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CITY OF LAKEWOOD, COLO.
2019 SEP 18 A 9:34



City Clerk's Office
Lakewood Civic Center
480 S Allison Parkway
Lakewood, CO 80226-3127
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Fax: 303-987-7088
TDD: 303-987-7057

OFFICE OF THE
CITY CLERK

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Full Name of Committee	Our Lakewood
Address of Committee	241 Pierce St.
City, State & Zip Code	Lakewood, CO 80226
Committee Type	Issue Committee
Name and Address of Financial Institution	First Bank 7590 W. Colfax Ave Lakewood, CO 80214

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 December 19, 2019 through September 18, 2019

ITEMIZED CONTRIBUTIONS STATEMENT

Full Name of Committee		Our Lakewood						
Reporting Period		12/19/2019 through 09/18/2019						
TOTAL CONTRIBUTIONS		\$ 21.27 (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	5/1/19	\$ 21.27	Patricia Merkel	241 Pierce St.	Lakewood, CO 80226	University of Colorado	Laboratory Scientist	
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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)
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21								
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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)
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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								
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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)
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88								
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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								
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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 Our Lakewood									
Reporting Period 12/19/2019 through 09/18/2019									
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)	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									
14									
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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		Our Lakewood					
Reporting Period		12/19/2019 through 09/18/2019					
TOTAL EXPENDITURES		\$ 478.11 (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	12/3/18	\$ 228.11	Facebook	1 Hacker Way	Menlo Park, CA 94025	advertising	y
2	5/2/19	\$ 250.00	Bethany Gravell	2990 E. 17th St., 1101	Denver, CO 80206	website	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)
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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

Full Name of Committee	Our Lakewood
Reporting Period	12/19/2019 through 09/18/2019
TOTAL OUTSTANDING LOANS	\$ - (total amount is calculated based on the entries below)

[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		Our Lakewood				
Reporting Period		12/19/2019 through 09/18/2019				
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 Our Lakewood

Reporting Period 12/19/2019 through 09/18/2019

Loans - Outstanding Balance, \$ 0.00

TOTALS DETAILED SUMMARY

A	Funds on Hand at the Beginning of Reporting Period (Includes Committee Funds Transferred)	\$	456.84
B	Total Monetary Contributions	\$	21.27
C	Total Monetary Contributions & Beginning Amount (line A + line B)	\$	478.11
D	Total Non-Monetary Contributions	\$	-
E	Total Expenditures	\$	478.11
F	Funds on Hand at the End of Reporting Period (line C - line E)	\$	-

Print Registered Agent's or Representative's Name
OR

Patricia Merkel

Print Candidate's Name

Date Signed

September 18, 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.