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CITY OF LAKWOOD, COLO.

2019 OCT -1 P 1:02



City Clerk's Office  
Lakewood Civic Center  
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Lakewood, CO 80226-3127  
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OFFICE OF THE  
CITY CLERK

## REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee	The Jeffco Leadership Fund
Address of Committee	1942 Broadway, Ste. 314C
City, State & Zip Code	Boulder, CO 80302
Committee Type	Political Committee
Name and Address of Financial Institution	BBVA Compass 3804 W 32nd Ave, Denver, CO 80211

### 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 September 4, 2019 through October 3, 2019

# ITEMIZED CONTRIBUTIONS STATEMENT

Full Name of Committee **The Jeffco Leadership Fund**  
Reporting Period **09/04/2019 through 10/03/2019**  
TOTAL CONTRIBUTIONS \$ **- (total amount is calculated based on the entries below)**

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
1							
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
42							
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
108							
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## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
130							
131							
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151							

## ITEMIZED CONTRIBUTIONS STATEMENT

#	Date Accepted	Amount	Name	Address	City/State/Zip	Employer (if applicable, mandatory)	Occ (if a
152							
153							
154							
155							

# STATEMENT OF NON-MONETARY CONTRIBUTIONS

**Full Name of Committee** The Jeffco Leadership Fund  
**Reporting Period** 09/04/2019 through 10/03/2019  
**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)
1							
2							
3							
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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)
13							
14							
15							
16							
17							
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## STATEMENT OF NON-MONETARY CONTRIBUTIONS

#	Date Accepted	Fair Market Value	Name	Address	City/State/Zip	Description	Employer (if applicable, mandatory)
27							
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32							
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# ITEMIZED EXPENDITURES STATEMENT

Full Name of Committee **The Jeffco Leadership Fund**  
Reporting Period **09/04/2019 through 10/03/2019**  
**TOTAL EXPENDITURES** \$ **- (total amount is calculated based on the entries below)**

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
1						
2						
3						
4						
5						
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9						
10						
11						

## ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
12						
13						
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## ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
25						
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## ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
38						
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## ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
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## ITEMIZED EXPENDITURES STATEMENT

#	Date of Expense	Amount	Name	Address	City/State/Zip	Purpose of Expenditure
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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>The Jeffco Leadership Fund</b>				
<b>Reporting Period</b>		<b>09/04/2019 through 10/03/2019</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 **The Jeffco Leadership Fund**  
Reporting Period **09/04/2019 through 10/03/2019**  
Loans - Outstanding Balance, \$ **0.00**

### TOTALS DETAILED SUMMARY

<b>A</b>	Funds on Hand at the Beginning of Reporting Period (Includes Committee Funds Transferred)	\$ 400.00
<b>B</b>	Total Monetary Contributions	\$ -
<b>C</b>	Total Monetary Contributions & Beginning Amount (line A + line B)	\$ 400.00
<b>D</b>	Total Non-Monetary Contributions	\$ -
<b>E</b>	Total Expenditures	\$ -
<b>F</b>	Funds on Hand at the End of Reporting Period (line C - line E)	\$ 400.00

Print Registered Agent's or Representative's Name Albert Sahlstrom  
OR

Print Candidate's Name

Date Signed October 5, 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.