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CITY OF LAKEWOOD, 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								
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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								
66								
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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								
87								
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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								
132								
133								
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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)
152								
153								
154								
155								

STATEMENT OF NON-MONETARY CONTRIBUTIONS

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 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)	Electioneering Communication (Y/N)
1									
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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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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							
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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

[illegible]

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.

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

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

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

Print Registered Agent's or Representative's Name
OR

Mark Bowman

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.