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City and County of
 Broomfield Elections

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

Full Name of Committee (as shown in Committee Registration Form)	It's Our Broomfield Too!
Committee Address (include city, state, and zip code)	2951 N Princess Circle Broomfield CO 80020
Committee Type (Candidate or Issue)	Issue
Name of Financial Institution	Chase Bank
Address of Financial Institution	2371 W 128th Ave Westminster, CO 80234

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
Funds on Hand at the Beginning of Reporting Period (monetary only)	10,991.80
Total Monetary Contributions (line 11)	74.00
Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	11,065.80
Total Monetary Expenditures (line 18)	13,221.18
Monetary Funds on Hand at the End of the Reporting Period (line 3 - line 4)	9,743.62

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: LINDA L. REYNOLDS

Print Candidate's Name: _____

Agent's Signature: *Linda L. Reynolds*

Candidate's Signature: _____

Date: 10-30/2013

Date: _____

DETAILED SUMMARY

Committee Name: H's Our Broomfield Too!

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	\$	10991.80
6	Itemized Contributions \$20 or More (Total from Schedule A)	\$	0.00
7	Total of Non-Itemized Contributions (\$19.99 or less not included on Schedule A)	\$	0.00
8	Total Loans Received (Listed on Schedule C)	\$	0.00
9	Total of Other Receipts (Interest, dividends, etc.)	\$	0.00
10	Returned Expenditures (from recipient) (Listed on Schedule D)	\$	74.00
11	Total Monetary Contributions (total lines 6 through 10)	\$	74.00
12	Total Non-Monetary Contributions (Listed on Statement of Non-Monetary Contributions)	\$	0.00
13	Total Contributions (line 11 + line 12)	\$	74.00
14	Itemized Expenditures of \$20 or more (Listed on Schedule B)	\$	1310.18
15	Total of Non-Itemized Expenditures (\$19.99 or less and not listed on Schedule B)	\$	12.00
16	Loan Repayments Made (Listed on Schedule C)	\$	0.00
17	Contributions Returned to Donor (Listed on Schedule D)	\$	0.00
18	Total Monetary Expenditures (total lines 14 through 17)	\$	1322.18
19	Total Coordinated Non-Monetary Expenditures	\$	0.00
20	Total Spending (line 18 + line 19)	\$	1322.18

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

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

- NONE -

Full Name of Committee: It's Our Broomfield Too!

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

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

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

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.]

- NONE -

Full Name of Committee: It's Our Broomfield Too!

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."

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

Full Name of Committee: It's Our Broomfield Too!

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

Date Expended	Recipient/Vendor Name
10/15/2013	Prairie Mountain Publishing
Amount	Recipient Address (include city, state, and zip code)
\$ 560.18	PO Box 591, Boulder CO 80306
	Description of Expenditure (e.g. campaign signs)
	Ad in Broomfield Enterprise Sunday Edition 10/20/2013

Date Expended	Recipient/Vendor Name
10/17/2013	Wight Space
Amount	Recipient Address (include city, state, and zip code)
\$ 750.00	7281 W Kentucky Dr #C PR Lakewood CO 80224 356023886
	Description of Expenditure (e.g. campaign signs)
	Door Hanger Purple with Tears 1 Ad for 10x8 vertical

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 C - LOANS

Full Name of Committee: It's Our Broomfield Too!

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): — NONE —

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: HS Our Broomfield Zoo!

Returned Contributions
(Previously reported on Schedule A and later returned to the donor) - NONE -

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
9/24/2013	Broomfield Auditorium
Date Returned	Recipient Address (include city, state, and zip code)
10/22/2013	3 Community Park Rd, Broomfield CO 80020
Amount Returned	Comments
\$ 74.00	Deposit return original ck # 999992 returned deposit ck # 51675

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