALANCED ENERGY COALITION**
N/A

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.		

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."