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CITY OF LAKWOOD, COLO.  
2019 NOV -4 P 3:03  
OFFICE OF THE  
CITY CLERK



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	Protect Lakewood Parks and Open Space
Address of Committee	1338 Chase Street
City, State & Zip Code	Lakewood, CO 80214
Committee Type	Independent Expenditure Committee
Name and Address of Financial Institution	First Bank 264 Union Blvd., Lakewood, CO 80028

### 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      November 2, 2019      through 11/04/19 (48-hour report)

**ITEMIZED CONTRIBUTIONS STATEMENT**

Full Name of Committee		Protect Lakewood Parks and Open Space						
Reporting Period		11/02/2019 through 11/04/19 (48-hour report)						
TOTAL CONTRIBUTIONS		\$ - (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								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
20								
21								
22								
23								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
42								
43								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
64								
65								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
86								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
108								
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**ITEMIZED CONTRIBUTIONS STATEMENT**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electioneering Communication (Y/N)
130								
131								
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151								

### ITEMIZED CONTRIBUTIONS STATEMENT

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

**STATEMENT OF NON-MONETARY CONTRIBUTIONS**

<b>Full Name of Committee</b>		Protect Lakewood Parks and Open Space							
<b>Reporting Period</b>		11/02/2019 through 11/04/19 (48-hour report)							
<b>TOTAL CONTRIBUTIONS</b>		\$ - (total value is calculated based on the entries below)							
#	Date Accepted	Fair Market Value	Name	Address	City/State/Zip	Description	Employer (if applicable, mandatory)	Occupation (if applicable, mandatory)	Electroneering Communication (Y/N)
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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									
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26									

**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)
27									
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### ITEMIZED EXPENDITURES STATEMENT

Full Name of Committee		Protect Lakewood Parks and Open Space					
Reporting Period		11/02/2019 through 11/04/19 (48-hour report)					
TOTAL EXPENDITURES		\$ 10,000.00 (total amount is calculated based on the entries below)					
#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
1	11/2/19	\$ 10,000.00	Blitz Canvassing, LLC	7600 E Eastman Ave	Denver, CO 80231	Canvassing	Y
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### ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
12							
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**ITEMIZED EXPENDITURES STATEMENT**

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
25							
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### ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
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**ITEMIZED EXPENDITURES STATEMENT**

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
51							
52							
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63							

**ITEMIZED EXPENDITURES STATEMENT**

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure	Electioneering Communication (Y/N)
64							
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## LOANS

## 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.

<b>Full Name of Committee</b>		<b>Protect Lakewood Parks and Open Space</b>				
<b>Reporting Period</b>		<b>11/02/2019 through 11/04/19 (48-hour report)</b>				
<b>TRANSFER FROM</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>
<b>TRANSFER TO</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>
<b>TRANSFER FROM</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>
<b>TRANSFER TO</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>
<b>TRANSFER FROM</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>
<b>TRANSFER TO</b>						
<b>Full Name of Committee</b>	<b>Address (physical)</b>	<b>Mailing Address (if different from physical)</b>	<b>Phone Num</b>	<b>Fax Num</b>	<b>Email Address</b>	<b>Total Amount of Transfer</b>

## DETAILED SUMMARY

Full Name of Committee **Protect Lakewood Parks and Open Space**  
Reporting Period **11/02/2019 through 11/04/19 (48-hour report)**  
Loans - Outstanding Balance, \$ **0.00**

### TOTALS DETAILED SUMMARY

<b>A</b>	Funds on Hand at the Beginning of Reporting Period (Includes Committee Funds Transferred)	
<b>B</b>	Total Monetary Contributions	\$ -
<b>C</b>	Total Monetary Contributions & Beginning Amount (line A + line B)	\$ -
<b>D</b>	Total Non-Monetary Contributions	\$ -
<b>E</b>	Total Expenditures	\$ 10,000.00
<b>F</b>	Funds on Hand at the End of Reporting Period (line C - line E)	\$ (10,000.00)

Print Registered Agent's or Representative's Name Mark Bowman  
OR

Print Candidate's Name

Date Signed November 2, 2019

I certify that I have read and understand the campaign finance code, Chapter 2.54 "Campaign and Political Finance in Municipal Elections" of the Lakewood Municipal Code.

By submitting this form, I am certifying the above information to be true and correct, to the best of my knowledge.