

#### COMMITTEE REPORT OF CONTRIBUTIONS AND EXPENDITURES

A Committee Registration form must be filed with the Town Clerk <u>prior to taking</u> any contributions for a candidate or an issue, or making any expenditures on behalf of a candidate or an issue. Formation of a Committee requires that a separate bank account be opened in the name of the Committee, and that <u>all</u> contributions, contributions in kind, loans, and expenditures be reported on the forms provided by the Town Clerk.

	Name of Committee: CC	OMMITTEE TO ELEC	T JESS LOBAN	
	Name of Registered Agent: JE	SS LOBAN		
	Phone Number of Registered Agent:	303-330-4633		
	Email Address of Registered Agent:	JESSLOBAN@	LIVE.COM	
	Committee Type:	CANDIDATE		
	Name of Committee's Bank:	US BANK		
	x Regularly Scheduled Filin	g.		
	☐ Amended Filing. This arr	nends previous report fi	led on	
	☐ <b>Termination Report.</b> (Te	ermination Reports <b>M</b> U	ST Have a Zero Balanc	ce)
	Reporting Period - Beginning Date:	03/28/20	Ending Date:	06/26/20
Beginniı	ng Balance		\$238	
Contribu	itions			
Expendi	tures			
Ending I	Balance		\$238	
	I hereby certify that to the best of m this reporting period are accurately			eived and all expenditures made
	Registered Agent's Name:J	ESS LOBAN		
	Registered Agent's Name:	fun fu	<u> </u>	Date: 7/9/20
	If Applicable			
	Candidate Name:			
	Candidates Signature:	in fire	-	Date: _7/9/20

during

## **Detailed Report of Contributions**

Date Accepted:	Name (Last, First): Address:	
Amount:	City/State/Zip:	
Date Accepted:	Name (Last, First): Address:	
Amount:	City/State/Zip:	
<u>Date</u>		
Accepted:	Name (Last, First): Address:	
Amount:	City/State/Zip:	
<u>Date</u>	Nome (I + E' +)	
Accepted:	Name (Last, First): Address:	
Amount:	City/State/Zip:	
Date		
Accepted:	Name (Last, First): Address:	-
Amount:	City/State/Zip:	_
		_

# **Detailed Report of Expenditures**

r	T	
Date Incurred	Payable to:	
	Address:	
Amount:	City/State/Zip:	
	Purpose of Expenditure:	
Date Incurred	Payable to:	
	Address:	
Amount:		
	City/State/Zip:	
	Purpose of Expenditure:	
Date Incurred	Payable to:	
	Address:	
Amount:	City/State/Zip:	
	Purpose of Expenditure:	
Date Incurred	Payable to:	
	Address:	
Amount:	City/State/Zip:	
	Purpose of Expenditure:	

## **Detailed Report of CONTRIBUTIONS IN KIND**

Date Accepted:	Received from:  Address:  City/State/Zin:	-
Estimated Value:	City/State/Zip:  Nature of Contribution:	- - -
Date Accepted:	Received from:  Address:	_
Estimated Value::	City/State/Zip:  Nature of Contribution:	
Date Accepted:	Received from:  Address:	
Estimated Value:	City/State/Zip:  Nature of Contribution:	
Date Accepted:	Received from:Address:	
Estimated Value:	City/State/Zip:  Nature of Contribution:	

#### **Detailed Report of LOANS**

Date Accepted:	FROM:Address:
Amount:	City/State/Zip:  Purpose of Loan
Date Accepted:	FROM:Address:
Amount	City/State/Zip:  Purpose of Loan:
Date Accepted:	FROM:
Amount:	City/State/Zip:  Purpose of Loan:
Date Accepted:	FROM:Address:
Amount	City/State/Zip:  Purpose of Loan :