

Space Below For Office Use Only

Colorado Secretary of State
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REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	Committe to elect Chris Schoeneck Ward 4 <small>As Shown On Registration</small>
Address of Committee/Person:	372 South 31st Avenue
City, State & Zip Code:	Brighton, Colorado 80601
Committee Type:	Municipal Candidate Committe
Name and Address of Financial Institution	Well Fargo 15 South Main St. Brighton, CO 80601

COMMITTEE ID NUMBER

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 5)
- Check this box if this Report Contains Electioneering Communications Information

Reporting Period Covered: Date **Through** Date

Declared Total Spending (if applicable)
[Art. XXVIII, Sec. 4(1)]

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$0.00
2	Total Monetary Contributions (line 11)	\$1,000.00
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$1,000.00
4	Total Monetary Expenditures (line 19)	\$2901.00
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4)	\$0.00

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent OR the Candidate): *I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.*

Print Registered Agent's Name: Christopher Schoeneck

Registered Agent's Signature: Date: 12/5/2019

Print Candidate Name: Christopher Schoeneck

Candidates Signature: Date: 12/5/2019

DETAILED SUMMARY

Full Name of Committee/Person: Christopher Schoeneck

Current Reporting Period: 11-01-2019 **Through** 12-03-2019

Funds on hand at the beginning of reporting period (Monetary Only)		\$0.00
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$1,000.00
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$
8	Loans Received (From Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$
10	Returned Expenditures (from recipient) (From Schedule "D")	\$
11	Total Monetary Contributions (Total of lines 6 through 10)	1,000.00 \$
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$
13	Total Contributions (Line 11 + line 12)	1,000.00 \$
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$2,901.00
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
16	Loan Repayments Made (From Schedule "C")	\$
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$
19	Total Monetary Expenditures (Total of lines 14 through 17)	2,901.00 \$
20	Total Spending (Line 18 + line 19)	2,901.00 \$

Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: Christopher Schoeneck

WARNING: Please read the instruction page for Schedule “A” before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 11-20-2019	4. Name (Last, First): SRW Capital & Investments
2. <u>Contribution Amt.</u> \$ 1000.00	5. Address: 13680 Boston Street
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: Thornton, CO 80229
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: Funds drawn of Colorado bank note
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

1. <u>Date Accepted</u>	4. Name (Last, First):
2. <u>Contribution Amt.</u> \$	5. Address:
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip:
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, <u>mandatory</u>):
	9. Occupation (if applicable, <u>mandatory</u>):

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule B – Itemized Expenditures Statement (\$20 or more)

[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: Christopher Schoeneck

PLEASE PRINT/TYPE

1. <u>Date Expended</u> 11-14-2019	4. Name: <u>Metro West Newspapers</u>
2. <u>Amount</u> \$ 970.00	5. Address: <u>139 North Main Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Brighton, CO 80601</u>
	7. Purpose of Expenditure: <u>Newspaper advertisements</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11-20-2019	4. Name: <u>Negri Media Communications</u>
2. <u>Amount</u> \$ 700.00	5. Address: <u>235 Alpine Street</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Longmont, Colorado</u>
	7. Purpose of Expenditure: <u>Printed and media advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> 11-30-2019	4. Name: <u>DME Acquires</u>
2. <u>Amount</u> \$ 1231.00	5. Address: <u>710 West New Hampshire Avenue</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: <u>Deland, FL 32720</u>
	7. Purpose of Expenditure: <u>Printed advertising</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication