



RECEIVED

By Lisa Anderson at 8:22 pm, Sep 30, 2020

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Reports are due to the Town Clerk by 5pm on the scheduled reporting date with receipts.

All contributions, contributions in kind, loans, and expenditures be reported on the forms provided by the Town Clerk.

CANDIDATE OR COMMITTEE NAME:

Hollingshead for Castle Rock

Registered Agent: Ryan Hollingshead

Phone Number: 303-579-2710

Email Address: ryanh\_61@hotmail.com

Committee Type: [X] Candidate Committee [ ] Issue Committee

Name of Committee's Bank: FirstBank

[X] Regularly Scheduled Filing

[ ] Amended Filing. This amends previous report filed on \_\_\_\_\_

[ ] Termination Report (Termination Reports MUST Have a Zero Balance)

REPORTING PERIOD - Beginning Date: 8/24/20 Ending Date: 9/27/20

Table with 2 columns: Description and Amount. Rows include BEGINNING BALANCE, Contributions (+), Contributions In Kind (+), Loans (+), Expenditures/Expenditures In-Kind (-), and ENDING BALANCE.

Totals must match attached detailed reports.

I hereby certify that to the best of my knowledge and belief all contributions received and all expenditures made during this reporting period are accurately reflected in this report.

Registered Agent's Name: Ryan Hollingshead

Registered Agent's Signature: [Signature] Date: 9/30/20

If Applicable

Candidate Name: Ryan Hollingshead

Candidates Signature: [Signature] Date: 9/30/20

## Detailed Report of CONTRIBUTIONS

(For funds spent by the Candidate, list as a Contribution and also list amount under Expenditure)

Name of Committee: \_\_\_\_\_

<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> \$ _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____
<u>Date Accepted:</u> _____ Amount: \$ _____	NAME (First, Last): _____ Address: _____ City/State/Zip: _____

## Detailed Report of EXPENDITURES

(Also list In-Kind Contributions, money spent by the Candidate, bank and electronic payment fees, etc.)

Name of Committee: \_\_\_\_\_

<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____
<u>Date Expended:</u> _____ Amount: \$ _____	PAYABLE TO: _____ Address: _____ City/State/Zip: _____ Purpose/Description: _____ _____

**~ATTACH RECEIPTS FOR EXPENDITURES OVER \$100~**

# SpeedySignsUSA.com: New Order # 500028534

SpeedySignsUSA <sales@speedysignsusa.com>

Mon 9/7/2020 10:40 PM

To: Ryan Hollingshead <ryanh\_61@hotmail.com>



**Ryan Hollingshead,**

Thank you for your order from SpeedySignsUSA.com.

Your order confirmation is below. Thank you again for your business.

**Your Order #500028534 (placed on September 8, 2020 12:09:32 AM EDT)**

#### Billing Information:

Ryan Hollingshead  
1953 Avery Way  
Castle Rock, Colorado, 80109  
United States  
T: 3035792710

#### Payment Method:

##### Credit Card

##### Credit Card Type:

MasterCard

##### Credit Card Number:

xxxx-8380

#### Shipping Information:

Ryan Hollingshead  
1953 Avery Way  
Castle Rock, Colorado, 80109  
United States  
T: 3035792710

#### Shipping Method:

Federal Express - Ground (Receive in 2-8 Business Days)

Item	SKU	Qty	Subtotal
<b>Wire H Frame 6" x 24" 10" x 30" (Taller Frame)</b> Upgrade to Taller Stand	SIGN_COROFRAME_1-_TALL_10x30	100	\$168.00
<b>Corrugated Plastic 18"H x 24"W Custom Sign Design</b> 1026051-6713 <b>Print &amp; Finish</b> Double Sided  <a href="#">View Design</a> 	SSUSA_SIGN_CORR_18Hx24W_1-_DBL	100	\$369.00
Subtotal			\$537.00
Shipping & Handling			\$125.39
<b>Grand Total</b>			<b>\$662.39</b>

To view the status of your order at anytime please visit: [speedysignsusa.com/ordertracking](http://speedysignsusa.com/ordertracking)

Thank you again,  
**SpeedySignsUSA.com**

# Your Vistaprint Order Is Confirmed

Vistaprint <vistaprint@tm.vistaprint.com>

Thu 9/24/2020 8:41 PM

To: ryanh\_61@hotmail.com <ryanh\_61@hotmail.com>

## Your Vistaprint Order Confirmation



[Add Vistaprint to your address book](#)

My Account:8289-6312-6672

**THANK YOU FOR YOUR ORDER** Your Order Number: **QC68J-16A64-1F9** • [Track It](#)

Hi Ryan,

### Here are your order details:

Order Date: 9/24/2020  
Delivery Option (\*): Priority

You can expect to receive items in your order by:  
5" x 7" postcard - premium glossy front October 5

Payment Type : Mastercard

### Order Summary



### 5" x 7" postcards - premium glossy front

Town Council Postcard 1  
Qty: 750

Base Price ~~\$104.03~~ **\$78.01**

Item Total **\$78.01**

Merchandise: \$78.01  
Shipping Charges: \$17.99  
Sales Tax: \$3.74  
**Total: \$99.74**

### Sold By

Vistaprint Netherlands BV  
Hudsonweg 8  
Venlo, The Netherlands 5928LW

### Shipping To:

Ryan Hollingshead  
1953 Avery Way  
Castle Rock CO 80109  
US

[Edit Shipping Address](#)

(Address cannot be updated after your order has printed.)

### Billed To:

Ryan Hollingshead  
1953 Avery Way  
Castle Rock CO 80109  
US

Need Help?

[Click here to contact our Customer Care Team](#)



Absolutely Guaranteed Every time. Any reason. Or we'll make it right.

[Update Email](#) | [Privacy Policy](#) | [Contact Us](#)

This email address is unmonitored, so please don't reply.  
Offers expire 10/19/2020, at 11:59 PM (PT).

Limit one promo code per order. Savings will be reflected in your shopping cart. Discounts may vary by quantity and design and can't be applied to shipping and processing, taxes, subscription or design services, previous purchases or products on the Vistaprint Promotional Products site, unless otherwise specified. Additional fees may apply for shipping and processing, and taxes, unless otherwise noted. Free offers valid only on the lowest quantity of each product and not valid on more than 2 items per order.

Vistaprint may change or cancel this offer at any time. See website for details.

Vistaprint, a Cimpress Company | 275 Wyman Street | Waltham, MA 02451

# Detailed Report of CONTRIBUTIONS IN KIND

(Record Value of an In-Kind Contributions under Expenditures)

Name of Committee: \_\_\_\_\_

<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____
<u>Date Accepted:</u> _____  Estimated Value:  \$ _____	FROM: _____ Address: _____ City/State/Zip: _____ Nature of Contribution: _____ _____

# Detailed Report of LOANS

Name of Committee: \_\_\_\_\_

<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____
<u>Date Received:</u> _____ Amount: \$ _____	FROM: _____ Address: _____ City/State/Zip: _____